

**Partner Recognition – Annual Luncheon March 6, 2019  
The Lark, Hastings**



City of Superior



Ideal Market - Superior



Brodstone Memorial Hospital



Harvard Public Schools



Mary Lanning Minority Health Program



Quality Healthcare Clinic - Sutton



Michelle Kohmetscher



Webster County Sheriff's Office



Hastings Police Department



Morrison Cancer Center



Mary Lanning Healthcare Clinics



UNL Extension - Adams County



ASAAP



Horizon Recovery and Counseling



Market Y Antojitos Delicias

South Heartland District Health Department  
Partner Recognition – Annual Luncheon March 2019



Hastings Fill-N-Chill



Hastings YMCA



Hastings Public Schools



Hastings St. Cecilia Health Ministry



Healthy Hastings



Adams County

Not Pictured: UNL Extension Webster County  
UNL Extension Nuckolls County  
UNL Extension Clay County  
Village Pharmacy - Red Cloud

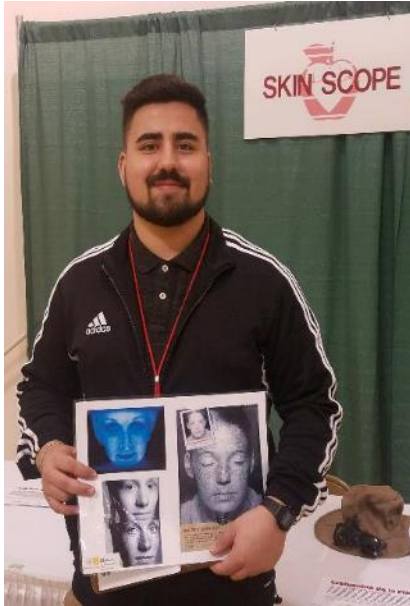


Tips and Tools for Putting Military Cultural Competency into Action  
 Presenter - CMSgt (Ret) Teri Clark M.Ed.  
 Statewide VetSET Project Coordinator

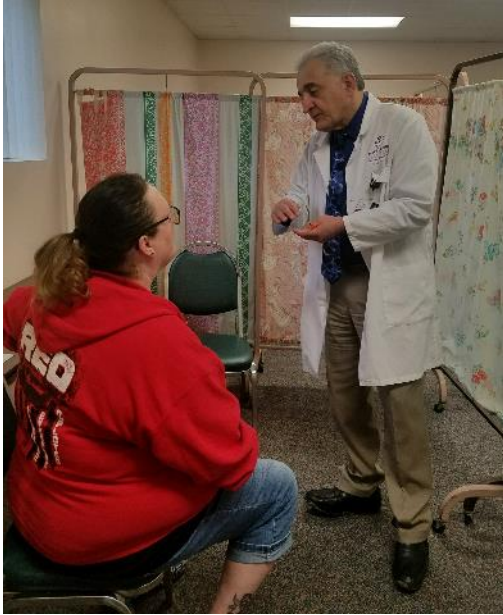
**Vital Signs Health Fair**



### Vital Signs Health Fair



### Vital Signs Health Fair





**Regional Community Health Worker Meeting**



# Bi-monthly Report on the Ten Essential Services of Public Health

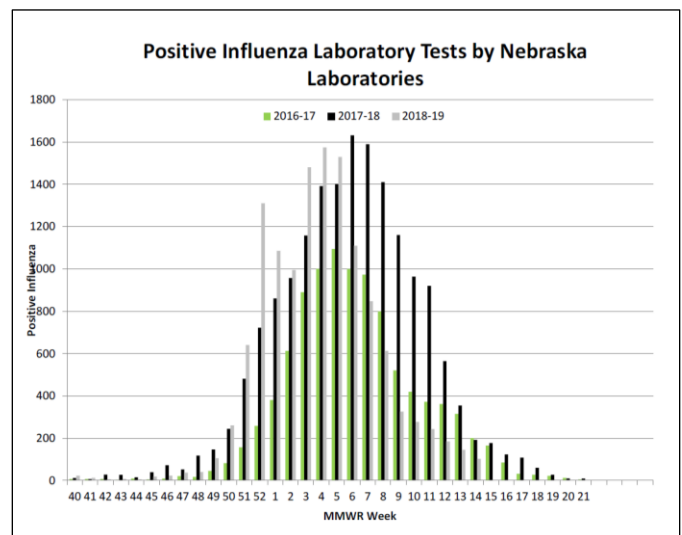
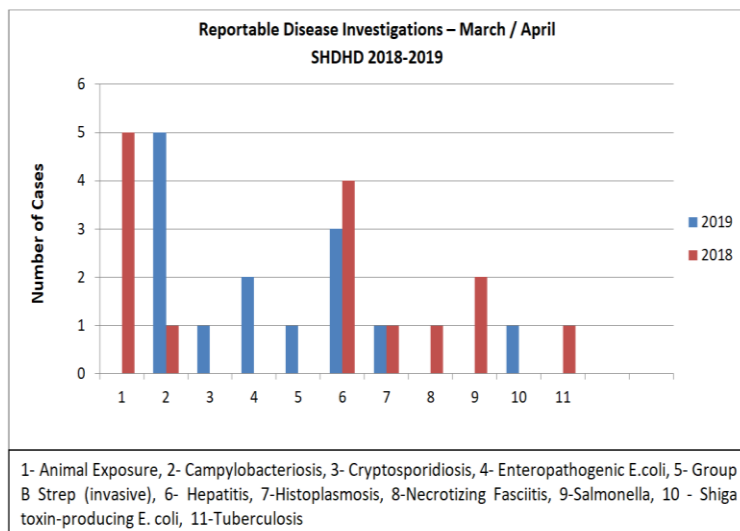
## 1. Monitor health status and understand health issues facing the community.

*(What's going on in our district? Do we know how healthy we are?)*

- *How do we collect and maintain data about conditions of public health importance and about the health status of the population, and how do we make it available to our partners and our community?*
- *What major problems or trends have we identified in the past 2 months?*

### Local

- Surveillance data, water violations, and other [health information is made available](#) on our website, through links on our website, on SHDHD's Network of Care website, through news releases and interviews to various forms of media, and upon request from partners or others.
- **Influenza**- Early data provided by the CDC indicated that the flu vaccine for the 2018-2019 season was a pretty good match: For children aged 6 months–17 years, overall vaccine effectiveness was 61%. The overall estimated effectiveness of seasonal influenza vaccine for preventing medically attended, laboratory-confirmed influenza virus infection was 47%. According to Walgreens Flu Index, the South Central and Lincoln areas of Nebraska ranked #1 in the US for influenza activity based on medications ordered in January. Influenza continues to decrease during the month of April with hospitalizations continuing to decrease.
- **School Surveillance**: Absences continued to be above average during the month of March for some schools, but attendance in April has improved with several schools reporting no absences due to illness during the week of April 17<sup>th</sup>, 2019.



### National

- **Measles Outbreak**: According to most recent update on April 11<sup>th</sup>, 555 cases of measles have been confirmed in the US this year. The states that have reported cases to CDC are Arizona, California, Colorado, Connecticut, Florida, Georgia, Illinois, Indiana, Kentucky, Maryland, Massachusetts, Michigan, Missouri, Nevada, New Hampshire, New Jersey, New York, Oregon, Texas, and Washington, (none in Nebraska this year). As of April 15, 2019, there have been 329 confirmed cases of measles in Brooklyn and Queens since October. The State of New York is currently imposing a \$2,000 daily fine for infected individuals who are found in a public place.

## 2. Protect people from health problems and health hazards.

*(Are we ready to respond to health problems or threats? How quickly do we find out about problems? How effective is our response?)*

- *What key activities did we complete in the past 2 months to prevent, minimize, and contain adverse health events and conditions resulting from communicable diseases; food-, water-, and vector-borne outbreaks; chronic diseases; environmental hazards; injuries; and health disparities*
- *What activities did we complete for emergency preparedness (e.g., planning, exercises, and response activities)?*

- **Emergency Preparedness & Response:**
  - J. Morgan was an **evaluator for a live shooter Full Scale Exercise (FSE)** at Kearney which involved an incident at the Event Center. The FSE encompassed the activities at the scene, EMS, Law Enforcement and the two hospitals that would normally receive patients. JM's role was to evaluate the Incident Command System at the CHI hospital.
  - Nebraska's public health emergency response coordinators continue to work on a **new Emergency Response Plan** that includes references to Capabilities established by CDC, and there is discussion state-wide regarding the best format of the plan.
  - The **State Full Scale Exercise has been cancelled** due to the real life flooding that occurred that can be used in place of the FSE.
  - SHDHD's role in the state flooding disaster was to offer assistance to any local health department who needed it. We activated our PHCC to monitor the local, regional and state needs and determine our roles. We gave the DEQ water test kits we had to East Central DHD as we did not need them. We contacted EM's for any impacts in our counties - none needing our assistance. Used necessary FEMA forms. Developed a news release for flood cleanup and mold awareness and prevention.
- **Lead Investigations:** Starting this January, DHHS has implemented a new reporting system through Red Cap for grant reporting and home lead investigations.
- **Radon Testing:** 27 radon test kits were sold in March & April to residents interested to know the radon levels in their homes.

### 3. Give people information they need to make healthy choices.

#### **(How well do we keep all people and segments of our district informed about health issues?)**

- *Provide examples of key information related to physical, behavioral, environmental, social, economic, and other issues affecting health that we provided to the public.*
- *Provide examples of health promotion programs that we implemented to address identified health problems.*
- **Satellite office:** Staff covered monthly hours in Superior and Guide Rock in March and April. Topics included were Emergency Preparedness, West Nile Virus, and flooding issues in Nebraska.
- **Community sign boards:** were utilized to get information out (located in Edgar, Nelson, Lawrence, Red Cloud, Bladen, Roseland, and Kenesaw). March topics were Colorectal Cancer and Sun Safety. April topics were Public Health Month and Prescription Drug Misuse.
- **Radon testing and mitigation:** Continue to receive calls and share information on radon testing and mitigation, including one contractor. The contractor in Hastings/Ayr seems to be doing a good job responding to mitigation problems in the SHDHD district according to satisfied customers. Radon kit sales have increased because of the cold weather and there is sometimes a problem with the mail in getting the kits from Nebraska to the lab. An example is that 2 kits were mailed by the same person the same day, yet it took 4 days longer for one kit to get to the lab in North Carolina. This sometimes takes it past the date for reliable results.
- **Hand Washing:** SHDHD led the Scrubby Bear Presentation to 20 pre-school students at Hasting YMCA.
- **News releases, public health columns, ads and interviews:** Topics covered in March and April included Sun damage & skin cancer, healthy communities/county health rankings, and Vital Signs Health Fair. SHDHD's Annual Report for 2018 was also published in all 6 area newspapers. News releases that were published included Colorectal Cancer: Preventable, Beatable, & Treatable, Keep your Teens Safe & Healthy during Prom & Graduation Season, Officials: Stay Safe During Flood Clean Up, and South Heartland Challenge to Communities: Take Action to Be Healthy. Public Health columns and articles that were published consisted of: Health Department lauds community partners, Annual Health Fair Saturday & Sunday at Fairgrounds, Taking a Stand against Falls, and Nuckolls County Outranks Adams, Clay, & Webster in Health Rankings. SHDHD, along with YMCA Blood Pressure Program and Hastings Public Schools participated in local interviews for the NET "Good, Healthy Life Series" which will air in May.
- **SHDHD Facebook:** In March, the number of people reached was 961. For April, the number of people reached was 1,304. The topics for Facebook and twitter in March were "Thank You Service Men and Women", Colon Cancer Awareness and Vital Signs Health Fair promotion. Materials about national disaster response and mold were also posted. April's topics included "Thank You Service Men and Women," information/awareness about what public health is and promotion of physical activity.
- **Head Start:** Families new to the Hastings area requested health information about influenza and cold weather. A presentation was provided during the month of March to encourage flu vaccination and allow for questions.

- **Tai Chi Moving for Better Balance Classes:** Beginning Tai Chi classes ended in March for Nelson, Superior classes will end in April, and classes will end at the YMCA in May. Classes in Hastings at the Golden Friendship Center started on April 2. Advanced Tai Chi classes are offered all year in Hastings at the Golden Friendship Center and YMCA, and in Red Cloud at the Community Center, for individuals that have completed the beginning 12-week class. Falls Risk Assessment were performed on 113 individuals 60 years of age and older at the Vital Signs Health Fair in Hastings. Working on a pilot with a clinic to promote STEADI (Stopping, Elderly, Accidents, Deaths and Injuries) screenings and assessments to older adults who have a fear or have fallen.
- **Smart Moves (Diabetes Prevention Program (DPP):** Brodstone, SHDHD (at Head Start) and ESU9 have completed three months of classes, and Mary Lanning has completed two. Village Pharmacy (Red Cloud) is still planning to start a class in 2019, date TBD. SHDHD submits monthly data reports for Brodstone, SHDHD's Head Start and Village Pharmacy every six months to the CDC.
- **YMCA's SMBP Program:** South Heartland's community health worker continues to have an active role serving as Healthy Heart Ambassador for this program, holding office hours each Monday from 12:30 - 3:30 to assist participants in learning the correct way to measure their blood pressure, with Nutrition program on the 4<sup>th</sup> Monday of each month @ noon. This collaboration with the YMCA in delivering their Self-Monitored Blood Pressure program allows us to engage and continue working with women identified for health coaching through the NDHHS WISEWOMAN Program (Well-Integrated Screening and Evaluation for Women across the Nation). The YMCA also continues to work with SHDHD and ML's Community Health Center to establish a bidirectional pathway to communicate with providers about program success and patient outcomes.
- **Opportunity House (South Central Behavioral Services day rehabilitation site):** SHDHD provided colorectal cancer education and screening promotion in March and sun safety in April.
- J Morgan and Steve Eddy, NOAA, are developing a plan to inform people of days when the air quality is such that they should wear protective equipment (masks) if they have respiratory problems. We are working with Nebraska DEQ, NDHHS, and Lincoln-Lancaster Health departments. We will be working with news media to get the information out and add information to our website as well as links to the NWS, National Weather Service.

#### **4. Engage the community to identify and solve health problems.**

##### ***(How well do we really get people and organizations engaged in health issues?)***

- *Describe the process for developing SHDHDs community health improvement plan (CHIP) and/or implementing your work plan.*
- *Provide examples where we engaged the public health system and community to address health problems collaboratively. What were the evidence-based strategies that were implemented?*
- **Access to Health Care:**
- **Obesity:**
  - **Nutrition Advisory Board (NAB):** The Nutrition Advisory Board is now meeting quarterly. In April, there were 6 attendees with Mary Lanning's Shannon Frink leading a focus on nutrition basics.
  - **Prevention Connection, Superior's follow up to their Walking Summit:** Superior Design team continues to work towards the capacity to apply for funding to support a trail in their park.
  - **Prevention Connection: Healthy Hastings follow up on action summit:** Healthy Hastings continues to meet to fulfill their action plan. The team met in March and April to discuss the action plan items and progress the City of Hastings has made on the trail expansion process, as well as plans for Active Hastings Week and Downtown Farmers Market.
  - **Prevention Connection: Sutton action summit:** SHDHD has brought on a new community for 2019 walkability efforts. Sutton is just in the early planning stages where they are gathering community leaders who will actively plan, participate and promote improved quality of life in Sutton by promoting physical activity.
  - **Prevention Connection: Smart Moves, Diabetes Prevention Class (DPP):** SHDHD continues to work with partners in implementing this evidence-based yearlong program, established the capacity to serve 3 of the 4 counties with Smart Moves. Partners include Brodstone Memorial Hospital, Mary Lanning Healthcare and Village Pharmacy of Red Cloud. SHDHD has also expanded to two worksites - ESU 9 in Hastings and Head Start.
  - **SHDHD WoW (Worksite Wellness):** During the month of March, staff were encouraged to complete the vital signs health fair challenge (7 staff completed) to learn what other organizations were promoting at their booths. In April, staff were challenged to participate in a strength finders' activity. Staff were encouraged to

identify how another staff member used or did not use their strengths during a meeting, then to reflect after the meeting on how that staff member's strengths had an impact on the meeting outcomes.

- **Whole Schools, Whole Community, Whole Child (WSCC):** SHDHD has been actively connecting with schools about wellness activities, attending Hastings Public District and Harvard Wellness Team meetings, completing with schools the School Health Index assessment and attending the second (of two) School Health Institute. Harvard, Hastings and SHDHD attended the second school health institute. Teams learned about "Alliance for a Healthier Generation" website and tools, after school programming and other efforts around the state. They also analyzed their school wellness policy and developed an action plan they hope will improve the implementation of that policy. Schools continue to expand their wellness teams by adding members and improving the environment at their schools. SHDHD also attended the Action for Healthy Kids summit, where we learned about best practices, collaborated with partners and co-presented with Neb. Dept. of Education on District School Wellness activities.
- **EWM Health Hub Clinic Connections:** SH Health Hub staff connected with the nursing staff at Hastings Family Care Clinic in March. Staff briefly reviewed Every Woman Matters Program enrollment and provided additional information about breast and cervical cancer navigation, transportation support available, and the Nebraska Colon Cancer screening program (FOBT kits and resources for colonoscopy available to those without insurance or with high deductibles that have a positive FOBT result).
- **Cancer**
  - **Cancer Coalition:** South Heartland Cancer Coalition met in April. Data shared from the skin cancer and colon cancer education and screening activities held across the district demonstrates the impact being made in those areas. The coalition is meeting bi-monthly in 2019.
  - **Mary Lanning Healthcare Cancer Committee:** ML Cancer Committee met in April. This group helps guide and oversee the activities of the ML cancer program. As ad hoc members of this group, we work with the program to collaborate on community cancer education and screening projects (which helps ML meet their COC Accreditation requirements and helps both ML and SHDHD meet community health improvement goals).
  - **Lung Cancer:** Radon detection kits remain available at SHDHD, satellite offices and UNL Extension. Nebraska Quitline cards are being included with all FOBT kits prepared for distribution.
  - **Colon Cancer:** During March we held our annual colon cancer screening campaign with education and screening promoted through posters and a press release. FOBT screening kits were and will continue to be offered free of charge to men and women age 50-74 who have not had any screening in the past year. Through our work with partners in Sutton, Clay Center, Blue Hill, Red Cloud, Superior and Hastings, as well as community and worksite health fairs, 268 screening kits have been distributed. Two clients have tested positive. SHDHD's public health nurse is providing case management to all clients with positive results. We reached our goal of sending out reminders to complete the FOBT kit within the 3 week period following Vital Signs Health Fair, our primary FOBT kit distribution point (194 reminders completed).
  - **Cervical Cancer:** Human Papillomavirus (HPV) vaccine educational materials are displayed and shared at monthly VFC clinics. Community Health Workers connect families to resources for vaccination of children through our VFC clinic and for cervical cancer screening for women through the EWM program.
  - **HPV Cancer Prevention:** HPV banners in English and Spanish are on display at the Community Health Center.
  - **Breast Cancer:** Using the Encounter Registry web-based tool, health hub staff continue to identify women in need of breast, cervical and colorectal cancer screening as well as resources to lifestyle change. Needs are assessed including health coverage and other barriers that might stand in the way of a woman completing cancer and cardiovascular screenings. Those without insurance who meet the Every Woman Matters program requirements are assisted with completing the Healthy Lifestyle Questionnaire to enroll in the program In March/April staff did not enroll any new clients in to the program. Through an arrangement with ML, one of their interpreters worked with our staff to reconnect with minority women from our women's health event last fall. 8 women were navigated to breast and/or cervical cancer screening. None of them qualify for the EWM Program. 3 completed the screening/s. 5 still have financial barriers (radiology fee) preventing them from completing mammograms.
  - **Prostate Cancer:** Testing For Prostate Cancer booklets from the American Cancer Society were made available at all community and worksite health fairs that provided lab work.
  - **Skin Cancer:** South Heartland Cancer Coalition members from Hastings and Superior provided education and screening activities for health fairs in respective counties.
- **Substance Abuse:** SHDHD is participating in a discussion with partners to bring the film series "Do No Harm- The Opioid Epidemic" to the Hastings Museum Theater.

- **Mental Health: VetSET/Making Connections** – Military Cultural Competency Training held after SHDHD Annual Luncheon on March 6 with 13 community members and 7-SHDHD staff attending the training. Three SHDHD that missed the Military Cultural Competency Training, completed the Level 1 Orientation training. **Save the Date:** Military Family Fun Day will be June 29 from 9:00 am – 4:00 pm at Timberlake Ranch Camp. Activities include hiking trails, petting zoo, obstacle course, disc golf, swimming, canoes and paddleboats, fishing, and sand volleyball. Meal included (Taco Salad, Rice, Apples, Salad, Cookies and drink). Need to register for the meal. Other activities available High ropes course, blob, paintball, and trail rides (must pre-register for these activities). Watch for more information and registration to follow in May.
- **Vital Signs Health Fair Board:** 2 SH staff are members of this board which met in March, for the final planning meeting prior to the fair held late that month, and in April for wrap-up after the event.
- **Other Collaborations:**
  - **Hastings Health Ministry Network:** SHDHD staff attended Health Ministry meetings in March and April using this opportunity to share community program and project updates at each meeting. One staff member has also completed the Faith Community Nurse course and represents a Hastings congregation.

## 5. Develop public health policies and plans.

*(What policies promote health in our district? How effective are we in planning and in setting health policies?)*

- *What policies have we proposed and implemented that improve population health and/or reduce disparities?*
- *Describe how our department engaged in agency-specific strategic planning to develop a vision, mission, and guiding principles that reflect the community's public health needs, and to prioritize services and programs.*
- *What plans are we developing and implementing to improve our department's quality and effectiveness (plans for quality improvement, workforce development, branding, communication, and performance management)?*
- **Grant Proposals (Plans)/Awards/New Funding:**
  - **2019 Immunization Funding:** submitted proposal for SHDHD immunization program funding for the period Jan 2019 – June 2019 for \$10,300. Subaward executed 03.07.19.
  - **Title V CLAS and Literacy Innovation Project:** SHDHD was awarded \$5000 to complete SH's proposed innovation project. 6 month project was supposed to begin in April, but subaward not yet executed as of 04.26.19
  - **Community Health Worker (CHW) workforce development:** SHDHD signed an interlocal agreement with DHHS to provide local coordination of two CHW regional activities in spring/summer 2019. \$8,800
  - **Walkable communities:** SHDHD was awarded funding (signed 03.25.19) to implement the Nebraska Walkable Communities Initiative process in the new target community of Sutton and to continue supporting the other communities of Superior and Hastings to implement their action plans.
- **Performance Management System framework, PMS:** The performance management system measure is included in SH's PHAB Action Plan, "to integrate performance management throughout SHDHD and continue training to develop staff and BOH understanding of performance management system". The QI and PM plans will be reviewed and revised. The Action Plan objectives and actions include training for staff and updates for the BOH. The new NACCHO QI Survey will evaluate QI and PM knowledge.
- **Community Health Assessment (CHA) Report:** The Community Health Assessment, 2018 has been shared with partners and posted on the health department website. This report demonstrates the broad community participation, data sharing and results of the CHA processes.
- **Community Health Improvement Plan (CHIP), 2019-2024:** Strategies are being developed for addressing the five identified health priorities (Access to Care, Mental Health, Substance Misuse, Obesity & Related Health Conditions and Cancer). The final CHIP (plan) is in progress and will be shared with partners and on the SH website. Partner-led steering committees will oversee implementation of the strategies with SH and other district partners. This will allow data compilation, measurement of progress, and assessment for strategy revisions for the annual CHIP reporting (SH) and readiness for interim CHA/CHIP (SH and partners).
- **SHDHD Annual Report:** 284 hard copies of the Annual Report have been distributed.
- **Public Health and Primary Care Integration for Falls Prevention:** SHDHD is meeting with selected clinic managers to encourage implementation of the STEADI (Stopping Elderly Accidents, Deaths & Injuries) initiative. STEADI consists of three core elements: Screen patients for fall risk, Assess modifiable risk factors, and Intervene to reduce risk by using effective clinical and community strategies (such as referral to Stepping On and Tai Chi programs). Combined, these elements can have a substantial impact on reducing falls, improving health outcomes, and reducing healthcare expenditures. Two Mary Lanning Clinics are interested in collaborating with SHDHD to pilot STEADI.

- **Federally Qualified Health Center:** Application submitted April 10 by Heartland Health Center (G.I.) to expand with satellite clinic in Hastings. SHDHD provided a letter of support and recruited letters of collaboration from local stakeholders to support the application.

## 6. Enforce public health laws and regulations.

*(When we enforce health regulations are we up-to-date, technically competent, fair and effective?)*

- *Describe our efforts to educate members of our community on public health laws, policies, regulations, and ordinances and how to comply with them.*
- *What laws and regulations have we helped enforce to protect the public's health?*
- **Nebraska Clean Indoor Air Act:** No smoking violations reported this period.
- SHDHD receives **food recall alerts** from the Nebraska Department of Agriculture. We also maintain a link on our website to the FDA Food Safety webpage.
- Tracking **NE legislature activities** using SHDHD's legislative review process. Board of Health provided letters of support on LB 327 Behavioral Health Rate bill and LB 480 Appropriations to local health departments with respect to preventive health programs. Called all members of Revenue Committee regarding LB 710 Tobacco Tax. Contributed local radon testing data by county to produce a current statewide radon data summary for Senator DeBoer for LB 130 Radon Resistant New Construction.

## 7. Help people receive health services.

*(Are people receiving the medical care they need?)*

- *Describe the gaps that our department has identified in personal health services.*
- *Describe the strategies and services that we have supported and implemented to increase access to health care and establish systems of personal health services, including preventive and health promotion services, in partnership with the community.*
- **Immunization: Vaccine for Children Program:** In March/April, clinic staff delivered 128 vaccines to 45 patients at two monthly clinics. Of those 45 patients, 31 (69%) had no insurance, 9 (20%) had Medicaid, 5 (11%) were underinsured. 20 of the 45 patients (44%) were new to the clinic. Total donation collected from clients for March/April = \$264.00 (avg. \$2.08 per immunization or \$5.91 per patient).
- **Immunization: Adult Immunization Program:** In March/April, clinic staff delivered Tdap to 3 adults (age 19 and over). All 3 adults were new to the clinic and were uninsured.
- **Hastings College (HC) Influenza education and vaccine promotion:** A final meeting for the 2018/19 project period was held with the student volunteers to review student and staff influenza vaccination surveys and to brainstorm some ideas for new project volunteers and ideas for 2019/20.
- **Community Health Worker (Bilingual):** New CHW hired in March.
- **Community Health Worker (English Only) / Every Woman Matters and Health Coaching:** March/April: continue to do SMBP checks on five participants: one participant finished the 3<sup>rd</sup> & 4<sup>th</sup> in office hours blood pressure check, the 2<sup>nd</sup> & 3<sup>rd</sup> nutrition program. One participant completed 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> office hours and 1<sup>st</sup> and 2<sup>nd</sup> Nutrition program, and one participant completed 2<sup>nd</sup>, 3<sup>rd</sup>, and 4<sup>th</sup> office hours and 1<sup>st</sup> and 2<sup>nd</sup> Nutrition program. Two new participants completed 1<sup>st</sup> office hours. March/April: No health coaching – waiting for authorization from the state to continue health coaching.

## 8. Maintain a competent public health and personal health care workforce.

*(Do we have a competent public health staff? How can we be sure that our staff stays current?)*

- *Describe our efforts to evaluate LHD staff members' public health competencies. How have we addressed these deficiencies?*
- *Describe the strategies we have used to develop, train, and retain a diverse staff.*
- *Provide examples of training experiences that were provided for staff.*
- *Describe the activities that we have completed to establish a workforce development plan.*
- **Performance Management (PM):** Determining training to advance understanding of performance management and expand PM implementation (“to integrate performance management throughout the HD and continue training to develop staff and BOH understanding of performance management system” PHAB Action Plan).
- **The Workforce Development Plan:** The QI-PM Team is setting implementation goals for succession planning/knowledge transfer development and cross training opportunities for critical positions. Job description revisions are progressing to include core competencies and staff evaluations are identifying training opportunities for individual development.

- **CLAS and Literacy Improvement and Innovation Project (Title V):** The CLAS and Literacy Innovations Project continues through 2019 and includes statewide and cross-sector partners sharing a common interest in advancing equity in the Nebraska population. J. Johnson participates with this project. They have invited local health departments to “help us understand better how to support organizations in efforts to adopt CLAS and literacy practices through small quick-launch, rapid-cycle projects”, April 1 - Sept. 30, 2019.
- **State Steering Committees:** SHDHD participated in the Whole School, Whole Community, Whole Child State steering coalition quarterly meeting.
- **Public Health Conference:** Three SHDHD staff members participated in Nebraska Public Health Conference and heard from the new CEO of DHHS (Dannette Smith) and gained skills and new perspectives on a variety of topics, including: improving health in the era of health care reform; functioning as chief health strategists; using data, evidence, guidance and stories to build healthy communities; building public health workforce, preemption – a threat to public health progress; using asset-based community development practices to help communities help themselves. There was also a legislative panel on Engaging the Unicameral on hot topics in public health with the Honorable Senators Howard, Morfeld and Cavanaugh.
- **Nebraska Rural Health Conference:** M. Bever attended the 30<sup>th</sup> Annual NeRH Conference and heard about policy updates from the Federal Office of Rural Health, funding and data updates from Health Resources and Services Administration (HRSA) Region 7, learned about suicide prevention initiatives from the Nebraska State Suicide Prevention Coalition, and heard from the VA Rural Health Resource Center about improving health and care of rural veterans. She will be sharing resources she picked up for staff and local stakeholders, including suicide prevention toolkits for primary care offices.
- **Action for Healthy Kids:** SHDHD attended and presented at the Action for Healthy Kids Summit.
- **Trauma Informed Care Webinar:** SHDHD participated in “Trauma-Informed Supervision: It’s for everyone” webinar.
- **Association of Public Health Laboratories/CDC hosted a regional meeting** for Pulse Net regarding changes related to Whole Genome Sequencing (WGS) that became a national standard in March. State Labs are now required to send WGS information to local health departments in order to more accurately identify clusters. This meeting was a three day review of outbreaks, attended by Jessica Warner.
- **Accurate Blood Pressure Measurement Training:** J. Korth shared with Creighton University College of Nursing faculty information on accurate blood pressure training modules available from the Department of Health and Human Services. Staff shared a free training from NDHHS, “Accurate Blood Pressure Measurement Training”, with nurses at the Hastings Health Ministry Network Meeting.
- **Community Health Worker (CHW) Training:** Liz Chamberlain completed Community Health Worker training through the Utah Department of Health: Advocacy Skills, Diabetes & Prediabetes, High Blood Pressure, Supporting Tobacco Cessations, Motivational Interviewing, Depression & Anxiety, and Navigating Health Insurance. There are two more trainings in June to complete (Providing Social Supports and Substance Abuse).
- Newly hired bilingual community health worker Odeth Mendez completed **CHW training modules through NDHHS**. She has also completed required modules in advance of the Healthy Heart Ambassador training for the YMCA’s blood pressure self-monitoring program scheduled in May.
- **NESIIS – Nebraska State Immunization Information System:** New user training was held in March for Odeth and current users were given the opportunity to work with and ask questions of Ernad Klipic, trainer for NDHHS, who provided the training opportunities.
- **SHDHD provided training on Public Health for Creighton Nursing Program at Hastings** to 17 nursing students and two faculty. In addition to a history of public health in Nebraska, an overview of the core functions and 10 essential services, and examples of our department’s local activities and interventions, students were prepped on SHDHD’s specific Vital Signs Health Fair prevention/screening activities so they were ready to provide effective volunteer assistance at the health fair.
- **CHW Regional Meeting:** SHDHD hosted the first of two regional activities related to CHW’s in Nebraska to develop the workforce and the CHW role as respected and valued members of integrated teams, working to improve population health outcomes in community and clinical settings. The purpose of these activities is to identify and amplify the CHW experience and contributions in addressing unmet population health needs and addressing health and opportunity disparities. 15 out of 18 registered participants from six different agencies attended the meeting.

- J Morgan is working with other regional ERC's to [apply the new PHEP Capabilities to the current ERP](#). The section we are working on is the Emergency Operations Center and how it is used in the health departments.
- J Morgan, along with Cody Samuelson, TRIMRS Coordinator, have developed and are teaching a [NIMS 100 and 700 course, and an ICS Command course](#) to CHI in Kearney as well as others to help them understand how the ICS Command Structure should work.
- J Morgan attended a NRDHRE Grant funded [workshop on Surge Capacity](#).

**9. Evaluate and improve and interventions. (Are we doing any good? Are we doing things right? Are we doing the right things?).**

- *Provide examples of our evaluation activities related to evidence-based public health programs.*
- *Provide examples of QI projects that we have completed or are in process.*
- **QI projects:** Client interaction tracking – Access-based system we were looking at was too cumbersome & no longer in use at other HDs, SH is exploring other methods for client tracking/satisfaction. The records retention policy is completed and we are continuing to develop the SH retention schedule.
- **Full Scale Exercise After Action Report, AAR:** Jim Morgan has completed the AAR's for the TTX and FSE (11.28.19) with assistance from regional ERC's, Emergency Managers, and Garry Steele. The AAR's developed met the needs to be HSEEP (Homeland Security Exercise and Evaluation Program)-compliant for NDHHS.
- **Evaluations are Providing Feedback on Effectiveness of Training.** Examples from this period include Military Cultural Competency training with Teri Clark on March 6. Post training evaluation results: 94% of participants agreed or strongly agreed that they had a greater understanding of military culture as a result of the training; 88% of participants agreed or strongly agreed that they gained new skills or learned new information from the training that will improve the way they work with veterans and their families; 88% agreed or strongly agreed that they had a greater understanding of the challenges facing veterans and their families as a result of the training; 100% of participants would recommend this training to other professionals. Participants provided suggestions of other stakeholders who would benefit from this training.

**10. Contribute to and apply the evidence base of public health. (Are we discovering and using new ways to get the job done?)**

- *Provide examples of evidence-based programs our department is implementing.*
- *Describe how we have collaborated with researchers to conduct any research studies (e.g., completed surveys, interviews, or focus groups).*
- **Evidence Based:**
  - In the [Every Woman Matters/Community Health Hub](#) project, SHDHD uses evidence-based strategies to address health inequities and improve screening rates for cervical, breast and colon cancers.
  - [Tai Chi – Moving for Better Balance and Stepping On:](#) are evidence-based programs for falls prevention in older adults who have a fear of falling or that have fallen. In the South Heartland District, beginning and/or advanced [Tai Chi classes](#) are offered in all 4 counties. Tai Chi classes are set up to meet twice a week for 12 weeks for 1 hour. [Stepping On classes](#) meet once a week for seven weeks for 1½ to 2 hours and then a booster session in 3 months; classes will be offered in Hastings the first part of June 2019.
  - We are continuing to use the evidence-based [Reminder Recall](#) process for immunization clinic clients to improve immunization rates.
  - [Public Health Accreditation Board \(PHAB\) Standards and Measures:](#) Completion of accreditation will align SHDHD with these evidence-based measures, improving quality and performance. The SHDHD Action Plan completion is in progress, due in December, 2019.
- **Research/Contributing to the Evidence Base of Public Health:**
  - SHDHD participated in a case study that RTI International conducted on behalf of the Centers for Disease Control and Prevention (CDC) (60 minute telephone interview). This case study was a component of the Colorectal Cancer Control Program (CRCCP). The purpose of the case study was to understand how selected programs are integrating the implementation of breast, cervical, colorectal cancer, and other chronic disease interventions, as well as how these programs are addressing sustainability.

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(See next page for “How we made a difference”)



## Stories: How we made a difference....

### Youth Learn How to be Sun Safe

In 2016, SHDHD received funding to support a small project called Sun Safe South Heartland, which was designed to address the high rates of skin cancer cases and deaths in our district. As one component of this project, we hired a recent Hastings High School graduate to help us develop sun safety education for a youth audience. During that summer, Sophia Pankratz developed an interactive presentation appropriate for middle and high schools students and helped implement it the following year through a peer program at HPS.

Fast forward to 2018...one of South Heartland's Cancer Coalition partners identified skin cancer prevention and screening as a focus for their community outreach activities. Sally Molnar, director of Mary Lanning's Morrison Cancer Center (MCC), is passionate about helping to prevent skin cancer. She and her staff, Heidi DeGodt and Donna Addleman, have updated the interactive presentation developed by Sophia and have been taking the show on the road to share with youth at schools across the district. Their message is that skin cancer is preventable if sun safe practices are utilized.

In 2018, the MCC began outreach to youth ages 12-17 years by giving presentations on sun safety and why catching skin cancer early is beneficial, reaching 357 students in 5 schools. To date in 2019, they have reached 488 students in 7 local schools. Students complete a pre and post questionnaire to determine how much they already know and how much new information they learn from the presentations.

Success story: Overall feedback from students has been overwhelmingly positive. Students are actively engaged when watching the YouTube videos and the skin cancer photos. The 2019 pre-questionnaire results showed that the majority of students report they use sun screen, but 35% reported that they did not use sun screen. Following the presentations, students are demonstrating increased awareness of sun safe practices and 95% of students are understanding the importance of being sun safe to prevent skin cancers later in life. Students are also indicating their intent to practice sun safe behaviors, with 87% of the students indicating after the presentation that they are more likely to use sun screen.

In the remainder of 2019, MCC will continue to expand their reach to more students in more schools throughout the health district!