

South Heartland District Health Department Public Health in Action July-August 2021



Military Family Fun Day @ Timberlake Ranch Camp on August 21, 2021





South Heartland District Health Department Public Health in Action



July-August 2021

Promoting HPV, Flu and COVID vaccination at CCC New Student Day



Booth at Kool Aid Days with Mary Lanning's Morrison Cancer Center promoting HPV vaccination as cancer prevention.



July-Aug Pfizer COVID-19 Vaccine Clinics at Allen's in Hastings



Farmers Under Stress presentation in Blue Hill in partnership with UNL Extension and Blue Hill Clinic as part of a South Heartland projected supported by Central States Center for Agricultural Safety and Health (CS-CASH)





SHDHD's Booth at Hasting's National Night Out promoting Fall Prevention, Military Family Fun Day, Building Healthy Families and West Nile prevention



July-Aug 2021



South Heartland District Health Department Public Health in Action

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Tai Chi Class held in Sutton



Accreditation Coordinator Janis Johnson submits SHDHD's first annual report to the Public Health Accreditation Board (PHAB), a step in the process of maintaining Accreditation.



SHDHD receives our final large shipment of PPE to support area COVID-19 response needs for the next several months.







The COVID Chronicles Go behind the scenes with public health professionals in two districts, bringing you into the room as they investigate hotspots for the

virus, provide testing and coordinate with first responders and overcrowded hospitals.





Guests enter on the "red carpet" for a private screening of The COVID Chronicles, an event for SHDHD and Mary Lanning with introduction by Nebraska Public Media's investigative reporter and documentary producer, Bill Kelly.



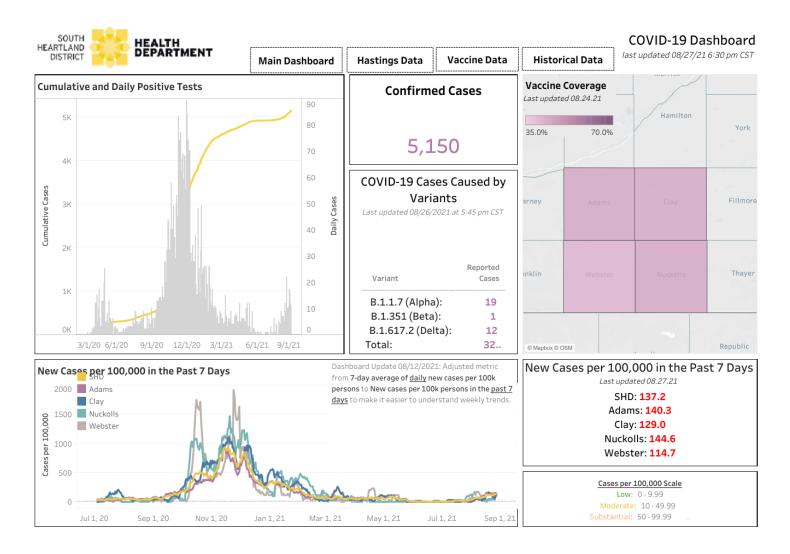
July-August 2021 for SHDHD BOH Meeting 09.01.21

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

- 1. Assess and monitor population health status, factors that influence health, and community needs and assets (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?

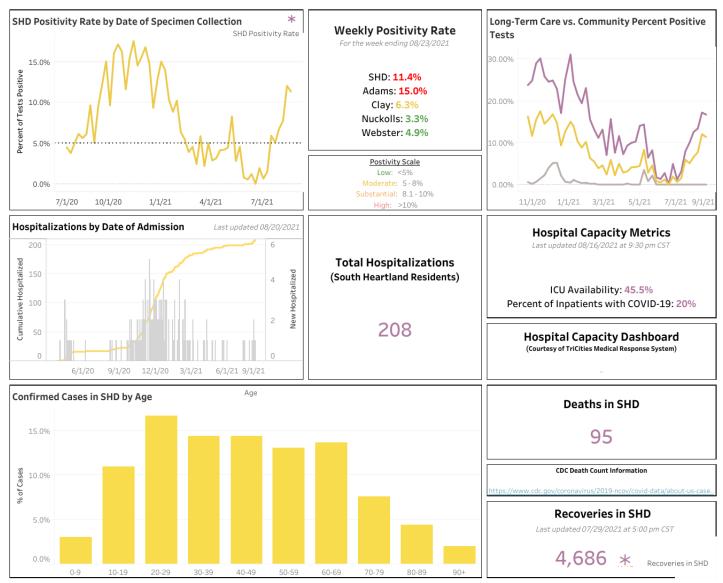
<u>Local</u>

- Surveillance data, water violations, and other <u>health information is made available</u> 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. A key role of the health department is to monitor what is going on in our communities and share data back to the community so residents can be aware and make their own informed decisions (Essential Public Health Services 1 and 3). Using Tableau as our data platform, SHDHD continues to share an immense amount of data. SHDHD shares color-coded metrics on new cases and positivity to help the public understand the level of community transmission. The vaccine dashboard page shares progress on COVID-19 vaccine administration, percent of population partially/fully vaccinated and the demographic breakdown. While the Governor has lifted the State of Emergency and DHHS has taken down the State's COVID dashboard, SHDHD will continue to maintain our COVID and Vaccine dashboard pages for the foreseeable future so that South Heartland residents, local organizations and others have a source for information about pandemic status while our staff continue to investigate cases, monitor for variant, administer vaccine and implement other mitigation strategies.
- Coronavirus (COVID-19) Dashboard: www.southheartlandhealth.org





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Coronavirus (COVID-19) Pandemic Situation Update:

- As of August 27, 2021, a cumulative 5,150 South Heartland residents have tested positive for COVID. Hospitalizations and cases are increasing and have been above the widespread community transmission of >8 per 100,000 per day since 8/7/2021. 224 Investigations have been initiated/completed by South Heartland staff during this reporting period with the high number of weekly cases being 62 for the week ending 8/28/2021.
- Thirty-two individuals in our jurisdiction have tested positive for a variant of concern (VOC). Four variants have been identified: 19 individuals have tested positive for the B.1.1.7 (UK) variant, 12 have been infected with the B.1.617.2 (Delta) variant, 1 individual (and presumably a vaccinated household member) has tested positive for the B.1.351 (South Africa) variant, and 1 resident is presumed to have been infected with the B.1.429 variant (California) variant. SHDHD continues to submit specimens for sequencing on individuals who meet criteria. All specimens sequenced during this reporting period have resulted as the Delta variant.
- ➢ SHDHD COVID weekly positivity (percent positive tests) has been above 5% since 7/24/2021.
- SHDHD Surveillance staff have been working on investigations of several cluster and outbreaks including a wedding with over 400 attendees, four daycare facilities, a religious camp, three cases returning from Sturgis, a large funeral, a healthcare facility, family clusters and cases related to domestic travel.



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- COVID testing is currently available through local provider's offices, urgent care centers, some hospitals, some pharmacies and the federally qualified health center (Heartland Health Center) in Grand Island. We are looking to expand testing to make it more accessible to individuals who may not have a provider or insurance.
- Monitoring and Tracking updates: Continuing to use dashboard created by TRIMRS for South Heartland district's hospital capacity data (linked to it from SHDHD COVID-19 dashboard). Continuing to track Hastings-specific data on daily new cases, 7 day rolling average of new cases, and weekly positivity, and providing weekly updates to the COVID-19 Vaccine Dashboard to track residents vaccinated (partially/fully) and their demographics.
- SHDHD's dashboard tracks deaths related to COVID. This process requires death certificates to be reviewed by DHHS and sent to each jurisdiction. Following the CDC practice, SHDHD includes confirmed (PCR positive) and probable (Antigen positive) COVID-related deaths in our counts. This information is important in understanding fatality rates related to illness. Current Case Fatality Rate: 1.8%

Community Health Assessment.

Hospital and United Way continue partnering with SH to complete the Community Health Needs Assessment (CHNA) requirement for non-profit hospital IRS reporting every 3 years. SHDHD has received a preliminary data analysis of assessments that include locally collected data from United Way and health data from state and local sources. The team is modifying the community themes and strengths survey for residents and is planning focus group discussions about access to care, impact of pandemic, and health disparities. This year the data collection and analysis will have a stronger minority and special population focus (Hispanic, rural ag and veteran populations) in addition to overall population.

2. Investigate, diagnose, and address health problems and hazards affecting the population (*Are we ready to respond to health problems or threats? How quickly do we find out about problems? How effective is our response?*)

- Key activities 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
- Emergency preparedness (e.g., planning, exercises, and response activities)
- COVID-19 Preparedness and Response: See COVID Outbreak Situation Update, above. In addition, SHDHD continues to be responsible for receipt, inventory, repackaging and dissemination of PPE for our jurisdiction. To help keep key partners informed, SHDHD sent 12 Alert Sense notifications (July/August) to over 140 individuals each time and issued 14 news releases to media and partners. Staff check the Nebraska Electronic Disease Surveillance System, DOMO (Test Nebraska reporting system, ended in July), and fax machine output multiple times each day and begin follow up on positive cases immediately by issuing isolation instructions and conducting contact investigations. In late July and August, vaccine demand has gradually increased and we continue messaging on the safety and importance of vaccination. SHDHD is promoting layered prevention, including mask-wearing, social distancing, hygiene and other prevention. We have been coordinating with Two Rivers and Central District health departments for consistent principles for working with schools.
- <u>Tuberculosis Investigation</u>: SHDHD is in the process of working with DHHS to investigate a report of an active case of Tuberculosis. DHHS has been notified and additional information including information about close contacts is pending.
- > <u>Plan Reviews</u>: event plans are no longer required (since May, 2021), but calls requesting guidance continue.
- PPE distribution totals: From the beginning of March 2020 through the August 2021 SH has distributed out: Masks – 212,915, Surgical Masks – 293,750, Cloth Masks – 50,500, Face Shields – 34,759, Goggles – 3,005, Hand Sanitizer – 1,345 containers, Wipes – 10,061 containers, Gloves – 825,800, Gowns – 191,251,
- Thermometers 748, Bleach 12 gal., Eco Lab Disinfectant 3 containers. <u>Lead Testing in Drinking Water</u>: SHDHD is continuing to recruit participants in the lead testing program offered
- by the State to test for lead in drinking water. Those eligible to take part in this program are elementary, preschools, day care centers and in home daycares. Invitations to participate were sent to all public schools and Head Start in our district and we are working on expanding to daycares, childcare centers, preschools and parochial schools.

3. Communicate effectively to inform and educate people about health, factors that influence

it, and how to improve it (How well do we keep all people in our district informed about health issues?)

- Examples of key information related to physical, behavioral, environmental, social, economic, and other issues affecting health that we provided to the public.
- Examples of health promotion programs that we implemented to address identified health problems.
- <u>Community sign boards</u>: Education to encourage COVID vaccination and promote childhood immunizations (Immunization Month).
- News releases, public health columns, ads and interviews: COVID activities have increased in these last two months and continues to be the dominate topic of news releases and communications. In July/August, SHDHD put out 11 press releases and granted phone interviews for TV and radio media requests, focusing primarily on COVID-19-related issues and a safe return to school. SHDHD coordinated at Zoom-based press briefing with 7 local experts (health care and behavioral health providers) to provide current information about COVID-19 and to address vaccine concerns. The press briefing was attended by 8 members of the press (radio, TV and print media). It was also recorded and posted on our website and shared on Facebook.
- <u>County Fairs</u>: Staff provided educational information at county fairs at Clay, Nuckolls and Adams County on West Nile, VET SET and COVID vaccinations.
- Kool Aid Days: Promoted HPV vaccination to prevent cancers associated with the human papilloma virus and provided information on COVID-19 vaccination.
- <u>Central Community College New Student Event</u>: Education on HPV, Influenza and COVID-19 vaccinations promoted to college students.
- Radio Advertising: SHDHD continues running PSAs on KHAS Platte River radio network and KRFS in Superior to promote getting the COVID vaccine and practicing prevention. On May 20, 2021 first two community members recorded a PSA thanking those that have received their COVID-19 vaccine and challenging those that have not to get vaccinated. In total there will be at least nine different recordings of the message playing on the Platte River radio network. In July a new script was added using the voices of six providers from the South Heartland District. The message focused on the delta variant and the importance of vaccination. We also continued using four of our original recordings. Two scrips are in development focusing on layers of prevention and personal responsibility.
- SHDHD Facebook: These past two months SHDHD's Facebook/Twitter posts have been primarily focused around COVID-19 information and vaccination with promotion of cancer prevention (Sun safety), back to school vaccinations and Building Healthy Families. SHDHD also increased the FB and Twitter posts, on both English and Spanish pages. FB views for May/June were 1,478 and for July/August were 15,602.
- Website: Our website "views" increased for July (3,753 views) and August (4,941), compared to May and June, but is still lower than our max views during January (19,204 views). Website views continue to be higher than our pre-COVID-19 (~450 views/mo). Staff have worked to update and improve our website pages.
- <u>COVID-19 Information for Public</u>: Call volume from the public and providers is increasing and remains a priority for SHDHD staff to answer all calls/triage messages accurately, timely, professionally and transparently. Also providing information on layered prevention and promoting DIY contact tracing tool.
- COVID-19 Information for Schools: SHDHD coordinated with Two Rivers and Central District health departments to bring together local and state experts to share information with school administrators from ESUs 7, 9, 10, and 11 about COVID-19 and children. Guests were: Dr. Daniel Leonard, pediatrician; Dr. Gary Anthone, Chief Medical Officer for the Nebraska DHHS, Div of Public Health; Dr. Susan Lindblad, child psychologist with Hastings Public Schools; and Dr. James Lawler, Director of the Global Center for Health Security at UNMC.

4. Strengthen, support, and mobilize communities and partnerships to improve health (How well do we really get people and organizations engaged in health issues?)

- Process for developing SHDHDs community health improvement plan (CHIP) and/or implementing our work plan.
- Examples where we engaged the public health system and community to address health problems collaboratively.



- Community Health Improvement Plan (CHIP) implementation: The Obesity Steering Committee met July 27th with nine members attending, Cancer met July 26th with eight members attending, and Access to care met July 22nd with six members attending. All three committees have a meeting date set in in October. SHDHD is also currently working on a dashboard that will display the progress for each priority area. Mental Health Steering Committee is the only committee that has not met yet.
- Substance Misuse CHIP Priority: SHDHD continues to carry out our drug overdose prevention workplan with the substance misuse steering committee. SHDHD has discussed with area CASA on how to expand/bring back teen drug court, how to promote substance misuse resources found in 211 and how the drug takeback program and be expanded/improved. All worked is completed with community partners.
- Mental Health CHIP Priority:
 - <u>Rural Behavior Health (BH) Network</u>: The Rural BH Network continues to meet on schedule, but virtually. The network continues to implement their strategic plan evaluating how the group can promote screeners among the area clinics to increase referrals and early detection. The network is continuing to utilize a no-cost extension from the original planning grant (funds unable to be used due to COVID responsibilities January-June 2021) and now, has received a 2nd extension for the funds to continue planning with the network. With the extension of funds approved, we will be able to implement a pilot project using the evidence-based behavioral health screening tools the network has prioritized (e.g., screening tools for depression, substance use, suicide, etc.), so that more residents can be appropriately referred to treatment and resources.
 - MHAT/QPR Suicide Prevention Training: Provided QPR training for two different organizations (Horizon Recovery & Edgewood Vista) 17 participants completed the training and pre/post assessments.
 - <u>VetSET/Making Connections</u>: Military Family Fun Day was August 21, 2021 from 9:00 am 4:00 pm at Timberlake Ranch Camp, with 64 participants (18 Families) for the event. Activities included: High Rope Course, Blob (water activity), Trail Rides, Hiking Trails, Obstacle Course, Disc Golf, Swimming, Canoes/Paddle Boats, Fishing and Sand Volleyball. Meal was included: Hamburger/Hotdog, Chips, Salad, Cookie, and Drink. Veteran Service Organizations included: Mobile Vet Center, VA Nebraska/Western Iowa Veteran Outreach Specialist, GI VA Suicide Prevention Outreach, GI VA Whole Health, Military One Source, NE Veteran Affairs, MNCA Dental and Cease-Fire Ministries.
- > Obesity & Related Health Conditions CHIP Priority:
 - <u>CS-CASH</u>: Two SHDHD staff assisted with the Blue Hill clinic's health fair. They provided educational materials and administered the Ag health and safety screening/risk assessment, completing 17 assessments. UNL Extension provided training during the Communicating with Farmers Under Stress at the Blue Hill Community Center on August 18 with 44 participants attending the free training/meal.
 - <u>SHDHD Healthy Kids Workgroup, HKW</u>: The nine grant participants have made over \$19,000 in purchases toward their goals to reduce childhood obesity through physical activity and nutrition. The nine grant participants submitted success stories and six of the nine completed the final evaluations, with 100% feeling participation in the grant helped them achieve the federal physical guidelines for aerobic physical activity and muscle strengthening physical activity.
 - <u>Building Healthy Families</u>: SHDHD has led the implementation team through several meetings and planning for a second cohort of families to start the program in September. The first cohort has completed 15 of the 18 sessions. The core team (SHDHD, Mary Lanning, UNL Extension and Hastings YMCA) has received additional funds to support staff time and increase sustainability!
 - Prevention Connection: Smart Moves, Diabetes Prevention Class (DPP): Superior started a new Smart Moves class in January 2021 with 13 participants that have lost 134 lbs. or 4.61% weight loss since the start of the program. 8 participants have lost more than the 5% weight lost target. Brodstone Hospital received CDC Full Recognition for their diabetes prevention program (Smart Moves) through August 2026.
 - <u>Whole School, Whole Community, Whole Child (WSCC)</u>: SHDHD has started a new year of working with Harvard (meeting monthly with their wellness team) and HPS (meeting quarterly with their team) to implement wellness activities throughout their buildings.
- Cancer Priority:
 - o Mary Lanning Healthcare Cancer Committee: Next sched. quarterly meeting is Thursday, Sept. 9, 2021.
 - <u>Colon Cancer</u>: FOBT Colon Cancer Screening kits continue to be distributed by mail, through our front office and by ML's Community Health Center. SHDHD distributed 5 kits during July/Aug.



- <u>Cancer Grant</u>: Provider MOU to support cancer risk factor assessment policy development as well as a provider toolkit has been completed with 2 clinics (Adams and Webster). Each clinic implemented process changes to improve their clinic screening rates.
- Schools Collaboration: Area schools have started their school year. SHDHD is collaborating with schools, ESU-9, NE local health directors and the Nebraska Department of Education on guidance for Safe Return to Learn during 2021-22 school year.
- Injury Prevention: Tai Chi Moving for Better Balance & Stepping On Classes: Stepping On class (July 20-August 31, 9:30-11:00 am) continues at the Golden Friendship Center in Hastings with 7 participants. Beginning Time and Go (TUG) was an average of 12.1 seconds and at the end of the 7 weeks. Stepping On meets once a week for seven weeks for 1 ½ hours with guest experts talking about fall related topics. Sutton started a Tai Chi class with 2 participants and the YMCA-Hastings started the Tai Chi class in August. Tai Chi classes are starting in Superior, Nelson and Blue Hill in September.
- Surveillance staff have been coordinating with daycares/preschools, K-12 schools and colleges (Hastings College and CCC) in order to have plans in place for individuals testing positive for COVID, as well as those exposed. We are using Sharefile to provide information to schools on a daily basis.

5. Create, champion, and implement policies, plans, and laws that impact health

(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)?
- New Plans (Grant Proposals, Subawards and Contract Projects):
 - Work plans for other grants and subawards:
 - Drug Overdose Prevention (through August 31, 2022; \$24,849) implement strategic plan for substance misuse
 - <u>CDC COVID Equity</u> (through June 2023; \$155,200) used to assess, strengthen, educate and enhance access to COVID needs (testing, contact tracing and vaccination).
 - <u>Minority Health Initiative (MHI) Funds (through June 2022; \$83,913.82)</u> used to assess minority health needs and create an action plan to improve them.
 - Immunization (through June 2022; \$39,519) Vaccine for Children Program, Adult Immunization Program
 - <u>COVID Immunization (through June 2022; \$248,500)</u> Increase COVID-19 vaccination capacity, including among high-risk and underserved populations, ensure high-quality and safe administration of COVID-19 vaccines, Increase vaccine confidence through education, outreach, and partnerships, Ensure equitable distribution and administration of COVID-19 vaccines, Develop and implement community engagement strategies to promote COVID-19 vaccination efforts, Use immunization information systems to support efficient COVID-19 vaccination.
- > SHDHD COVID-19 AAR: nearing completion of the review and after-action report for August 2020 May 2021.
- COVID-19 Response Plans: SHDHD continues to follow and promote evidence-based guidance from the CDC, NE DHHS, Professional Associations, UNMC Specialty Teams and other sources for all of the COVID-19 response activities. New data and evidence-based practices are shared by UNMC Global Center for Health Security and other partners at weekly briefings. Policies and recommendations are data-driven, based on current evidence. Currently implementing response plans with safe return to school for K-12 and colleges.
- COVID-19 Vaccine Distribution Plan: During July/August SHDHD has managed 3144 doses of COVID-19 vaccine. SHDHD administered 228 doses at clinics and made 65 transfers during weekly distributions delivering 2702 doses of vaccine to providers in all four counties for administration in local areas. 31 transfers were made in Adams Co., 18 in Clay Co., 8 in Nuckolls Co. and 8 in Webster Co. SHDHD traveled to receive 9 transfers of incoming vaccine from CDHD in GI to utilize available vaccine in the state prior to expiration date.
- Vaccine FDA Approval/EUA (Emergency Use Authorization): SHDHD continues to follow and promote to district COVID-19 vaccine providers, all CDC, FDA, and ACIP recommendations for vaccine approval and Emergency Use Authorization guidance for COVID-19 vaccination procedures, VAERS reporting (vaccine adverse event reporting system), and stringent adherence to vaccine management and handling procedures.

6. Utilize legal and regulatory actions designed to improve and protect the public's health *(When we enforce health regulations are we up-to-date, technically competent, fair and effective?)*

- Describe 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: None this period.
- NE Directed Health Measures: The DHM ended on May 6 and the Governor ended the emergency declaration on June 30 at 11:59 PM. Three executive orders, 1 for telehealth and 2 for the labor department remain. TestNE ended on 7/31 with the last tests on 7/18. The State took down their public-facing COVID and Vaccine data dashboards, but continue to provide weekly updates. On August 26, Governor Ricketts announced that due to a hospital staffing crisis, a new DHM would be in effect to limit elective surgeries through September. He also made an Executive Order to waive licensing requirements for hospitals in order to streamline authorization of credentials for retired or inactive healthcare professionals, deferring continuing education requirements, and suspending statutes around new healthcare providers who are seeking a license.
- Limitations on Gatherings: The DHM effective May 6th removed all restrictions limiting gathering sizes.
- SHDHD's Quarantine and Isolation Authorities: SHDHD continues to provide education and instruction on isolation or quarantine for individuals who test positive for COVID-19 or who may have been exposed to individuals who tested positive. Staff provide education over the phone, and provide letters for entities to contact groups who may have been exposed, e.g., parents in a daycare. When the State Directed Health Measures ended in May, the authority for these actions remains in the statutory authorities outlined in TITLE 173 COMMUNICABLE DISEASES CHAPTER 1 REPORTING AND CONTROL OF COMMUNICABLE DISEASES.

7. Assure an effective system that enables equitable access to the individual services and care needed to be healthy (*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: SH's immunization team made small adjustments in the safeguards utilized during delivery of the August clinic but due to increasing cases will re-implement all previously used safeguards to ensure that all staff and patients are protected to the best of our ability. Immunization clinics were held in July and August with COVID-19 vaccination offered to all VFC/AIP patients. Staff delivered 60 vaccinations to 29 VFC patients at the combined clinics. Of the 29 patients,17 (59%) were uninsured and 12 (41%) had Medicaid. Six (21%) were new patients to the clinic with referrals coming from local providers, Head Start family support workers and family/friend referrals. Twelve (35%) patients were provided Spanish interpretation throughout their visit. Donations totaling \$32.24 were collected during the July and August clinics.
- Immunization: Adult Immunization Program: 5 adults were vaccinated for Tdap and COVID-19 during the July and August clinics.
- <u>Reminder/Recall to improve vaccination rates</u>: 39 reminder/recall contacts were made in July and August. Eight (21%) scheduled appointments and 3 were not interested in scheduling at this time. Several have moved, were getting shots through a health care provider, phones were disconnected or we were not able to reach them.
 - Community Health Worker (Bilingual): VFC Clinics for July and August 2021:
 - Enrolled 8 new patients–6 VFC, 2 AIP

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- Provided interpretation to 12 patients-10 VFC and 2 AIP
- Community Health Worker (English Only) / Every Woman Matters (EWM) and Health Coaching: Health Coaching EWM clients for July 2021: Completed 1st Health Coaching call with 2 participants, 2nd Health
- Coaching call with 0 participants, 3rd Health Coaching call and Every Woman Matters assessment with 3 participants. Withdrew 1 participant because unable to make a connection in last 3 months. <u>August 2021</u>: Completed 1st Health Coaching call with 0 participants, 2nd Health Coaching call with 2 participants, 3rd Health Coaching call with 2 participants, 3rd Health Coaching call with 2 participants, 3rd Health Coaching call with 2 participants.



- <u>COVID-19 Testing</u>: COVID testing is less accessible with the loss of TestNebraska, but is still available through private clinics, some pharmacies and the federally qualified health center (Heartland Health Center) in Grand Island. Testing is also available through NPHL for individuals who qualify.
- COVID-19 Vaccinations: Weekly public clinics held in the space at the west end of Allen's were restarted July 28th with the intent to hold 6 clinics to increase access for school age vaccination prior to school starting. Clinic demographics revealed that more than half of clients were adults who have now decided to get vaccinated. We plan to continue weekly clinics through September. We are starting to see a slight increase in residents fully vaccinated each week. Vaccination rates: 53% of eligible (12+) SH Residents with at least 1 dose, 48.7% of eligible SH Residents completed 2 doses. Of the total population: 44.7% with at least one shot, 40.2% fully vaccinated.

8. Build and support a diverse and skilled public health workforce

- 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.
- The Workforce Development Plan: We continue to work on processes for professional development (evaluation) for all staff including revised job descriptions with core competencies. We are providing standardized orientation for all new staff and implementing required "all-staff" training, which included CLAS Standards training in August.
- Technology Utilization: SHDHD staff are trained in variety of different software/technologies to improve work outputs, such as Qualtrics survey software used for surveys, collecting/analyzing data and translating the press releases into three different languages; Salesforce used for COVID- 19 case investigation and reports; and VRAS which is used for COVID-19 vaccine data entry and scheduling appointments. All three software are used by LHD across the state of Nebraska.
- Statewide COVID Updates: The ED, at least, continues to participate on weekly statewide COVID briefings and shares with staff and other stakeholders current status updates or other relevant information along with links to the recorded COVID updates from Dr. James Lawler, Global Center for Health Security.
- SMBP / EWM Health Coaching: Community Health Worker completed yearly HIPAA training thru the YMCA Self Monitor Blood Pressure program.
- Staff COVID Briefings: Conducted 1X weekly to facilitate the sharing of current situational status, evidence-based practices, updates and needs, etc. Specific briefings/meetings include surveillance-epi team, vaccination team and vaccine promotion/COVID messaging.
- Staff Roles for COVID Response Activities: We continue to analyze our staffing needs and cross-train staff specifically to support the COVID workload and meet the changing needs. Support staff is also assisting with completing non-COVID work to ramp up plans & processes that had been overshadowed with COVID responsibilities.
- NALBOH Annual Meeting (virtual): Board president, Exec. Director, and Interim Asst Director attended. Interesting sessions on a variety of topics, including workforce development (Improving the Core Competencies for Public Health Professionals to Support a High-Performing Workforce), Accreditation (Accreditation and Performance Improvement: Important for Board of Health Growth and Development), and public health law (The COVID-19 Pandemic - Legal Stories from the Field and Lessons to be Learned).
- Culturally and Linguistically Appropriate Services, CLAS: Twelve staff participated in online training, August 20. This training improves the quality of our services to all individuals to reduce health disparities and achieve health equity by respecting the whole individual and responding to the individual's health needs and preferences.

9. Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement (*Are we doing any good? Are we doing things right?*).

- Examples of our evaluation activities related to evidence-based public health programs.
- Examples of QI projects that we have completed or are in process.
- Accreditation Annual Report: PHAB Year 1 Annual Report was submitted on July 21, 2021. On August 5th we received the following: "Congratulations! You have completed the Annual Report process for this year. Section 2 of your Annual Report was reviewed. You can view the comments about Section 2 by logging on to e-PHAB, https://www.e-phab.org, and going to the Annual Report tab. Your next Annual Report is due on: 03-31-2022".
- > QI-PM Plan: Goal 2: Support implementation of the QI/PM training outlined in the Workforce Development Plan



and explore other training for QI and PM. (Crosswalk: SP Goal 4) –CLAS training for all staff in August. Scheduling Strengths Coaching and a workshop, followed by some Team-Building training this fall (MTBI: Psychological preferences in how people perceive the world and make decisions and how this plays into team function; FIRO-B: The Fundamental Interpersonal Relations Orientation[™] (FIRO®) assessments help people understand their interpersonal needs and how those needs influence their communication style and behavior.)

- Quality Improvement Projects: Single Audit with Auditor of Public Accounts is uncovering some opportunities for future QI projects.
- Strategic Plan action plan and dashboard: Goal 1: Maintain PHAB Accreditation: Completed 1st accreditation annual report and working on Year 2 due 03.31.22. Goal 3: Prioritize Services and Programs: Providing leadership and serving as backbone organization for implementing the Community Health Improvement Plan (CHIP) with 4 of 5 Steering Committees meeting virtually in June/July to assess strategies, successes, goals & revisions. October meetings are scheduled.
- Community Health Improvement (CHIP) Implementation: Four of five steering committees have met to address progress and needs for the CHIP priority goals. We are also working on mini-community health assessment during 2021 which will be used for mid-point corrections and adjustments to the Community Health Improvement Plan edits to the community survey are nearing completion for the Core Team to review.
- <u>COVID19 Response QI/PM</u>: Continuing process improvement (policies and procedures) and assessing how we can improve as we progress through the pandemic. The focus is on data analysis and process documentation to identify opportunities and successes for quality improvement.
- Performance Management (PM): Maintaining current processes for COVID-19 mitigation and have implemented strong contact tracing processes with epi team. Four new staff trained in QI-PM.
- Data Sharing: We continue to use Tableau as our data platform, sharing COVID-related data, updating some daily and some weekly, and striving to improve every day. SHDHD reviews data for accuracy and makes corrections as needed. We conduct continuous review of the dashboard metrics and data presentation updating the chart format and explanations as needed, and adding new pages of data as new analysis is completed and making adjustments as case definitions or best practices change.

10. Build and maintain a strong organizational infrastructure for public health

- <u>Reminder: This is a new essential service</u>, launched with the revised 10 Essential Public Health Services in September 2020. It replaces the "contribute to the evidence-base," which was incorporated elsewhere, and provides focus on a domain that is important to accreditation. This service includes seven components, but only two highlighted for this reporting period:
 - Employing communications and strategic planning capacities and skills
 - Ramped up focus on communications capabilities, utilizing a new staff member's talent to enhance our Facebook presence and planning to utilize boost opportunities. Planned a Zoom-based press briefing, working with NALHD to support, record, edit and post to utube, promoting link on our website and facebook and cross-training staff so we can do this (press briefing) and other short educational videos or interviews in-house in the future.
 - o Managing financial and human resources effectively
 - Annual budget proposal takes into account needed increases in personnel costs and uncertainty of funding for COVID response.

Success stories: How we made a difference....

SHDHD held their <u>4th annual Military Family Fun Day</u> on August 21, 2021 at Timberlake Ranch Camp with 64 participants (18 Families). What a wonderful cool day (76 degrees) to be out in nature and enjoying fun with family and friends. The following are participant's comments:

What did you like about the Military Family Fun Day Event?

The camaraderie with fellow Vets and the people who are actively and aggressively seeking to help Vets. I really had a wonderful time talking with ones like Liz, Ken Colson and others who are eager to help Vets Get what they need.

Tell of a memorable moment during the Military Family Fun Day or why this day was important to you/or your family?

I am a Cancer Survivor and I got a change to talk with a lady that lost her husband to cancer. It was a stirring conversation with someone who shared a similar experience. Watching my Grandson try to work up the courage to ride a horse, both of these events were at the same time.

What changes would you like to see if we were able to do the Military Family Fun Day again next year?

This event was one of the highlights of my year and the worst change would be not to have it!!! I am trying to rebuild my life Post-Cancer and this Event does me a lot of good! It affirms that I am still alive and have a reason to be alive.

Any other comments or suggestion about the Military Family Fun Day?

Thank You so much for these Retreats. I have made two of these events (2019 & 2021) and the first one got me in touch with the right people to help me with my cancer treatment. So, you can see why this event is important to me. *Alfred H. King – Army Active Duty – Vietnam Era (August 1964 – April 1975)*

Other comments:

"My kids look forward to it every year. First year their dad was able to attend." Kellie Ommert (wife)

"We helped a veteran obtain VA Benefits!" David Conrad NE/Iowa Veteran Administration

"I loved everything from start to finish. My family had a blast and was super excited to bring additional family members from out of town. The entire event in my opinion was memorable from the warm welcome, veteran friendly resources/info booths to just sitting out on the lake taking in the precious moments being provided. It was an amazing, blessed experience. My sister had her first ride on a horse and I was absolutely thrilled to see the look on her face. My daughter has autism and she absolutely loved the water activities. This day was important to me to spend quality time doing awesome activities with not only my blood family but with my brothers and sisters in arms military family. I felt the environment was very friendly to everyone regardless of sex or nationality. Black, white, yellow, green I felt everyone was treated well and made welcome." Octavia Savage – Army Active Duty – Era September 2001 and later

"When talking with the service providers in between the activities, I felt I was able to connect and they were able to relate." Jake King – Army Active Duty – Era August 1990 – August 2001

"Great event for the grandkids, horseback riding for the kids was very memorable, they need to relax and have fun doing outside activities as their father is disabled and not able to do a lot outside with them." Peg Johnson (mother)

Liz Chamberlain, SHDHD VetSet Coordinator



South Heartland Bi-Monthly Board Report: Staff-Specific Program Updates, July-August 2021

Every Woman Matters Health Hub (EWM) Cancer Prevention /Immunization Program / Cancer Grant /CS-CASH: COVID-19 response: My ongoing focus is SHDHD's COVID-19 and VFC/AIP vaccination efforts. Activities include managing orders, assuring proper vaccine storage, managing vaccine and ancillary supply transfers to provider across the district, training and working with support staff, coordinating and staffing COVID-19 and VFC/AIP clinics, assuring appropriate documentation in VRAS and/or NESIIS, communicating with NDHHS Immunization program and COVID-19 vaccine providers and required reporting.	rs d
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Community Health Services and COVID-19 vaccine providers and required reporting	
Liz Chamberlain <u>COVID-19 Response</u> : Continue to distribute PPE to agencies as orders come	
in through SHDHD Jot Form (which works out better than doing them once	a
week), complete PPE inventory and update PPE spreadsheets. Continue to	
help with weekly Vaccine clinics at Allen's.	
MHAT/QPR (Suicide Prevention): Provided 2 virtual QPR Training during the	
month of July 2021 with 17 participants attending the training.	
VetSET/Making Connections: Military Family Fun Day was held August 21,	
Community Health Worker 2021 from 9:00 am – 4:00 pm at Timberlake Ranch Camp, with 64	
participants.	
Brooke Wolfe <u>COVID-19 Response</u> : I continue to assist as the point person for the	
transition to using Nebraska's vaccine registration system and working with	
the disease investigation team to assist where needed with school COVID-1	
activities.	5
Grant Management: Currently I am working with 8 staff members on 3	
Public Health Promotions and implementation Theory 2 provides to ensure workplan	
Prevention Coordinator implementation. These 3 projects are COVID and minority population	
focused.	
Disease Surveillance: Daily COVID cases have increased with recent high of	
Jessica Warner 22 on 8/16. Community spread is increasing with all cases sequenced since	
the 3 rd of July being detected as the Delta variant. SHDHD continues to test	
and sequence for variants when cases meet criteria. Surveillance team	
members have worked with schools in order to plan response to cases in	
schools. We have had approximately 30 students/staff either test positive of)r
have a COVID exposure already this school year. We are working with	
Hastings College and CCC for testing recommendations and planning for	
Health Surveillance Coordinator sports and other extracurricular events. We will continue to recommend	
CDC best practices to keep daycares, schools and colleges open and safe.	
Immunizations: Back up coordinator supporting Dorrann H., C-19	
Janis Johnson vaccination-August clinics at Allen's and administration and coordinating w/	′
partners for homebound individuals.	
COVID-19 Response: Training & supervision of new staff & logistics for staff	
assignments. Keeping documents, guidance and messaging current.	
Standards and Performance Management/Accreditation: Accreditation	
(PHAB) Annual Report, Year 1 submitted & accepted by PHAB on 8/5/21!!	
Standards and Performance Vear 2 report due 03 31 2022	
Manager / Public Health Nurse/	
Interim Assistant Director and performance management, assist Michele as needed.	



South Heartland Bi-Monthly Board Report: Staff-Specific Program Updates, July-August 2021

	July-August 2021
Jean Korth	COVID 19 response: Our vaccination promotion campaign continues with six
	area providers voicing the PSA with information on the delta variant and the
	protection provided by being fully vaccinated, along with four of our older
	announcements. Ads are playing on all the Platte River Media stations.
	<u>MCH</u> : Final evaluations for the MCH grant indicated its success.
	Epi Support: working to support staff doing contact tracing, answering calls
Chronic Disease Prevention	to the department regarding COVID19, working with daycares, childcare and
Program Assistant	preschools with COVID activity, monitoring cases migrating into SalesForce
	(disease investigation tracking software) for addition to the line list and
	assignment to case investigators, conducting case investigations, adding
	individuals that complete the automated disease investigation / contact
	tracing survey to the line list and adding resources to the schools' ShareFile
	folders.
Samantha Martell	<u>Bilingual Community Health Worker (CHW)</u> : I continue to work on contact tracing and investigations to assist with interpretation. Monthly Vaccine for
	Children (VFC) clinic: I promote and schedule all of our clients, as well as
(22)	interpret and translate for both VFC and COVID-19 clinics as needed.
Bi-Lingual Community Health	
Worker	COVID 10 Personance. Leantinue to work on case investigations and contact
Heidi Davis	<u>COVID-19 Response</u> : I continue to work on case investigations and contact tracing for COVID-19 cases and have been working on general EPI cases for
	reportable diseases. I am the direct contact of 8 schools in our health
	distirct, for questions related to COVID-19 activity at the schools. I have
	attended and participated in ESU9 meetings with school officials. In addition
	I have been trained to provide support on data analysis reports of COVID-19
Disease Investigator	for weekly reporting.
Lauren Shackelford	COVID-19 Response: I continue to work on case investigations and contact
	tracing. I have taken over COVID-19 oversight and response for long-term
G	care facilities.
	MHI: I have used census data and social vulnerability index to identify social
	determinants of health for SHDHD's community health assessment.
Disease Investigator	
Sam Coutts	Clerical Assistant for Finance and Operations: I continue to assist the Finance
	and Operations Manager by providing clerical support and expertise in areas
and	such as grants and contracts, scanning, organizing, filing, and reviewing
	documentation, human resources regulation, and assisting with projects
	related to organizational policies, performance management/quality
Clerical Assistant for Finance	improvement, and budgeting, as requested. I also provide general
and Operations & Vaccine Clinic	administrative and clerical support and assist with data entry as needed for COVID-19 clinics.
Support	
Pam Stromer	Administrative Assistant: I continue to provide office support by answering
	the phone, mail service, receiving guests and providing various office duties.
	During the month of July, I helped manage the booths at the Clay County &
1	Adams County Fairs & also managed the booth at the Recovery In The Park
	in Hastings.
Administrative & Technology	Technology Assistant: I continue to work helping to maintain and update the
Administrative & Technology Assistant	Technology Assistant: I continue to work helping to maintain and update the South Heartland District web pages, develop on-line surveys as requested,
	Technology Assistant: I continue to work helping to maintain and update the



South Heartland Bi-Monthly Board Report: Staff-Specific Program Updates, July-August 2021

Support Staff for COVID-19 response and other projects:

Part-time Hire:	
Lucy Nielsen	Data Analysis, Dashboard (last day, 08.27.21)
Aida Evans	Interpretation, Minority Outreach
Saylor Pershing	Data, Epi Team support (now working remotely from George Washington University)
Emma Severson	Project Support Intern (Hastings College)
Lindsay Pritchard	Nurse Vaccinator – COVID Clinics
Colleen Dygert	Nurse Vaccinator - COVID Clinics
Beatriz Marino Jachim	Nurse Vaccinator - COVID Clinics
Kathryn Kamarad	Clinic Admin Support - COVID Clinics
Contract (Mary Lanning):	
Leslie Anderson, RN	VFC & COVID Clinic Support
<u>Volunteer</u> :	
Sue Rutt	Phones, Information
John Bohmfalk	Disease Investigation follow up

Vaccine Clinic Staffing Support:

Mary Lanning is providing pharmacy staff to draw up vaccine for August and September COVID Pfizer vaccination clinics at the Allen's building.

Student Practicums (Fall 2021)

Alianna Higgins	Credit-based Internship, Hastings College
Nancy Tahmo	MPH Applied Practice Experience, UNMC College of Public
	Health (Ms. Tahmo is from Cameroon, on a Fulbright Foreign Student
	Scholarship through the U.S. Dept of State)

Moving on... Alex Stogdill is in medical school at UNMC and intern Hannah Langer started nursing school. Both are planning to include a public health focus in their health care training.



Alex, after the UNMC white coat ceremony for incoming 1st year medical students



Staff and Volunteers with Alex on his last day with SHDHD