

South Heartland District Health Department Public Health in Action



July-August 2018

Military Family Fun Day—Supported by SHDHD's VetSET Making Connections project.

On August 18, 107 military service men and women, veterans and their family members from the South Heartland area came to Timberlake Ranch Camp near Aurora to enjoy a day of outdoor activities, challenges and relaxation. Activities included paintball, the Blob, a high rope course and trail rides, among many others, plus opportunities to learn about the Veteran Whole Health Initiative and to pick up information from the V.A. What a wonderful day for the Military Service Men and Women, Veterans and their Family members!!!





Community Health Assessment 2018

Focus Groups in Clay County (Left) and Nuckolls County (Right) explore trends and gaps in the local health system.





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SHDHD's Prevention Connection: Uniting Partners to Kick Chronic Disease to the Curb!

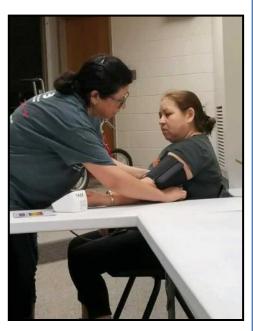






SHDHD Prevention Connection in Action!

Top Left: UNL Extension partner talking with community members about the 'Choose Healthy Here' healthy foods initiative. Top Right: SHDHD and partners from clinics in Sutton and Hastings during a workshop on sustaining chronic disease prevention initiatives in the clinics, hosted by SHDHD. Right: Lorena Najera, SHDHD community health worker and Healthy Heart Ambassador for the YMCA's Self Monitored Blood Pressure program, takes blood pressure of a program participant. Bottom: Lifestyle coaches for SHDHD's Smart Moves Diabetes Prevention Program participate in refresher training and learn new skills. Left: 'Choose Healthy Here' promotional display at Fill 'N Chill convenience store in Hastings.







HEARTLAND DISTRICT July-August 2018 SHDHD

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

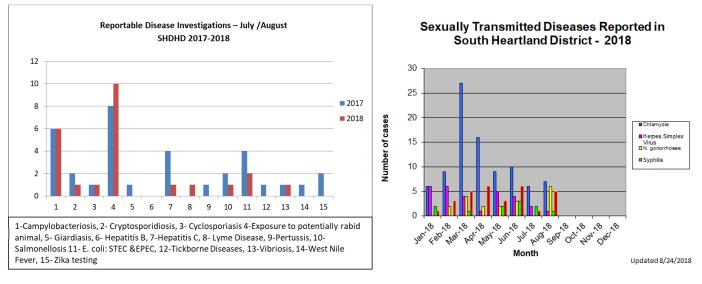
1. Monitor health status and understand health issues facing the community.

(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 <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.
- SHDHD is completing our 2018 <u>Community Health Assessment (CHA)</u> process. The Community Themes and Strengths Assessment is complete with 923 surveys returned as of 8/27/18 Focus Groups in each county included leader and user groups discussing trends and gaps in the local health system. Priority setting meetings are scheduled for September 18th (Access to Care) and 25th (Health Issue priority setting).
- Food Recalls: During the months of July and August, 11 posts were shared on Facebook for foods recalled. SHDHD also provided information about how to avoid foodborne illness during an interview with KSNB airing on July 7/27/2018. Recall items are monitored to identify what foods may have been distributed to our health district.
- School Surveillance: We made contacts with school personnel and set up charts for the 2018-2019 school year.
- SHDHD coordinated with DHHS on a norovirus investigation involving South Heartland residents. Over twenty individuals were ill and over 40 individuals attending an event participated in a survey to help identify the source of illness.



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:

Strategic National Stockpile (SNS) Sub-hub Planning: Continued meeting with Garry Steele, SHDHD's Sub-Hub Site Manager, on appointing of new personnel for the sub-hub and developing a tabletop and full-scale exercises for the SNS sub-hub site. Met with Jolene Laux, Adams County Fairgrounds Administrator, and discussed her staff responsibility and the use of the building for a sub-hub FSX, hopefully in November. Garry and Jim completed a Site Evaluation and decided which parts of the building would be used for which purposes. Two Rivers, Loup Basin, and Central District health departments are joining SHDHD in the full scale exercise. The scenario will be the Pandemic Flu and the determination to order vaccines that are being made available through



the SNS. The scenario indicates that the original shipment will be enough to cover 75% of the SHDHD district, or approximately 33,000 doses for adults/youth. The biggest challenges will be maintaining storage temperature of the vaccine during shipment and dispersing, involving vulnerable populations, and determining the best way to assure everyone in the four county area has an opportunity to receive a vaccination within 48 hours.

West Nile Surveillance: Trapping of mosquitoes continues in Red Cloud and Hastings. There have been no positive West Nile Virus human cases in the South Heartland district and no mosquitoes trapped in our district have tested positive for West Nile Virus to date.

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 Red Cloud in July and August. Topics covered for congregate meals included Heat Safety, Adult Vaccinations, and West Nile virus.
- <u>Utility Inserts</u>: Red Cloud agreed to stuffing utility bills with information about SHDHD and our presence on the third Thursday of each month and highlighting a few of the programs we offer. A thank you will be sent to the city clerk's office, who actually put the inserts into the bills.
- <u>Community sign boards</u>: were utilized to get information out. (located in Edgar, Nelson, Lawrence, Red Cloud, Bladen, Roseland, and Kenesaw) Topics were tobacco use, farm safety, and youth and adult vaccinations.
- <u>Radon testing and mitigation</u> Continue to receive calls and share information on radon testing and mitigation, which is unusual for this time of the year. Visited with one contractor interested in becoming a mitigation specialist. Jim M received a thank you from a couple he had guided through the mitigation process and another couple who had recommended this person talk to him about measurement.
- News releases, public health columns, ads and interviews: Topics covered in July and August: Health department wants community input via survey (CHA), School vaccinations imperative, Ne receives funding to improve student health, academic achievement, Addressing mental health before stage 4, Colon cancer is preventable, beatable, and treatable, Health officials still fighting against West Nile in state. KHAS <u>Sunrise 60</u> interviews: Veterans Free Family Fun Day and Immunization. Marketing: VetSET ads, Hastings/Adams County Immunization Clinic. VetSET Free Family Fun Day radio ad.. <u>Staff were also interviewed by Local News 4</u> regarding food recalls amid salmonella scares, VetSET Family Fun Day to thank our military. Staff was also interviewed live at the Adams County Fair by Local 4 News covering topics of Every Woman Matters and Immunization Awareness Month, the health column "Who Needs Immunized?" was submitted to the Hastings Tribune, but has not yet been published on the health page.
- SHDHD Facebook: In July, the number of people reached was 4644. For August, the number of people reached was people 4020. The topics for Facebook and twitter in July were fireworks safety, West Nile and awareness of foodborne illnesses around the nation. August's topics included promotion of immunizations and which vaccinations each age group needs to protect themselves and their families.
- Worksite Wellness: SHDHD's worksite wellness program is restructuring with meetings held only once a quarter. There is no meeting to report on. However, SHDHD also continues to work with local worksite wellness groups to improve their internal processes and programs to promote wellness, including Hasting Public Schools District's Wellness team.
- <u>Childhood Obesity</u>: With the school year starting up again, SHDHD has been active connecting with schools about wellness activities, attending Hastings Public District Wellness Team meetings, co-applying (with Hastings Public) to be a presenter at Ne SHAPE conference and contacting schools about Kids Fitness Day participation.
- Tai Chi Classes: Beginning Tai Chi classes will be starting back up in the fall August / September in Hastings at the Golden Friendship Center and YMCA, Superior at the Catholic Church, and Nelson at the Community Center. <u>Year round advanced classes</u> are offered in Hastings at the Golden Friendship Center and YMCA and Red Cloud at the Community Center for individuals that have complete the beginning 12-week class. September 22 is <u>Fall Prevention Awareness Day</u>, SHDHD will be promoting Fall Prevention Day by doing PSA on the TV & Radio, ads in the local papers, handouts for Clinics, Hospitals Emergency Rooms and Pharmacies.
- Smart Moves (Diabetes Prevention Program (DPP): SHDHD's Smart Moves classes continue to occur- Superior, SHDHD, and MLH's Smart Move classes are at the half way mark of the yearlong class and the Village Pharmacy in Red Cloud finished their week 15 class with 3 participants. Brodstone has received full recognition from the CDC again for meeting all the program standards! (This is renewed every year if standards are met.)



YMCA's SMBP Program: South Heartland's community health workers continue to have an active role serving as Healthy Heart Ambassadors for the program and holding office hours each Monday from 12:30 - 3:30 to assist participants in learning the correct way to measure their blood pressure. This collaboration with the YMCA in delivering their Self-Monitoried Blood Pressure program allows us to engage and continue working with women identified for health coaching through the DHHS's "WiseWoman" program.

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?
- Community Health Improvement Plan (CHIP) Implementation Staff continue to implement the CHIP strategies with our partners:
- Access to Health Care: Staff continues collaborative efforts with local agencies to address the identified need for navigating low income, undocumented women, who do not qualify for Every Woman Matters, to breast and cervical cancer screening. This collaborative process is supported through Health Hub funding. EWM program update presentations were given at Hastings Family Care in late June and Quality Healthcare Clinic of Sutton in July.
- Prevention Connection: Progress continues between SHDHD and three district clinics (Webster County Clinic, Community Health Clinic/ Mary Lanning and Quality Healthcare Clinic of Sutton) as they work towards benchmarks identified through the 1422 chronic disease prevention grant. Quality Healthcare Clinic (Sutton) sent a message through their portal to patients with elevated blood pressure, or hypertension, and have seen success with self-monitored blood pressure values being sent back through the portal by their patients. Quality Healthcare Clinic requested support from SHDHD in checking the calibration of their BP equipment to assure accurate measurements. One sphygmomanometer was recommended for calibration or replacement. The clinic plans to move forward with annual BP equipment checks.
- SHDHD hosted a Success to Sustainability meeting: for the district clinics as they continue their work on chronic disease prevention and control. Participating clinics shared their success stories. ML Community Health clinic identified that their grant participation has allowed the clinic front staff to be more clinically involved with patients through portal promotion, and pre-diabetes risk assessments. The clinic manager felt they were more strategic in looking at reports for outcomes, and the staff is more aware of resources in the community. Quality Healthcare clinic shared that the grant work has helped improve all activities as a new clinic, including the creation of policies and procedures.
- <u>Team-based care</u>: activities, such as daily huddles, provide focused communication and coordination of efforts for complex patients. ML Community Health Center staff is reviewing schedules for each provider the day before, so they can plan for next day.
- Obesity:
 - <u>Nutrition Advisory Board (NAB)</u>: The NAB did not meet these last two months the group is working through a sustainability process where they are deciding how often the board should meet. The current group consensus was to meet quarterly, so the next meeting will be in September.
 - Prevention Connection: Choose Healthy Here: Increasing healthy food options in convenience and grocery stores to implement the Choose Healthy Here (CHH) program. SHDHD is working with Fill 'N Chill to implement their action plan. The store manager continues to work on getting healthier items such as low fat milk and lower calorie/lower-fat granola bars in stock. SHDHD placed signage around the store to help bring awareness to the healthier materials and hosted 2-taste tests. In July and August, SHDHD and UNL Extension hosted two (2) taste testing events with about 40 total customers stopping at the table and trying the samples. As part of the community outreach of the program, SHDHD and UNL hosted a taste testing at Hastings Aqua Court, engaging with about 150 community members.
 - Prevention Connection, Superior's follow up to their Walking Summit: Superior Design team continues to work towards having the capacity to apply for funding to support a trail in their park. The team met with the park board to discuss plans and gather input on a proposed trail. They are also working with the city of Superior to get their proposed trail included in the community meetings in September for community input (collaboration!).
 - Prevention Connection Healthy Vending Initiative: SHDHD continues to work with partnered sites to improve vending. All sites continue to wait as the vender works to get healthier options in stock, and then



they will start hosting taste testing. The vendor committed to getting the healthier options in the vending machine as soon as possible, but to date there has been no change.

- Prevention Connection: Healthy Hastings follow up on action summit: Healthy Hastings continues to meet to fulfill the action plan. The team did not meet in either July or August due to lack of agenda items needing to be addressed. The Complete Streets Advisory Council representative reported the city continues to move forward with their chosen contractor to do the walkability/bikeability planning project around town. The team is hosting and working with <u>The Hastings Downtown Association</u> in implementation of a downtown farmers market. We have hosted several downtown farmers markets through July and August and the customer and vendor base continues to grow. There is live music and there are cooking demonstrations during the market hours. After the <u>SHDHD and Nebraska Bicycle Alliance</u> leader- Julie Harris completed walking audit/observation at Hastings Middle school, the team implemented/purchased new signage for the middle school to bring awareness to drivers of walking students, and worked with the city to extend the walking clock on the cross walk and freshen up the crosswalk paint.
- Prevention Connection: Smart Moves, Diabetes Prevention Class (DPP): SHDHD continues to work with partners in implementing this evidence-based yearlong program. SHDHD has worked with community partners and has 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. During the month of August SHDHD hosted our quarterly coaches meeting and of the 7 of the13 active coaches attended. The meeting included a coach training by master trainer, Cheri Ferris, which focused on helping participants stay engaged through the program.
- <u>SHDHD WoW (Worksite Wellness</u>): During July and August, SHDHD staff focused on sun safety and being more physically active during the workday. The WOW team hosted two challenges- a sun safety bingo challenge and step counting challenge. Staff had the opportunity to learn about sun safety and the effects of sugar.
- <u>Prevention Connection</u>: Village Pharmacy in Red Cloud continues to work with Webster County Clinic and Main Street Clinic to receive Smart Moves referrals and communicate with providers about blood pressures that are recorded in the pharmacy. SHDHD and Village Pharmacy co-presented the Smart Moves program to the Franklin County Hospital to support their implementation of the class in Franklin as well. (The Village Pharmacy owns the Franklin Pharmacy, in addition to the Red Cloud Pharmacy.) SHDHD continues to stay connected with the Blue Hill Mary Lanning Clinic to implement a referral relationship.
- <u>Cancer Coalition</u>: South Heartland Cancer Coalition met in July and August. This group of committed partners continues to work together advancing community cancer education and prevention activities and promotion of screening. HPV cancer prevention, sun safety and breast cancer are current priority topics. SH and MCC nurses are near completion of case management of clients with positive FOBT screening tests and skin referrals initiated at VSHF.
- <u>Mary Lanning Healthcare Cancer Committee</u>: Cancer Committee met August 23, 2018. Together as partners we collaborate on community cancer education and screening projects which helps ML meet their COC Accreditation requirements and helps SHDHD meet community health improvement goals.
- <u>Lung Cancer</u>: Radon detection kits remain available at SHDHD, satellite offices and UNL Extension.
- <u>Colon Cancer</u>: FOBT colon cancer screening kits were not available for distribution in July/August as the Nebraska Colon Cancer Screening Program contracted with a new lab for processing specimens. Kits are now again available to all district residents age 50-75 throughout the year. 4 clients this past year have had positive FOBT results and have received case management from SHDHD's public health nurse.
- <u>Cervical Cancer</u>: Human Papillomavirus (HPV) vaccine educational materials are shared at monthly VFC clinics. Community Health Workers continue to work with clients to access health care and Every Woman Matters resources. Clients are navigated to screening and diagnostics or treatment when needed.
- <u>HPV Cancer Prevention</u>: In July, a screening of the film Someone You Love the HPV Epidemic followed by 4 HPV survivor stories was held for the Hastings Family Care (HFC) and Community Health Center (CHC) staff. 8 nurses/medical assistants attended this Sunday afternoon screening. Pre and post-surveys were completed. 7 out of 7 post surveys indicated that viewers learned something new about human papilloma virus. Post film discussion gave opportunity to discuss US, NE and SH HPV vaccination rates and to share the importance of healthcare provider's recommendation for vaccination. A September event is planned for the college audience, specifically the Hastings College peer group leaders.



- <u>Breast Cancer</u>: Using the Encounter Registry we 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. <u>Those without insurance who meet the Every Woman Matters program requirements are</u> assisted with completing the Healthy Lifestyle Questionnaire to enroll in the program (5 in July/August). In July/August staff documented 25 navigation contacts to 13 women for breast and cervical cancer screenings and diagnostic services. <u>Those not meeting requirements</u> are connected with the clinics offering assistance. Despite assistance from Mary Lanning's clinic for clinical and mammogram services, the radiology fee of approx. \$200 is a barrier preventing many women from moving forward with screening. A collaborative impact project with local partners was initiated to address this need, but barriers to implementation have occurred. Work to overcome barriers will continue.
- o Prostate Cancer: No current activity
- <u>Skin Cancer</u>: Lincoln School of Hastings and UNL Extension 4H summer programs both asked SHDHD to do a Sun Safety Presentation for their students. At Lincoln School, SHDHD taught about 75, 3rd-5th graders how to be suns. UNL Extension 4H hosted their annual summer program at Liberty Cove. SHDHD taught about forty (40) 9-11 year olds how to be sun safe.
- Substance Abuse: We are continuing to promote drug take back programs through our pharmacies. Hastings Police Department is unable to register us for the fall DEA National Drug Take Back this year, so we will not be holding one this fall.
- Mental Health: VetSET/Making Connections Free Military Family Fun Day was held at Timberlake Ranch Camp on August 18 with 107 participants attending. Scheduled activities included High Rope Course, Blob, Paintball and Trail Rides along with other activities going on throughout the day including hiking, petting zoo, obstacle course, disc golf, swimming, canoes and paddle boats, fishing and sand volleyball. All enjoyed the family event and participants want this to be an annual event. <u>QPR training</u> was offered to Case Managers on July 11 with 22 participants attending the training. SHDHD was trained in QPR on August 27. <u>Military 101 training</u> was offered during the South Central Partnership meeting with nine participants attending, 10 SHDHD staff did a refresher Military 101 training.
- Other Collaborations (1422 Chronic Disease Prevention): Hastings YMCA continues to implement their Blood Pressure (BP) Management program. SHDHD continues working with <u>clinic partners</u> at Hastings Family Care and Community Health Center in establishing clinic protocols for hypertension that include promotion of selfmonitoring of blood pressure (SMBP). Clinic managers are still working on educating the providers on EHR utilization to make referrals and the importance of the program. SHDHD also continues to network with local food pantries to get healthier options in their food pantry. The Backpack/Superior School food pantry has a "Choice" pantry currently, but would like some assistance on teaching and providing youth with the necessary tools to make healthier snacks and meals at home.
- Other Collaborations (Hastings Health Ministry): (The group does not meet June-August).

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:
 - <u>Accreditation Subaward, 2018-19</u>: was awarded for \$15,000 (October 1, 2018 September 30, 2019) to advance accreditation implementation.
 - <u>Emergency Preparedness Subaward</u>: 2018-2019 PHEP Subaward was executed on 08.28.18 for the period of 07.01.18 06.30.19 in the amount of \$85,251.78.
 - <u>Arbovirus Surveillance Subaward</u>: fully executed Subaward for \$3,069 for the period May July, 2018 was amended with additional dollars for a new total of \$3,990 for the period ending April 30, 2019.
 - <u>Nebraska Department of Education's proposal to the CDC for Coordinated School Health:</u> was funded.
 SHDHD is one of 4 health departments named to participate in this 5-year grant project and will be working with Harvard Public Schools and Hastings Public Schools, based on qualifying factors identified by NDE.
 Approximately \$20,000/year to SHDHD, but a large portion of that will pass through to the schools.



- Proposal to NEMA for backup generator: The grant request for the back-up generator was denied by FEMA. The NEMA representative encouraged us to keep applying other places and thought we would have success.
- <u>CS-CASH Proposal</u>: Submitted a proposal to the Central States Center for Agricultural Safety and Health (CS-CASH) for \$20,000 to promote agricultural health and safety risk assessments in community and worksite settings and to support training of clinic staff at 5 clinics (2 clinics in Hastings-Adams County and 1 clinic each in Clay (Sutton), Nuckolls (Nelson) and Webster (Blue Hill) counties at the Ag Health and Safety course through UNMC. If funded, this project will promote access to care for ag families / ag workers, who are less likely to have insurance coverage and less likely to access preventative care than the general population.
- Performance Management System framework, PMS: Implementation continues with the Community Health Improvement Plan (CHIP) dashboard, data analysis and the final CHIP (2013-2019) report which will complete the performance management (PM) system cycle. We are evaluating the PM process to use going forward in the 2019-2024 CHA-CHIP-SP Process (Community Health Assessment - Community Health Improvement Plan -Strategic Plan). Opportunities for growth/improvement were identified by the PHAB Site Visitors (report) to integrate performance management throughout the HD and continue training to develop staff and BOH understanding of performance management system. This was identified by the PHAB Committee to address in our Action Plan.
- Prevention connection: Blood Pressure Management: with partner consultant Praesidio, SHDHD continues to work with 3 clinics to implement a blood pressure protocol (policy) within their clinic workflow to flag patients that may be hypertensive, not well managed, or are pre-hypertensive, and to promote systems changes to improve prevention and management of hypertension. Mary Lanning and Quality Healthcare Clinic (Sutton) have worked in the last two months to sustain efforts they have worked towards in the past three years. ML is providing one-on-one training to clinic manager at Community Health Clinic to increase her confidence in pulling accurate aggregate reports from the electronic health records (E.H.R.). Quality Healthcare Clinic is supporting staff in receiving/completing EHR training to enhance their clinic staff capacity. Webster County Clinic has collaborated with Brodstone Hospital to increase their knowledge and ability to pull reports from their EHR.
- Workforce Development Plan, WD: The 2018-19 workforce development work plan was completed. This includes the succession planning and Health Literacy Action Plan implementation.

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?
- > <u>Nebraska Clean Indoor Air Act</u>: 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.
- Daniel Brailita, MD, Central Nebraska Infectious Disease Clinic, had requested <u>Direct Observed Therapy (DOT)</u> for one of his patients to assure compliance with treatment. SHDHD is continuing to provide this service under a DHHS program as part of the initiative to prevent the spread of infectious disease.

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.
- In July/August the Vaccine for Children clinic staff delivered 87 vaccines to 38 patients at two monthly clinics. Of those 38 patients, 29 (76%) had no insurance, 7 (18%) had Medicaid, 2 (5%) were underinsured and 0 were American Indian. 14 of the 38 patients (37%) were new to the clinic. Total donation collected from clients for July/August = \$339.00 (avg. \$4.15 per immunization or \$10.20 per patient).
- We continue to implement strategies to help increase complete immunization rates of all clinic patients. NE DHHS Immunization runs AFIX (Assessment, Feedback, Incentives & eXchange) reports for our immunization program twice a year providing rates for 2 year olds with complete immunizations and 11-18 year olds with



complete HPV vaccination series. This report allows helps us set goals and outline priority age groups. This report has not been made available to us yet in 2018.

- SHDHD uses quarterly reminder/recall, an Evidence-Based Strategy for improving vaccination rates. 35 English reminder/recall letters were sent and 4 Spanish reminder/recall phone calls were made in July for ages 2mo. 18 yrs.
- In July/August the <u>Adult Immunization Program</u> delivered Tdap to 3 adults age 19 and over. 2 (67%) had no insurance, 1 (33%) was underinsured.
- Community Health Worker (Bilingual): Every Woman Matters (EWM)/Encounter Registry;
 - Health coaching for 6 total clients (Spanish speaking)
 - 9 adult clients assisted in office, 12 adult referrals to other organizations/ providers
- SMBP, self-monitor blood pressure program: 1 Spanish speaking enrolled in the YMCA SMBP program.
 <u>Community Health Worker (English Only)</u>:

<u>Every Woman Matters and Health Coaching</u>: <u>July</u>: No clients receiving a 1st health coaching session but for 2 clients, 3 attempts to connect failed, so clients are discontinued from health coaching and sent a letter; 2 of 3 received 2nd health coaching session; 3 of 3 received their 3rd health coaching session and finished EWM survey. <u>August</u>: 3 of 3 received a 1st health coaching session, 1 of 1 received 2nd health coaching session, 3 of 3 received their 3rd health coaching session, 3

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, Results Based Accountability: RBA continues to be implemented weekly in performance measures of programs and services (quantitative, qualitative and outcomes). This informs staff of all program activities, successes, needs, and alignment with the Essential Services and PHAB domains.
- The Workforce Development Plan: The QI-PM Team continues to work on succession planning/knowledge transfer development for critical positions. Next steps include implementation of our Workforce Development work plan to include cross training, succession planning for other positions, and staff training (identified in annual evaluations core competencies; training needs, and training topics to include performance management, health literacy and Culturally and Linguistically Appropriate Services, CLAS).
- CLAS and Literacy Improvement and Innovation Project (Title V): The CLAS and Literacy Innovations Project includes statewide and cross-sector partners sharing a common interest in advancing equity in the Nebraska population. Project Funds and other support are provided by the Nebraska Maternal Child Health Block Grant. Members of the Project Team are diverse in life experience, professional pursuits, geography, and other characteristics. J. Johnson is a member of the project. The team has developed an approach for organizations to use to assess client perceptions of the organization's success for implementation of CLAS and Health Literacy (current approaches assess the organization, not client perception). We are thinking of a two-level award, first to test the approach and second, to fund small innovation projects.
- SHDHD staff, B. Wolfe, continues to be involved in a state led <u>Facilitation Training</u> to teach LHD staff how to lead community conversations to consensus and collaboration (training provided by DHHS through the 1422 chronic disease prevention project).
- Serve Safe Certification: J Warner completed requirements and passed exam for Food Protection Manager Certification.
- SHDHD's National Diabetes Prevention Program lifestyle coaches received <u>refresher training</u> to learn how to help their participants stay motivated throughout the year-long class.
- > QPR (Question, Persuade, Refer) <u>suicide prevention training</u> was held for all staff in August.
- Hastings College senior Geena Piper is doing a credit-based internship with SHDHD and will be working with Jessica Warner in disease surveillance.



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.
- Choose Healthy Here initiative evaluation: Continued with Gretchen Swanson, Center for Nutrition (GSCN), and NeDHHS on evaluation of *Choose Healthy Here* materials and the cafeteria improvements at Brodstone Hospital. During the months of July and August, evaluators shared outcomes of the completed interviews and environmental assessments in the Brodstone Cafeteria. Planning also began for the final assessment of Brodstone's menu changes and staff food choices to assess personal employee behavior change and employee option choice.
- Prevention Connection: SHDHD provided DHHS with 3 spotlight stories from the work accomplished with the prevention connection grant. The spotlight stories included data, the project implementation and the results of the project. These highlight the successes at Brodstone Hospital's Cafeteria, the Smart Moves program across the district and Quality Clinic's staff huddle and policy implementation work.
- <u>QI projects</u>: client interaction tracking (development of an Access database) and standardization of SHDHD documents agendas, minutes with a checklist for staff of required items to be included. HD letterheads and power point slides are in progress. The Finance and Operations Manager is working on standardization of the grant compliance files. The annual audit with the Auditor of Public Accounts has provided us with several opportunities for improvement to add to the QI administrative project list.

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:

- As part of the Chronic Disease Prevention project (Prevention Connection), SHDHD is in the final year (4 year work plan) of <u>evidence-based strategies</u> for <u>prevention of cardiovascular disease and diabetes</u>.
- SHDHD is partnering with <u>worksite wellness committees</u> and using evidence-based practices for improving physical activity and nutrition in worksites.
- In the <u>Every Woman Matters/Community Health Hub</u> project, SHDHD uses evidence-based strategies to address health inequities and improve screening rates for cervical, breast and colon cancers.
- <u>Tai Chi Moving for Better Balance and Stepping On</u>: are evidence-based programs for fall 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 and will be starting new class in the fall. Stepping On classes meet once a week for seven weeks for 1 ½ to 2 hours and then a booster session in 3 months; will be offering classes in the fall.
- We are continuing to use the evidence-based <u>Reminder Recall</u> 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. SHDHD received the PHAB Accreditation Board decision on August 27, 2018. (See Success Stories) The email for the action plan explains the process and the 16 measures that will be included in the plan. None of the measures are a surprise, as they were identified by SH during the accreditation process and/or by the site visitors for their report.
- <u>NALHD Health Literacy Mini-grant</u>: Evidence shows persons with limited health literacy skills are more likely to have chronic conditions and are less able to manage them effectively. Through the NALHD Health Literacy Mini-grant, SHDHD completed a Health Literacy Check-up, and created an action plan for future staff education and evaluation related to health literacy practices. We are now working on implementation of action plan goals.
- Research:
 - <u>Environmental Scan on Integration of Public Health and Primary Care:</u> M. Bever was one of three local health directors asked by Dr. David Palm to provide input on a survey being developed at the College of Public Health for one of the priorities of the State Public Health Improvement Plan: to integrate public health and primary care. A Public Health and Primary Care Integration Committee was formed and this committee



recommended updating an environmental scan that was conducted last year. The College of Public Health, with funding support from the DHHS Office of Community Health and Performance Management, is responsible for completing this initiative. According to Dr. Palm:

- The first step in the environmental scanning process is to survey all local health departments in Nebraska. Responses to the survey questions will help the Committee to evaluate what progress has been made in the past year, what barriers exist, and what support is needed to move integration efforts forward in the future. SHDHD completed this survey in July. The survey will help identify the connections occurring between LHDs and physician clinics and small hospitals, and will document these positive developments.
- The second step in the process is to conduct short interviews with 6 to 8 local health department directors as a follow up to the survey. In addition, the community benefit spending for all nonprofit hospitals will be updated as will the lists of primary care clinics that have become patient-centered medical homes and/ or joined accountable care organizations.

Stories: How we made a difference....

Excerpts from the PHAB Committee decision email:

August 27, 2018

Dear Michele Bever,

Thank you for the work your health department has done to be considered for Public Health Accreditation Board (PHAB) accreditation. That work demonstrates your commitment to a longer journey toward continuous quality improvement.

The PHAB Accreditation Committee has completed its initial consideration of accreditation for the South Heartland District Health Department. Based on that consideration, the Accreditation Committee has determined that accreditation status cannot be awarded at this time. Pursuant to the process described on page 25 of the Guide to National Public Health Department Initial Accreditation, your health department is required to submit an Action Plan.

The requirement for an Action Plan means that the accreditation decision has been deferred until some additional work has been completed and that documentation is submitted and reviewed. Your health department's status in the PHAB system is still confidential in that you are still going through the accreditation process.

Kaye Bender, PhD, RN, FAAN

President and CEO Public Health Accreditation Board

Success for SHDHD - we are moving further down the road toward accreditation!! This action plan will assist us to improve and strengthen the health department policies, plans and processes.



South Heartland Bi-Monthly Board Report: Staff-Specific Program Updates, July-August 2018

Jim Morgan	Emergency Preparedness: Garry Steele and I are writing both a Tabletop and a Full Scale
	Exercise (FSX) for a Pandemic Flu with CDC using the SNS as a method of distributing the
ae)	flu vaccine. It calls for the handling of around 32,000 doses from ordering to sub-hub
	management reception, to distribution from the sub-hub to the four counties, all within
	48 hours. A Tabletop will be held about 1 month ahead of the FSX as required by FEMA.
Public Health Risk	The state, who questioned the success of the process, is now coming to observe to see
Coordinator	what they can learn from our exercise.
Coordinator	Environmental Health: I have heard some positive things from the mitigation side of
	Radon. People have called to thank me for helping them through the process to
	recommending to others to contact me with questions about the process. It makes me
	feel like the results of the training I have taken is finally coming to fruition.
Dorrann Hultman	Every Woman Matters Health Hub (EWM) Cancer Prevention / Immunization Program:
	I established a connection with a Hastings Family Care (HFC) nurse after she reached out
	by phone with questions about the EWM program. She recognized a need within her clinic
	for staff to have more information about the program, so in June I presented an EWM
	update to approximately 18 nurses/medical assistants. During the discussion after the
	presentation, I had the opportunity to talk about HPV, HPV related cancers and HPV
	vaccination rates in our district and in NE. The group was interested in the opportunity to
Community Health	view the film Someone You Love – the HPV Epidemic. On Sunday, July 22, 2018, I held a
Services Coordinator	screening of the film at the Hastings Public Library, where we have the site license, for the
	HFC staff and also included the Community Health Center staff. 8 nurses/medical
	assistants attended with 7 out of 7 who completed the post-test reporting that the event
	helped them learn more about the human papillomavirus.
	I was able to share the EWM update with 3 Quality Healthcare Clinic staff on July 25,
	2018. They are considering scheduling an office "field trip" to Hastings to view the
	Someone You Love film.
Lorena Najera	Every Woman Matters (EWM)/Encounter Registry:
Lorena Najera	Health coaching for 6 total clients (Spanish speaking).
	9 adult clients assisted in office, 12 adult referrals to other organizations/providers.
	<u>SMBP, self-monitor blood pressure program:</u> 1 Spanish speaking enrolled in the YMCA
	Self-Monitoring Blood Pressure program.
Community Health	
Worker	
Liz Chamberlain	VetSET / Making Connections:
	Promoted Free Military Family Fun Day during the county fairs and National Night Out in
	Hastings- visited with 446 Military Service men, women, veterans and their family
	members. Military Family Fun Day was August 18 at Timberlake Ranch Camp from 9 am –
	4 pm with 107 participants attending the event. Scheduled activities included High Rope
State and State	Course, Blob, Paintball and Trail Rides. Other activities going on all day were hiking,
Community Health	petting zoo, obstacle course, disc golf, swimming, canoes and paddle boats, fishing and
Worker	sand volleyball. Representatives from the VA attended event to supply information about
	some of their activities (Whole Health for Life, Suicide Prevention and Business Office
	Outreach Coordinator). What a wonderful event for the military families.
	QPR training was provided to 22 participants during the Case Managers meeting in
	Hastings on July 11th. SHDHD staff attended QPR (Suicide Prevention) training on August
	27 th . <u>Military 101 training</u> was offered during South Central Partnership meeting on
	August 7th to 9 participants and 10 staff.



South Heartland Bi-Monthly Board Report: Staff-Specific Program Updates, July-August 2018

Brooke Wolfe Fublic Health Promotions and Prevention Coord	<u>1422 Prevention Connection:</u> <u>Walkability</u> : Attended 4 planning meetings for walkability coordination in either Hastings or Superior. Began work in 3 different communities to plan for wayfinding signs around the community to promote walking. Implemented three strategies to address the three major barriers at the Hastings Middle School that affect walking during pick up and drop off times. <u>Smart Moves Diabetes Prevention Program</u> : Continue to coordinate three communities implementing the Smart Moves program and hosted a quarterly Smart Moves coach meeting. <u>Healthy Food Retail</u> : Hosted the final two taste testings at Fill 'N Chill and our community event at Hastings Aqua Court. Provided three local pharmacies the tools they needed to implement a <u>Self-Monitoring</u> <u>Blood Pressure program</u> on site without SHDHD's assistance.
Jessica Warner	Disease Surveillance: During the month of July and August, there were 26 food items recalled by the FDA. I posted these items on our Facebook page and was interviewed by KSNB about preventing foodborne illness. There have been unusually high numbers of Campylobacter and Gonorrhea infections. I have been looking into sources of these illnesses and working with DHHS and the Department of Agriculture. I am working with a HC intern to complete Fact Sheets for our upcoming priority setting meeting in September.
Amy Market	<u>VetSET/Making Connections</u> : I attended the VetSET Free Family Fun Day event and assisted with signing in participants and socializing with other veteran family members. I have been working with Jim Morgan to develop a client/topic tracking database for SHDHD to help us measure what the public and partners are contacting us about and how well we are responding to their needs and questions.
Janis Johnson Janis Johnson Standards and Performance Manager / Public Health Nurse	Immunizations (VFC, Vaccines For Children): Accreditation Coordinator: The PHAB Site Visit Report was received after the July BOH meeting. The domain teams began to review this report to give staff recommendations for SH's implementation of the site visitors' findings. We have now received the PHAB Committee's decision for an Action Plan to address 16 measures. Their provided template asks SH to define goals and documentation that will prove the implementation of those goals. This is an opportunity to address these areas and strengthen the health department's processes, policies, plans, etc.!! on to the next steps! Standards and Performance Manager:
Jean Korth Jean Korth Chronic Disease Prevention Program Assistant	<u>1422 Prevention Connection</u> : Clinics are in the final quarter of the grant year. Progress continues on the use of the EHR, especially portal use and enrollment of patients with hypertension to report SMBP. A meeting was held with our grant participants with the focus on Success to Sustainability. Clinics shared their successes and what activities they would like to refine and renew. <u>Health Literacy:</u> We are currently working on adding health literacy information to the SHDHD web page.
Susan Ferrone Lifestyle Coach for Diabetes Prevention & Community Assessment Coord.	<u>Community Needs Assessment:</u> Core Team (4 County representation) has met and determined dates for Priority Setting meetings, September 18 & 25 th . Community Themes and Strengths survey has been distributed and we have almost reached our goal of 1,000 completed surveys. <u>Smart Moves Class:</u> Class now meets monthly.