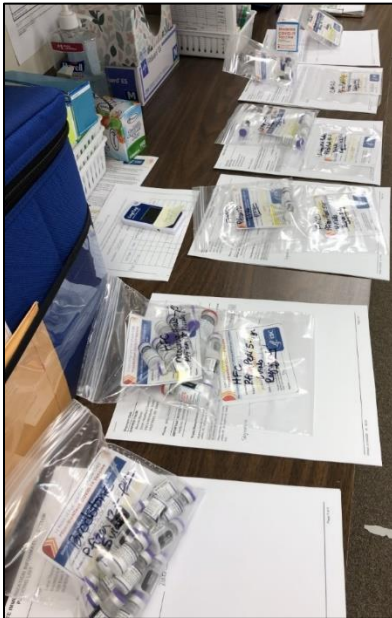


COVID-19 vaccines are prepared and delivered each week to SHDHD's vaccine provider partners.

Photo below: Vaccine transfers ready for delivery on 1/18/22.



SHDHD's federal allocations of the antiviral medication Molnupiravir are being managed by Bert's Pharmacy in Hastings. On Tuesday, 1/18/22, the quantity received for the district allowed for doses to be made available at one pharmacy in each of the other counties: Village Pharmacy in Red Cloud, Superior Pharmacy and Sutton Pharmacy.

Photo below: SHDHD's Dorrann Hultman picks up antiviral from Bert's for transfer to the other three pharmacies on 1/18/22.



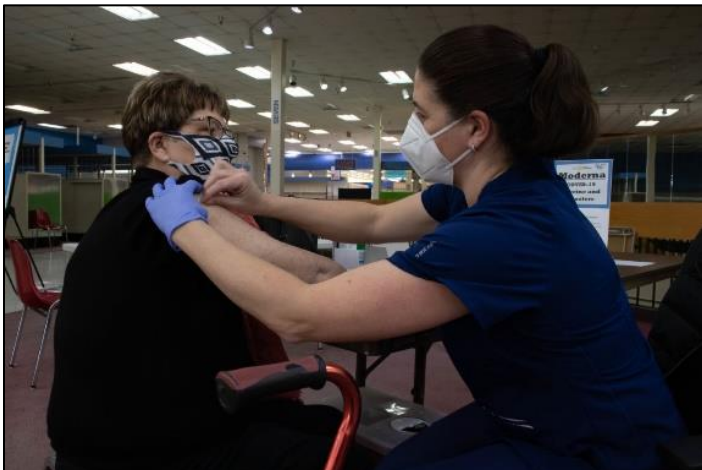
Large PPE shipment arrived February 15

Staff unloaded gowns, gloves, alcohol wipes and other materiel for distribution to local partners, like long-term care facilities, to protect staff on the front lines.



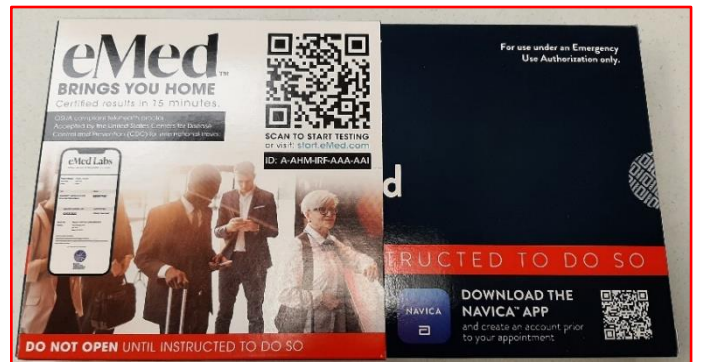
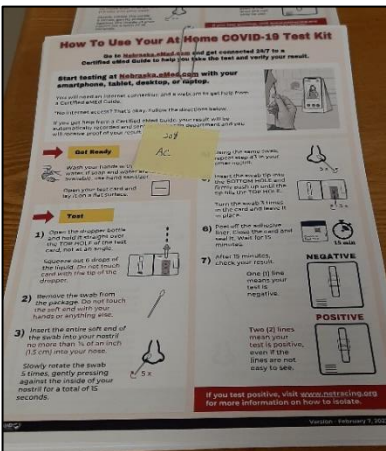
Vaccination is our best defense!

COVID-19 public walk-in vaccination clinics were held each Wed. from 4-6 pm during Jan./Feb. 2022. Mary Lanning Pharmacists assist SHDHD with vaccine prep at clinics. *Photo credit: Jacie Boelhower, Adams Central High School journalism student*



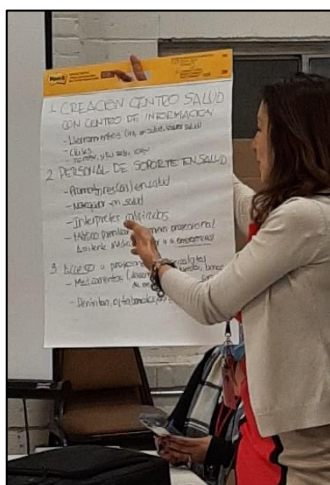
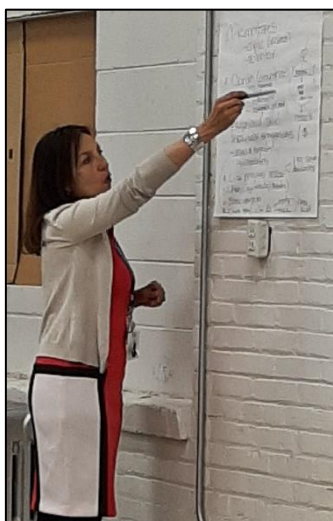
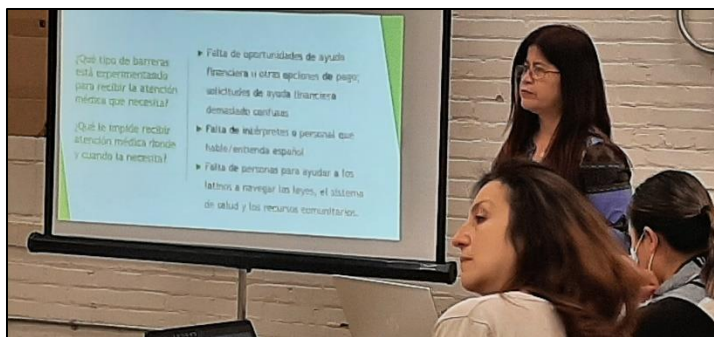
SHDHD's allocation of eMed at-home COVID-19 test kits arrived at the office on February 2, 2022. The eMed test kits have a virtually-guided option for doing the test and receiving a verified result. Individuals can also opt to follow the instructions and complete the test on their own.

Photos below: Staff helped unload 4 pallets to get the 3,456 kits into the building. 546 additional kits arrived by UPS later in the week. The boxes were then reorganized into allotments for each school and childcare center that requested them, and also for the public sites in each county. Staff counted/bundled Instruction Sheets for each site. Several staff helped deliver kits to schools and childcare centers in Adams County. Emergency managers for Clay, Nuckolls and Webster Counties picked up allocations for delivery to sites in their counties.



Minority Health Data Review and Priority-Setting Meeting, February 25.

Photos below: Facilitators Yesenia Peck (DiversityGPS and President, Nebraska Hispanic Chamber of Commerce & Foundation) and Patricia Castro, (DiversityGPS) reviewed minority health data from our local community survey and listening sessions, then engaged participants in discussion and priority-setting activities. In a follow-up meeting scheduled in March, the group will reconvene to develop an action plan for their top three priorities.



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?*
- **Surveillance:** 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). Tableau is our data platform for dashboards.
 - Surveillance data, water violations, and other health information is made available on our website, links on our website, news releases & interviews to various forms of media, and upon request from partners or others.
 - SHDHD continues to share an immense amount of COVID 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 vaccination rates and the demographic breakdown.
 - The hospital dashboard page shows trends in the aggregate available capacity of the three hospitals in the district.
 - Two public water system violations (both nitrate violations) this reporting period in Edgar and Prosser. 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 variants, administer vaccine and implement other mitigation strategies.
- **Monitoring and Tracking updates:** Continuing to complete trend analysis on local COVID-19 data; Continuing to track Hastings-specific data on daily new cases; 7 day rolling average of new cases per 100,000 people and weekly positivity for all 4 counties; and providing weekly updates to the COVID-19 Vaccine Dashboard to track residents vaccinated (partially/fully) and their demographics.
- **Coronavirus (COVID-19) Pandemic Situation Update / Dashboard Highlights:**
 - As of February 22,2022, a cumulative 10,173 South Heartland residents have tested positive for COVID. During this reporting period, (2022) 2,307 Covid cases were reported. Case rate and positivity (percent positive tests) have continued to decline from a positivity rate of 32.9% on 1/22/2022. Hospitalizations have also declined from 22 individuals hospitalized to 1 hospitalized on 2/22/22. The epi team continues to investigate outbreaks and clusters as well as working with schools and long-term care centers. Cases in schools have remained stable with increasing cases in long-term care facilities.
 - Thirty-Two specimens have been sequenced during this reporting period, resulting in "Delta" variant as well as "Omicron" variant. The omicron variant has dominated cases during January and February of this year
 - SHDHD surveillance staff have transitioned by prioritizing investigations. Having over 2,000 cases in a short period of time required some changes in procedures in order to use the resources we had to prevent viral spread in the most effective manner.
 - Vaccination Coverage: 48% of SH residents are fully vaccinated; 51% of residents 5+ (i.e., eligible for vaccine) are fully vaccinated. 89.6% of residents age 65+ are fully vaccinated, 6% of residents age 5-11 are fully vaccinated. Approximately 28% of residents have received boosters.
- **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. Cumulative 142 deaths attributed to COVID-19 since the beginning of the pandemic. **Current Case Fatality Rate: 1.4%**
- **Community Health Assessment:** Hospitals and United Way (UW) continue partnering with SH to complete the Community Health Needs Assessment (CHNA) requirement for non-profit hospital IRS reporting every 3 years. CHA data was finalized and all focus groups were completed (4 hosted by UW). The formal report will come out in March and will be posted on SH's website. Due to SH's funding, there is a strong minority focus which included a special report. Key findings from minority focus groups will also be posted on SH's website in March.

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 11 Alert Sense notifications (January - February) to over 140 individuals each time and issued 10 news releases to media and partners. Staff check the Nebraska Electronic Disease Surveillance System (NEDSS), SalesForce, and fax machine for COVID test results and investigations are prioritized.
- **PPE distribution totals:** From the beginning of March 2020 through the February 1, 2022 SH has distributed out: Masks – 234,877, Surgical Masks – 319,400, Cloth Masks – 50,630, Face Shields – 36,798, Goggles – 3,275, Hand Sanitizer – 1,379 containers, Wipes – 11,333 containers, Gloves – 957,700, Gowns – 197,294, Thermometers – 800, Bleach – 12 gal., Eco Lab Disinfectant – 3 containers.
- **eMED Test Kits:** 4,002 eMED at-home COVID test kits were received on 2/22/2022-2/24/2022. These kits were inventoried and allocated to schools and child care facilities for their use and to public sites in each county. Emergency managers helped distribute to sites in Clay, Nuckolls, and Webster Counties. SHDHD staff helped distribute to sites in Adams County. SHDHD office will serve as the public site for kit pick up in Adams County.
- **Lead Testing in Drinking Water:** SHDHD, with a student intern's assistance, is phoning all eligible agencies to promote the lead testing program offered by the State to test for lead in drinking water (elementary, preschools, day care centers and in-home daycares). This reporting period: 6 facilities have agreed to participate.

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.*
- **Community sign boards:** January: “Radon is the #2 cause of Lung Cancer”, “Cancer Health Awareness Month”, “Yes you can get a flu vaccine & a Covid-19 vaccine at the same time”. February: “Heart Health Awareness”, “National AMD/Low Vision Awareness Month”, and “Upcoming Diabetes prevention classes HALT –March 2022”.
- **News releases, public health columns, ads and interviews:** COVID activities have not decreased in these last two months and continue to be the dominate topic of news releases and communications. In Jan/Feb, SHDHD put out 11 press releases and granted phone interviews for TV and radio media requests, focusing primarily on COVID-19-related issues and vaccinations. The Health Alert was dropped to an Advisory on Feb 15. Heart Health and Radon Action Month were the focus of the PH columns.
- **Radio Advertising:** SHDHD continues running PSAs on Flood Communications and KRFS in Superior to promote getting the COVID vaccine and practicing prevention. The current script focuses on the South Heartland website and the information available, such as what to do if you've been exposed, where to go for testing or where to get a vaccine, as well as COVID-19 data.
- **SHDHD Facebook:** **SHDHD Facebook:** These past two months SHDHD's Facebook/Twitter posts have been primarily focused around COVID-19 information and vaccination with promotion of diabetes prevention (Smart Moves), Building Healthy Families, National Radon Action Month, and American Heart Month. The English FB page reached 8,595 people during January and February and the Instagram page reached 48 people. The Spanish FB page has reached 153 people in the past two months. We have started running paid ads on FB in February and hope to reach a larger audience with these posts.

- **Website:** Our website “views” increased for January (5,788 views) but decreased in February (2,376), and continue to be 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 continue to update and improve our website pages, including information on the new CDC Guidance on Isolation and Quarantine and Nebraska Medicaid Expansion, behavioral health data, drug use data and water violation data.
- **COVID-19 Information for Public:** Responding to requests from the public and providers remains a priority for SHDHD staff to answer accurately, timely, professionally and transparently. Testing and vaccine charts are available on the website and updated weekly.
- **Surveillance staff have been coordinating with daycares/preschools, K-12 schools and colleges (Hastings College and CCC):** We are using Sharefile to provide information to schools on staff or student isolation dates. In January, interim guidance was provided to all Early Care and Education Programs on the new CDC isolation and quarantine directions reflecting the new science and practice on preventing and controlling COVID 19.

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:** A data report for the 3-year CHA (Community Health Assessment) is completed with the final report coming in March. SHDHD began developing an Annual CHIP report which will be shared with committees during the April (5) steering committee meetings. Completion of these reports and sharing with BOH and the public meet best practices (for Accreditation).
- **Access to Care CHIP Priority:**
 - **Health Equity (HE):** Medicaid Expansion and ensuring individuals are navigated to services is a priority for both the Access to Care Steering Committee and the Health Equity grant. SHDHD developed an informational page on SH’s website about Medicaid expansion. During the months of Jan/Feb, SHDHD worked to ensure community members had access to COVID-19 testing by working with 2 clinics in the district and receiving over 3000 home test kits through the State.
- **Mental Health CHIP Priority:**
 - **Rural Behavior Health (BH) Network:** 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 behavioral health screening tools among the area clinics to increase referrals and early detection. The network members met in January to discuss pilot site objectives and BH provider survey collection for referral guide.
 - **Maternal Child Health:** SH continues to work on the MCH grant to develop relations with a local pediatric provider and ESU-9 to impact youth and prevent suicide. SH and ESU completed an assessment of schools and their efforts/policies that help prevent suicide. Continue to work with ESU-9 to develop training plans to assist each of the schools. Lastly, SH is partnered with Children Adolescent Clinic of Hastings to improve the work flow/process of suicide and mental health screenings in their offices.
- **Substance Misuse CHIP Priority:** SHDHD continues to carry out our drug overdose prevention workplan with oversight by the Substance Misuse Steering Committee. New partnership for this period - working with ASAAP on drug disposal community education. All work plan action items are being completed with the assistance of community partners.
- **Obesity & Related Health Conditions CHIP Priority:**
 - **Building Healthy Families:** SHDHD has led the implementation team through several meetings and has continues to implement the second cohort of 1 family. The first cohort has completed all 18 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! Cohort 3 was set to begin in January, but due to COVID activity and low participant enrollment, cohort 3 will start later in the year with the date to be determined.
 - **Prevention Connection: Smart Moves, Diabetes Prevention Class (DPP):** Superior started a new Smart Moves class in January 2021 and finish in January 2022 with 9/13 participants finishing the class losing a total 180 lbs. or 6.2% weight loss since the start of the program. 7 participants have lost more than the 5%

weight lost target. SHDHD is currently planning on starting HALT which is a Totally Virtual year-long class in March 2022.

- **Whole School, Whole Community, Whole Child (WSCC):** SHDHD met with both HPS and Harvard to continue implementing their action plans for the 4th year of the grant. Each team has different goals, but both of them are addressing mental health issues related to COVID.
- **Cancer Priority:**
 - **Mary Lanning Healthcare Cancer Committee:** SH staff attended the quarterly meeting held Feb. 10, 2022.
 - **Colon Cancer:** FOBT Colon Cancer Screening kits are available throughout the year and can be accessed through our website and mailed out to clients, through our front office and at ML's Community Health Center. SHDHD distributed 3 kits during Jan./Feb. Plans are in place for CRC screening promotion in March with kits being made available in each county.
- **Schools Collaboration:** SHDHD continues to collaborate with schools, ESU-9, NE local health directors and the Nebraska Department of Education on guidance for the 2021-22 school year.
- **Injury Prevention: Tai Chi Moving for Better Balance & Stepping On Classes:** Stepping On class (January 12 – February 23, 2022) at the Good Sam - Hastings with 20 participants. Beginning Time and Go (TUG) was an average of 11.4 seconds. (An older adult who takes more than 14 seconds has a higher risk for falling), will complete TUG 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. Tai Chi Beginning classes currently going on in Superior and Nelson. Tai Chi Advanced classes in Red Cloud. Will be starting class in Hastings @ YMCA in March 2022. Working on Stepping On class in Sutton for April – May 2022.

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:**
 - **United Health Care project (up to \$29,000)** - 2021 COVID Vaccination Capacity Program to provide COVID vaccination coordination with local providers for Nebraska Medicaid Long-Term Care (MLTC) members and underserved populations, including homeless, homebound and minority. SHDHD completed the report and received full payment for completing all workplan objectives.
 - **COVID Immunization** (\$315,683 - NE DHHS pass-through). These additional funds are to be in support implementing COVID-19 Immunization, including the following actions: 1) Increase COVID-19 vaccination capacity: across the jurisdiction, different levels of health literacy, digital literacy, and science literacy. 2) Develop and implement community-based and culturally and linguistically appropriate messages that focus on Covid-19 spread, symptoms, prevention and treatment and benefits of vaccination. 3) Develop and distribute regular vaccine insight reports based on social listening and media monitoring. 4) Utilize community engagement forums, advisory groups, etc. to ensure the messages appropriate and suitable for the audience. 5) Collaborate with trusted messengers to develop testimonial campaign. 6) Proactively address and mitigate the spread and harm of misinformation.
 - **Submitted proposal for QPR/MHFA** (through December 2022: \$3,000) – Decrease suicide in SHDHD rural communities (rural population, First Responder and Middle-age males).
 - **Submitted proposals to Sunnyside Foundation** (up to 12,900) - local funding SH applied for to support 3 initiatives: cancer screenings in low income women (\$5,200), high lead level mitigation (\$2,000), and daycare physical activity and nutrition (\$5,700).
 - **SHDHD COVID-19 AAR:** Phase 2, August 2020 - May 2021, completed and submitted with PHEP grant report. AAR action planning process - all staff assignments including timeline completion targets.
 - **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 working on expanding testing, antiviral medication distribution/prescriptions, and revising plans and processes to match the CDC's and vaccine manufacturer's updated guidance.

- **COVID-19 Vaccine Distribution Plan:** SHDHD started January with 1,487 total doses of COVID-19 vaccine in inventory. During Jan./Feb., shipments of 2,420 doses were received and 2,268 COVID-19 doses were transferred to providers across the district. SHDHD administered 358 doses of vaccine at VFC/AIP and COVID-19 vaccination clinics during this period.
- **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. SHDHD informs and educates area COVID-19 vaccine providers and serves as a continual resource for managing all of the complexities associated with multiple vaccines and the frequent changes. SHDHD utilizes our website for providing provider resources as well.

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:** No complaints registered this period.
- **Water Violations:** Received reports of 2 nitrate violations in public water systems.
- **NE Executive Orders:** The Governor's Executive Order 21-18 Continued Waivers to Facilitate Hospital Planning and Ensure Additional Healthcare Workforce Capacity extends through March 31, 2022.
- **SHDHD's Quarantine and Isolation Authorities:** SHDHD continues to provide education and instruction on isolation or quarantine for prioritized 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 DIY instructions are on the website. Statutory authorities are 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 continues to utilize COVID-19 safeguards during clinics to ensure that all staff and patients are protected to the best of our ability. Regular monthly immunization clinics were held in Jan./Feb. Staff delivered 86 total vaccinations to 42 VFC patients at the combined clinics. Of the 42 patients, 27 were uninsured, 1 was underinsured and 14 had Medicaid coverage. 21 were new patients to the clinic with referrals coming from local providers, Migrant outreach worker and family/friend referrals. 26 (62%) VFC patients were provided Spanish print materials and interpretation during their visits and during the reminder calls prior to each clinic. Donations totaling \$45.00 were collected during the combined Jan./Feb. clinics.
- **Immunization: Adult Immunization Program:** 6 vaccinations (Influenza and COVID-19) were administered to 4 adults during the Jan./Feb. clinics. All 4 were uninsured. 4 (100%) AIP patients were provided Spanish print materials and interpretation during their visits.
- **Reminder/Recall to improve vaccination rates:** Bi-lingual CHW is working to complete reminder/recall activities each week focusing on 11-18 year old clients and HPV vaccination completion. In Jan./Feb. 50 client records were reviewed with 24 clients inactivated as they are no longer patients or no longer qualify for the program. 22 calls/voicemails/texts were completed encouraging clients to schedule an appointment. 3 clients were scheduled, 3 did not wish to schedule at this time.
- **COVID-19 Vaccinations:** Weekly public COVID-19 vaccine clinics held in the space at the west end of Allen's have continued through Jan./Feb. COVID-19 vaccines have also been administered to the uninsured populations attending VFC/AIP clinics at the department and to homebound or incarcerated individuals. Vaccination rates:

51.7% of total SH Residents with at least 1 dose, 48.2% of total SH residents fully vaccinated. 28% of total SH Residents boosted.

- **Community Health Worker (Bilingual):** Monthly VFC clinics to schedule appointments, assist with interpretation, and reach out to our Hispanic community, as well as for weekly COVID vaccination clinics at Allen's. Translation for many staff projects and posts for Spanish Facebook. Assist and participate in Minority Health grant focus groups.
- **Community Health Worker (English Only) / Every Woman Matters (EWM) and Health Coaching: Community Health Worker (Bilingual Only) / Every Woman Matters (EWM) and Health Coaching:** Health Coaching EWM clients for January 2022: Completed 1st Health Coaching call with 0 participants, 2nd Health Coaching call with 1 participants, 3rd Health Coaching call and Every Woman Matters assessment with 0 participants. February 2022: Completed 1st Health Coaching call with 0 participants, 2nd Health Coaching call with 0 participants, 3rd Health Coaching call and Every Woman Matters assessment with 0 participants.
- **COVID-19 Testing:** COVID testing is still 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. NOMI Health now provides testing free of charge to SHDHD residents that are able to travel to Grand Island. This is a service very similar to Test Nebraska. We worked to connect Total Wellness with Hastings College so they can do their own testing of students, as needed. SHDHD has been working on options for expanding testing for the general public and signed an agreement with NE DHHS to offer a testing process coordinated with the Nebraska Public Health lab and Regional Pathology Services. Brodstone Hospital signed an sub-agreement with SHDHD and began offering drive-through testing in January 2022.
- **DHHS Allocation of Home-Testing Kits:** eMed (with proctored option) home-testing kits were allocated to local health departments by population. SHDHD staff organized the distribution, including the how-to-test infographic provided by NALHD and SHDHD's after-testing instructions directing individuals to SHDHD's website.

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:** Completing the organizational chart and supervisory structure QI project. The plan will be reviewed, and revised as needed.
- **COVID Updates and Briefings:** The ED and several other staff continue to participate on bi-weekly statewide COVID briefings and pass along relevant information to other staff and stakeholders. Staff stay current on best practices through weekly Surveillance Staff calls and Public Health Emergency Preparedness staff calls with DHHS. The ED participates in weekly directors' calls w/ DHHS, a weekly director's call with the State Epidemiologist, and biweekly calls with the local health directors. Staff also receive situational training through calls with the CDC.
- **Staff COVID Briefings and Surveillance Staff Briefings:** Continue to conduct weekly to facilitate the sharing of current situational status, evidence-based practices, updates, policies/plans, messaging, and needs, etc.
- **Staff Training:** All staff completed "What is Radon, where can it be found and the role of LHDs" Training in Feb. 2 nurses completed BLS CPR training. All staff orientation has been completed; new BOH members pending.
- **Surveillance Staff Training:** As COVID cases began declining in February, Dr. John Bohmfalk, HC professor emeritus and SHDHD volunteer COVID-19 disease investigator, began providing short weekly refresher presentations on the etiology, incidence, and treatment of other diseases that require rapid public health response, such as pertussis (whooping cough) and bacterial meningitis, as well as rare conditions that have occurred in Nebraska, such as Hansen's disease (leprosy).

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:** Year 2 Annual Report is in progress. Section 1 must be completed by 3/31/2022. Section 2 is due 30 days after PHAB approves Section 1.
- **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) – Organizational Chart revision and pilot project are completed. Team-Building training is scheduled in March.

- Quality Improvement Projects: Implementation of the Career Development processes and revision of the Organizational Chart/Supervisory structure pilot project are completed. This has been measured through pre- and post-staff self-evaluations (Story Board in progress). Policy QI continues. QI of orientation processes is ongoing.
- Strategic Plan action plan and dashboard: This will be shared with the BOH at the January meeting.
- Community Health Improvement (CHIP) Implementation: All five priority steering committees are scheduled for April to address data and make for mid-point corrections and adjustments to the Community Health Improvement Plan (3rd year of 6-year CHIP).
- COVID19 Response QI/PM: Continuing process improvement (policies and procedures) and assessing how we can improve as we progress through the pandemic. All staff participated in the Action Report focus on data analysis and process documentation to identify opportunities and successes for quality improvement.
- Performance Management (PM): The revised Organizational Chart and assigning of supervisors for all staff will streamline the PM processes to prioritize and gather data to use for improvement, reports and decision-making for the health department. All new staff have completed QI-PM training. Developed a Qualtrics survey to compile informal QI projects and measures/data from each staff/program area.
- PHAB Accreditation Standards and Measures: Version 2022 has 10 Domains, instead of 12, to align with the Essential Public Health Services. It designates which measures align with the Foundational Capabilities*. Health equity is emphasized and considerations are included in every domain. Preparedness requirements have evolved based on lessons learned during COVID-19. <https://phaboard.org/version-2022/>. SHDHD participated in the vetting process for this new version and is transitioning our own work to align with Version 2022.

*Foundational capabilities: 1) Assessment/Surveillance, 2) Emergency Preparedness and Response, 3) Policy Development and Support, 4) Communications, 5) Community Partnership Development, 6) Organizational Administrative Competencies and 7) Accountability/Performance Management.

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

- This essential service includes seven components and we are highlighting three of them for this reporting period:
 - Ensuring that appropriate, needed resources are allocated equitably for the public's health.
 - Expanding COVID-19 testing availability, assuring access to vaccine, and developing processes for distributing initial allocations of antiviral medications (a scarce resource at this time) have continued to be health equity focus areas for SHDHD over the past 2 months. In addition, SHDHD is facilitating access to at-home COVID testing by distributing test kits proportionally to schools and child care facilities that wanted them and working with emergency managers in Clay, Nuckolls and Webster counties to identify sites and place kits in locations for easy access by the public. Staff are currently identifying additional sites or processes for equitable access to at-home COVID testing, such as for shelter residents and individuals with developmental disabilities, and, most notably by advocating to NE DHHS the need to fix the procotor-option processes for ESL (Spanish-language) individuals.
 - Being accountable, transparent, and inclusive with all partners and the community in all aspects of practice
 - Ongoing engagement with the minority community in describing and reviewing the health needs in our district and the barriers to care (physical health, behavioral health) they are experiencing. We organized a meeting with the Spanish-speaking minority community to review assessment data and help choose priorities for a minority health improvement plan. The meeting was conducted in Spanish, with data summaries provided in Spanish by SHDHD's community health worker Julia Sarmiento, and was facilitated by Yesenia Peck (DiversityGPS and President, Nebraska Hispanic Chamber of Commerce & Foundation) and Patricia Castro, (DiversityGPS). Aida Evans (Migrant Education Program, local Latina leader and part-time SHDHD community health worker) is a critical asset for recruiting and engaging participants in this process.
 - Developing an understanding of the broader organizational infrastructures and roles that support the entire public health system in a jurisdiction (e.g., government agencies, elected officials, and non-governmental organizations).
 - Identified roles of counties and municipalities in supporting public health infrastructure and requested a modest proportion of each entity's American Rescue Plan Act (ARPA) funding for public health infrastructure. Customized letters/proposals were sent to elected officials in each of the four counties and 26 municipalities. A letter of support for LB1138, to allocate state ARPA funds for local public health infrastructure, was sent from the SHDHD Board of Health to the members of the Appropriations Committee.

Success stories: How we made a difference.... *Quality Improvement!!*

Quality Improvement Project: SHDHD Organizational Chart Improvement

Aim Statement: To improve SHDHD's organization chart (OC) to allow for a more tiered organizational approach, a clear definition of supervisory roles and reporting structure.

Strategy Description & Purpose: Our strategy to improve the OC will include initial review, facilitated discussions with each staff member to identify gaps and needs, review of data collected, revise OC, trial period to implement revised OC, evaluation of trial period, board approval of revised OC.

Start date: June 2021

Estimated completion date:

- Project Team review, June 2021
- Data collection, June-Nov, 2021 (through staff evaluations and one-on-one meetings)
- Pilot project, Nov 2021-Jan 2022 (3 months with all staff reporting to their supervisors at least once a month)
- Evaluation, Nov 2021-Feb 2022 (survey completed by all supervisees on meeting productiveness)

Resources Needed: Staff time to complete data collection and analysis, develop and revise OC.

Departmental Implications: This is an essential project for SHDHD's strategic plan as well as for overall department management/function.

Customers: All SHDHD staff members, current and future grantors and SHDHD's Board

Stakeholders: All SHDHD staff members and SHDHD's Board

Measurement: (*Performance Management!*)

- A new OC approved by Board of Health
- Supervisory staff completing program staff evaluations
- A defined definition of each level's roles and responsibilities.
- Staff engagement (80%+ of staff is satisfied/strongly satisfied)

Impacts/benefits:

- Completion of this project will ensure all staff members know who to report to and what their expected reporting and staff supervision looks like
- Completing this project will allow new hires understand from day 1 what is expected from them
- Less stress on current supervisory staff (Executive Director only)

Success!

New Organizational Chart

All staff evaluations completed (Workforce Development goal)

Supervisors identified/supervisees know their supervisor

Executive Director *less stressed*

Staff satisfaction scores met measurement goal

Board able to see the progression through a QI project 😊

Quality improvement moves forward with implementation to continually assess how to do things better!

- *Janis Johnson, BSN, Standards and Performance Manager, Assistant Director*




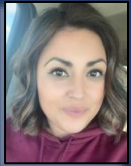




South Heartland Bi-Monthly Board Report: Staff-Specific Program Updates, January – February 2022

 <p>Dorrann Hultman Community Health Services Coordinator</p>	<p><u>Every Woman Matters Health Hub (EWM) Cancer Prevention /Immunization Program / Cancer Grant /CS-CASH:</u> <u>COVID-19 vaccination response:</u> Vaccine promotion and delivery: Our team continues to actively promote and administer COVID-19 vaccines to the public. During January and February, we held 8 public walk-in COVID-19 vaccination clinics for age 12+ and 2 VFC clinics at the department where we provided COVID-19 and flu vaccines for kids and their parents in addition to the other ACIP recommended vaccines for kids. Vaccine management: between 1000-2000 doses of vaccines in our ultra-cold freezer, regular freezer and refrigerator storage units. In January our new Helmer Medical Grade Refrigerator arrived to replace the current aging unit which will now be used as a back-up and for extra storage for cool cube (vaccine transport coolers) panels. Communication continues with 13 district COVID-19 vaccine providers with weekly vaccine deliveries made based on their requests each week. The number of clients coming to the Allen’s clinics are declining but during this time frame.</p>
 <p>Liz Chamberlain Community Health Worker</p>	<p><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 Covid Vaccine clinics at Allen’s, also help with monthly VFC clinics. <u>Falls Prevention:</u> Stepping On class @ Good Sam – Hastings January 12th – March 2nd with 20 participants. Beginning Tai Chi Moving for Better Balance classes started in Superior and Nelson. Advanced Tai Chi classes in Red Cloud. Beginning and Advanced Tai Chi classes will start in March at YMCA-Hastings. Next Stepping On class will be in Sutton Tuesday’s beginning April 5th – May 17th @ 10:00 am at the Sutton Community Senior Center.</p>
 <p>Brooke Wolfe Public Health Promotions and Prevention Coordinator</p>	<p><u>COVID-19 Response:</u> Assist as needed, primary person working on staff cross-coordination to ensure the right staff are at the table discussing different topics, breaking down department silos. <u>Grant Management:</u> During this reporting period, we submitted 14 quarter reports on or before the deadline; facilitated 10 internal grant-focused team meetings to better meet grant deliverables and submitted 4 new grant applications.</p>
 <p>Jessica Warner Health Surveillance Coordinator</p>	<p><u>Disease Surveillance:</u> During the reporting period, 2,307 SH residents have tested positive for COVID. We saw our highest daily case total since the beginning of the pandemic on 1/18/22 with 287 cases reported that day. I worked on one mass communication for providers regarding changes to CDC Guidelines and vaccine recommendations. I continue to track and monitor variant activity with 23 sequence results (Delta and Omicron) received during this reporting period. I also worked with a nursing home that reported a norovirus outbreak. A total of 28 individuals were infected. Specimens were sent to NPHL for sequencing.</p>
 <p>Janis Johnson Interim Assistant Director Standards and Performance Manager / Public Health Nurse/</p>	<p><u>Vaccinations:</u> Back up coordinator. COVID vaccination clinic support and administration & coordinating w/ partners for homebound & incarcerated individuals. Maintain current vaccine documents, guidance and messaging. <u>COVID-19 Response:</u> Staff onboarding/training/supervision/logistics. Epi team support. Assist with phone triage/messaging kept current. <u>Standards and Performance Management/Accreditation:</u> Accreditation Annual Report, Year 2-2022; After Action Report-Phase 2 submitted. <u>Interim Assistant Director:</u> timesheets, orientation, staffing, staff training, quality improvement & performance management, logistics, assist ED.</p>



South Heartland Bi-Monthly Board Report: Staff-Specific Program Updates, January – February 2022

<p>Jean Korth</p>  <p>Chronic Disease Prevention Program Assistant</p>	<p><u>Epi Support:</u> I continue working to support staff, answering calls to the department regarding COVID19, working with daycares, childcare centers and preschools with COVID activity, and monitoring cases migrating into SalesForce (disease investigation tracking software) for addition to the department’s line list. During the Omicron spike, I also assisted with case investigations</p> <p><u>MCH Grant:</u> I am working with the Children and Adolescent clinic in improving Mental Health Screening assessment in an effort to decrease suicide rates among youth.</p>
<p>Heidi Davis</p>  <p>Disease Investigator</p>	<p><u>COVID-19 Response:</u> I continue to work on case investigations for COVID-19 cases. I also have assisted on Lab Requisitions related to sequencing positive COVID-19 cases. I continue to support 8 schools in our health district, for questions related to COVID-19 activity at the schools. I attend Community Call Meetings weekly, presented by UNMC, which addresses the pandemic in our state. In addition I continue to provide support on data analysis reports of COVID-19 for weekly reporting.</p> <p><u>Lead Grant:</u> Recently I attended a virtual Lead and Healthy Housing Conference, with the opportunity to learn more about childhood lead poisoning and strategies to eliminate childhood lead poisoning.</p>
<p>Lauren Shackelford</p>  <p>Disease Investigator</p>	<p><u>COVID-19 Response:</u> I continue to work on case investigations for COVID-19 cases. I have also continued to work with long-term care facilities in COVID-19 outbreak. I have connected with facilities to ensure residents have access to COVID-19 therapeutics. I have also worked on data cleanup of cases.</p> <p><u>Communications:</u> I have developed and shared resources to promote COVID-19 and flu vaccination on social media.</p> <p><u>Building Healthy Families:</u> Continue to work with cohorts 1 and 2 on their refresher sessions and recruiting for cohort 3.</p>
<p>Julia Sarmiento</p>  <p>Bi-Lingual Community Health Worker / Interpreter</p>	<p><u>Bilingual Community Health Worker (CHW):</u> I interpret and translate and provide support for both VFC and COVID-19 clinics as needed.</p> <p><u>Communications:</u> I develop and share resources to promote Covid-19/Flu/Immunizations and wellbeing on social media, translating to Spanish for the Spanish Facebook.</p>
<p>Sam Coutts</p>  <p>Clerical Assistant for Finance and Operations & Vaccine Clinic Support</p>	<p><u>Clerical Assistant for Finance and Operations:</u> I continue to assist the Finance and Operations Manager by providing clerical support and expertise in areas such as grants and contracts, scanning, filing, and reviewing documentation, human resources regulation, and assisting with projects related to organizational policies, performance management/quality improvement, and budgeting, as requested. I assist other staff as needed with these areas as well.</p> <p><u>COVID-19 Clinic Support:</u> I also provide general administrative and clerical support and assist with data entry as needed.</p>
<p>Pam Stromer</p>  <p>Administrative & Technology Assistant</p>	<p><u>Administrative Assistant:</u> I continue to provide office support by answering the phone, mail service, receiving guests and providing various office duties.</p> <p><u>Technology Assistant:</u> My work is to help maintain and update the South Heartland District web pages, develop on-line surveys as requested, providing support to the various software programs SHDHD uses, provide support with the Microsoft Office programs, as needed, overhauling the Master Database so resources are accurate and up-to-date and continue to compile data for both the SHDHD COVID-19 and hospital dashboards.</p>

South Heartland Bi-Monthly Board Report: Staff-Specific Program Updates, January – February 2022

Support Staff for COVID-19 response and other projects:

Part-time Hire:

Aida Evans	Interpretation, Minority Outreach
Emma Severson	Project Support Intern (Hastings College)
Lindsay Pritchard	Nurse Vaccinator – COVID Clinics
Beatriz Marino Jachim	Nurse Vaccinator - COVID Clinics
Shelly Fletcher	Nurse Vaccinator – COVID Clinics
Kathryn Kamarad	Clinic Admin Support - COVID Clinics

Contract (Mary Lanning):

Leslie Anderson, RN	VFC & COVID Clinic Support
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Volunteer:

Sue Rutt	Phones, Maintains/assists with HD Highlights, COVID history, Accreditation history notebooks
John Bohmfalk	Disease Investigation

Vaccine Clinic Staffing Support:

Mary Lanning is continuing to provide pharmacy staff to draw up vaccine for COVID Pfizer vaccination clinics at the Allen’s building.

Student Practicums and Volunteer Experience (Spring 2022)

Alianna Higgins	Volunteer, assisting with Opioid Prevention project, Hastings College
Katie Heller	Hastings College, assisting with WIIN Grant (water testing for lead contamination)