

### **South Heartland District Health Department**

## Public Health in Action

September - October 2019







## Be Well, Feel Good, Get Checked

Women's Health
Event on October 19
with 11 women
attending. 11 partners
and 15 volunteers
helped with this event
(11 of the 26 were
bi-lingual)



## **Sutton Walkability Summit**

The community of Sutton came together for a summit to help determine a vision for their community, make a plan to improve the walkability of their community and make it easier for people to be active









38 Sutton community members participated in the Sutton Walkability Summit on September 27



# Highly Infectious Diseases

Training on correctly
& safely using
Personal Protective
Equipment (PPE) to
collect specimens for
Highly Infectious
Diseases (HID) on
Oct. 22, 2019 at
Mary Lanning
Healthcare
Left: Practicing
donning HID PPE
Right: Practicing HID
specimen collection



September – October 2019



## **South Heartland District Health Department**

## Public Health in Action





## South Heartland's 15th Annual Kids Fitness and Nutrition Day October 1, 2019

314 fourth graders from Adams, Clay, Nuckolls and Webster counties learned how to EAT WELL and MOVE MORE!

Partners: YMCA-Hastings, UNL Extension, Hastings College, CCC-Hastings, Mary Lanning

Funded by University of Nebraska at Kearney, the Nebraska Beef Council and South Heartland District Health Department

















# Medication Take Back Event on October 26

SHDHD Partners: Hastings Police Department, Adams County Sheriff's Office, Area Substance and Alcohol Abuse (ASAAP)

Outcomes:
46 drop-offs
70 pounds of unused or expired
medication collected





## **South Heartland District Health Department**

# Public Health in Action



September - October 2019

# Access to Healthcare \* Mental Health \* Substance Misuse \* Obesity & Related Conditions \* Cancer Community Health Improvement Plan (CHIP) Implementation Steering Committees

Steering committees for each CHIP priority had their first meetings in October. The committees are being led by community partners and will meet twice a year (October/April) to oversee implementation and to track progress on the strategies.









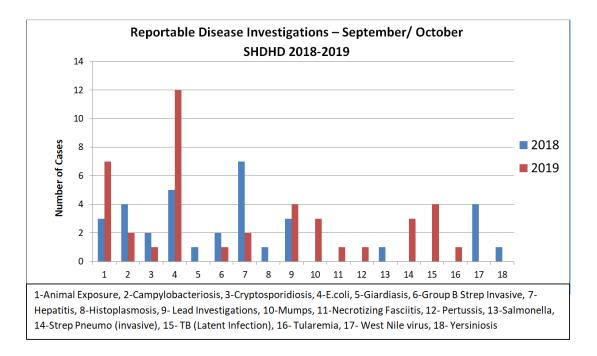


# Bi-monthly Report on the Ten Essential Services of Public Health

- 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.



- Mumps Outbreaks: Two mumps outbreaks occurred in the past three months effecting SHDHD. DHHS reports a total of 87 cases as of 10/24/2019 with 74 occurring in the past three months. SHDHD has investigated 5 mumps reports in the past 8 weeks. One case is associated with an outbreak in Northeast Nebraska and is considered a confirmed case. Two other cases have unknown origins and are probable, and two suspect. Three specific Health Alerts (HANS) were sent out to hospitals, providers, urgent care clinics, one child care facility and two public schools. Alerts were sent to notify providers, schools and childcare staff of possible exposure to mumps.
- ➤ <u>Lead Investigations</u>: SHDHD worked in collaboration with Head Start to reconcile lead testing for fall enrollment screening. Some tests were redrawn to confirm the initial screening result. Four new investigations have been opened for children in October. One home assessment is pending confirmation with DHHS. October 21-25 is Lead Poisoning Prevention week. We have been working with government and community partners to reduce the risk of lead exposures in our communities.
- ➤ <u>West Nile Virus</u>: Two press releases were sent to local media outlets to inform the public of positive mosquito pools in Adams and Webster counties. Mosquitoes are still circulating despite colder temperatures, posing potential risk for West Nile infection. Approximately 25 individuals have been tested for current infections, but no new human West Nile cases have been reported to SHDHD this season.
- Mosquito Trappings: have concluded for the 2019 surveillance season in both Webster County and Hastings.
- ➤ Hospital and School Illness Surveillance: Data for influenza activity is being sent to SHDHD by our hospitals and schools in order to monitor the duration and frequency of hospitalizations and children absent due to influenza-like-illness. School reporting also provides information regarding gastrointestinal illness, Strep, asthma and other vaccine preventable diseases. SHDHD provided information to school administration reporting a pertussis case along with control measures to prevent further spread.



## Regional & National

➤ <u>Measles Outbreak</u>: According to the most recent update, 1,252 cases of measles have been confirmed in the US this year (As of October 28<sup>th</sup>, 2019).

## 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)?
- Memorandums of Understanding: J Morgan has met with Law Enforcement and Emergency Managers in all four counties and renewed the MOU's with all of them. Law Enforcement basically stresses the need for planning for distribution points and possible security problems. Emergency Managers are agreeing to assist in determining the need for the Strategic National Stockpile (SNS), the ordering of it and, in the case of the Adams County EM, going to the Hub in G.I. to get it. Distribution of SNS is a basic topic for all EMs.
- Exercises: J Morgan is working with Garry Steele, Nick Elledge (Nuckolls Co. Emergency Manager) and Tim Lewis (Clay Co. EM) to develop a TTX (Tabletop exercise) that will be used in all four counties for planning to receive and distribute the SNS (Strategic National Stockpile). There will be a TTX in each county that will include emergency management, law enforcement, schools, hospitals, and SHDHD. J Morgan continues to assist MLMH in their full scale exercise, FSE, on a live shooter scenario.
- ➤ <u>ERC Regional Meetings</u>: Public Health Emergency Response Coordinators (ERCs) from SHDHD, Loup Basin, Central District, Two Rivers, and Southwest health departments met to revise the Emergency Response Plan and make it available on line to each other only. We met to complete the ORR (Operational Readiness Review) to determine what we have and have not completed in our plans to meet Medical Counter Measures in regards to community preparation, distribution of the SNS, and our ability to work with surrounding health departments in distribution and notification of partners and the public.

## 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.
- Community sign boards: were utilized to get information out (located in Edgar, Nelson, Lawrence, Red Cloud, Bladen, Roseland, and Kenesaw). Topics covered were EP, fall prevention, flu shots, and cancer.
- <u>Satellite offices</u>: Staff covered monthly hours in Superior and Guide Rock in September and October. Topics covered were vaping, mumps, and West Nile.
- News releases, public health columns, ads and interviews: Topics covered in September and October included Emergency Preparedness, Vaping, Falls Prevention, and Kid's Fitness and Nutrition Day. News releases that were published included "Be Prepared, Not Scared" (Emergency Preparedness), Positive WNV Mosquitoes, and Falls Prevention Awareness. Public Health columns and articles that were published: National Preparedness Month and The Dangers of Vaping. Radio interviews on KHAS: National Preparedness Month and The Dangers of Vaping. Also ads for Tai Chi Classes.
- Radon testing and mitigation: Answered several questions that consumers have regarding what levels are dangerous and when mitigation should be considered. There has been some interest in long-term tests.
- ➤ <u>SHDHD Facebook</u>: During the months of September and October, the number of people reached was 1107 (September) and 956 (October). The topics for social media included Emergency Preparedness, Suicide Prevention, Veteran Mental Health, Breast Cancer, Medication Take Back and "Get your Flu Shot".
- ➤ <u>Tai Chi Moving for Better Balance & Stepping On Classes</u>: Two people attended New Tai Chi Instructor Training in Lincoln on October 29<sup>th</sup> & 30<sup>th</sup>, one from Sutton and one from Hastings. Beginning Tai Chi classes started up

in Superior (7 new participants), Nelson (3 new participants) and at the YMCA Hastings (6 new participants) during September. Advanced Tai Chi classes are offered all year in Hastings at the Golden Friendship Center and YMCA, and in Red Cloud at the Community Center, for individuals that have completed the beginning 12week class. Nine of SHDHD Tai Chi Instructors attended refresher training in Lincoln with Suman. Stepping On started a new class at Grace United Methodist Church in Hastings (25 new participants) in October. Stepping On meets once a week for seven weeks for 1 ½ hours with guest experts talking about fall related topics. Completed STEADI (Stopping Elderly Accidents Deaths and Injuries) pilot with two Mary Lanning Clinics in September with the two clinics referring 22 participants to SHDHD fall prevention classes. UNMC Community Engagement and Health Literacy Librarian hosted workshop September 16, 2019 for the Central Plains Library System public library staff at the Red Cloud Library, focusing on providing health information and outreach programs for older adults. Fall Prevention Coordinator was asked to do a short demonstration of simple exercises for older adults and talk about any local/regional programs or organizations that libraries can collaborate with to promote fitness and physical activity in older adults, so provided a demonstration of Stepping On exercises and Tai Chi. SHDHD collaborated with GSV, Hastings Fire & Rescue, Red Cross, and YMCA – Hastings for a Smoke Detector installation event for residents of Hastings, age 55+ on September 28, 2019 from 9 - noon. In addition to receiving Carbon Monoxide detector / Smoke Detectors, a home inspection for falls risks was completed.

- Smart Moves (Diabetes Prevention Program (DPP): Brodstone, SHDHD (at Head Start) and ESU9 have completed 9 months of classes, and Mary Lanning has completed 6. Village Pharmacy (Red Cloud) is planning to start a class in November 2019. SHDHD submits data reports to CDC every six months for Brodstone and for SHDHD's Head Start classes. Brodstone and SHDHD continue to maintain their full recognition status from the CDC. Mary Lanning and Village Pharmacy are in the process of receiving full recognition.
- > <u>YMCA's SMBP Program</u>: The YMCA has expanded the program to Brodstone Hospital while continuing to be heavily involved with ML's Community Health Center, SHDHD and Hastings Family Care.
- Public Libraries: SHDHD is using the ten public libraries located in the district as an avenue to keep people in our district informed about health issues. A plan has been developed to change out materials quarterly with a focus on seasonal topics and topics that support our CHIP priorities. Information on-the Diabetes Prevention program, Smart Moves, as well as the Every Woman Matters program, will remain in the information holder. For the months of October through December materials on Emergency Preparedness and Falls Prevention will be the focus. We are working on separate holders with information in Spanish for four of our public libraries, as combining English and Spanish brochures in the same holder is difficult to access.
- ➤ <u>Hastings Public Schools Health Fair</u>: Approximately 185 HPS employees were provided education and information promoting flu vaccination, adult immunizations, breast, cervical and colorectal cancer screenings and were encouraged to schedule preventative wellness visits each year as covered by their insurance plan. Golden Rule Skin Clinic was there promoting skin cancer screenings.

## 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?
- ➤ <u>CHIP implementation</u>: Five CHIP priority steering committees met in October. These committees will lead implementation of CHIP priority objectives and strategies and increase engagement from other community partners. Leads and co-leads for each committee include a healthcare and community leader, with members from other organizations and SHDHD staff. SHDHD is the backbone organization supporting the process.
- ➤ <u>CHIP Promotion</u>: Infographics for each CHIP priority are near completion to help promote the goals of the Community Health Improvement Plan and engage stakeholders and partners in the implementation phase.
- Access to Health Care: Heartland Health Center (federally qualified health center located in Grand Island) submitted an application in April to HRSA for expanded services into Hastings through a satellite clinic. The clinic was not awarded in this round. The Heartland Health Center and collaborating partners, Mary Lanning Health Care and SHDHD, will be reviewing the application comments and will reapply at the next opportunity. This is an objective in the CHIP Access to Care priority.
- Obesity & Related Health Conditions:



Sept-Oct 2019 SHDHD

- Nutrition Advisory Board (NAB): The Nutrition Advisory Board is now meeting quarterly- there was not a meeting these two months. Next meeting is in November.
- Improving Health through the Environment: Healthy Hastings (HH) continues to meet to fulfill their action plan. There was not HH meetings these two months. Sutton hosted their community summit, 38 attendees, and developed a plan with 5 key areas of focus. They also hosted their first implementation team meeting, 12 members, to break down the action plan and begin assigning individuals responsibilities. All key members (school, chamber, park board, business owners, etc.) are involved.
- Prevention Connection: Smart Moves, Diabetes Prevention Class (DPP): SHDHD continues to work with partners in implementing this evidence-based yearlong program, establishing the capacity to serve 3 of the 4 counties with Smart Moves. Partners include Brodstone Memorial Hospital, Mary Lanning Healthcare and Village Pharmacy of Red Cloud. SHDHD has also expanded to one worksite - Head Start.
- SHDHD WoW (Worksite Wellness): During the month of September, staff were encouraged to finish completing the financial challenge activity and the gratitude challenge for October. There was also a lunch and learn, presented by Judy Reimer, on stress management (6 of 11 staff members attended).
- Whole Schools, Whole Community, Whole Child (WSCC): SHDHD has been actively connecting with schools about wellness activities, attending Hastings Public District (HPS) and Harvard Wellness Team meetings, and implementing action plans. In October, SHDHD attended at least one wellness team meeting from each of the HPS elementary schools, 2 of the Harvard wellness team meetings and 3 of the Nebraska Department of Education (NDE). SHDHD and partners also had the opportunity to learn about Physical Activity (PA) policy/programs/action items that can be done at the building level and at the district level to increase the minutes of PA students are getting. Schools are beginning to make the connection between mental health and wellness through expanding their wellness team members!
- SHDHD Healthy Kids Workgroup, HKW: During September and October, the HKW has been busy learning about grant deliverables, reviewing daycare/school/afterschool environmental assessments, reviewing readiness assessments and uploading evidence based/promising practice program/policies for the site implementation "toolkit." HKW has provided SHDHD with great expertise and insight when collecting data. During October, SHDHD staff worked to connect with schools, in-home daycares, centers and afterschool programs to complete the environmental assessment. Completion results: 100% of the schools completed the assessment, 31 of 48 child watch/daycares/afterschool programs completed the assessment and of those that completed the assessment, 15 sites were interested in working further with SHDHD to improve their physical activity and nutrition environments.
- Kids Fitness and Nutrition day: SHDHD and community partners (YMCA, Hastings College, UNL Extension, CCC and ML) hosted the 15th annual Kids Fitness Day in Hastings. There were 314 students from 11 schools in attendance. Pre/Post assessments indicated students increased their knowledge about healthy nutrition habits and understanding the value of being physically active.

- Cancer Coalition: The South Heartland Cancer Coalition with additional partners held the 5th annual "Be Well, Feel Good, Get Checked" Women's Health Event on October 19, 2019 at the YWCA. 11 women attended this event to learn about breast cancer and mammogram screening. Women identified with screening needs will be navigated and assisted with barrier reduction to screening. The women also participated in BP checks, biometrics, learning simple exercises to do at home and cooking demonstration by UNL Extension. There were information booths by SASA, YWCA, CHC and SHDHD. Flu shots were given by Walgreens with vouchers for free vaccine for the uninsured.
- Mary Lanning Healthcare Cancer Committee: Next meeting is in November.
- Lung Cancer: Radon detection kits remain available at SHDHD, satellite offices and UNL Extension.
- Colon Cancer: We are beginning a new grant cycle for FOBT kit distribution. The two ML clinics are starting to utilize our FOBT kits for their patients with financial need. One client with a positive result is being navigated to colonoscopy covered by the NE Colon Cancer Screening Program due to client's uninsured and low income status.
- HPV Cancer Prevention/Cervical Cancer: Human Papillomavirus (HPV) vaccine educational materials and banners in English and Spanish were displayed and shared at the monthly VFC clinics and at Community Health Center, Community Health Workers connect families to resources for vaccination of children through our VFC clinic and for cervical cancer screening for women through the EWM program.
- Breast Cancer: Using the Encounter Registry web-based tool, health hub staff continue to identify women in need of breast, cervical and colorectal cancer screening as well as resources to lifestyle change. Needs are assessed including health coverage and other barriers that might stand in the way of a woman



Sept-Oct 2019 SHDHD

completing cancer and cardiovascular screenings. Those without insurance who meet the Every Woman Matters program requirements are assisted with completing the Healthy Lifestyle Questionnaire to enroll in the program. In Sept./Oct. staff enrolled 2 new clients in to the program. 5 women were navigated to breast and/or cervical cancer screening. Through our Health Hub Collaborative Impact Project we are working with the Hastings Imaging Center and Hastings Radiology Associate to address the financial barrier impeding access to breast cancer screening for minority women in our district. We are reconnecting to these women from our women's health event last fall and helping them apply for ML assistance for the physical and mammogram, providing them with a mammogram scholarship covering the cost of the radiology reading of the mammogram. 3 women have completed screening mammograms through this program in Sept./Oct. bringing the total for this pilot project to 8.

- o Prostate Cancer: No activity in Sept./Oct.
- Skin Cancer: No activity in Sept./Oct.
- Substance Misuse: SHDHD participates on the board of Area Substance and Alcohol Abuse (ASAAP) for coordination of education and prevention activities. Stefanie Creech-Will, the executive director is serving as the vice chair of the CHIP Substance Misuse Steering Committee. Held a drug take back event on October 26 (National DEA Medication Take Back Day), partnering with Hastings Police Department (it was held at HPD this time), Adams County Sheriff's Office, ASAAP collecting 70 pounds of expired or unused medications to keep our groundwaters safe and reduce opportunities for prescription drug misuse. Continue to promote ongoing take back opportunities all year round at area pharmacies.
- Mental Health: VetSET/Making Connections continues making twice monthly media post on Facebook and Twitter to share mental health and prevention messages for veterans and their families. Developed education (public health column and radio interview) on mental health and suicide prevention for November 1 and partnered with Janelle Brock, Suicide Prevention Outreach and Educational Specialist, VA-Nebraska Western Iowa Healthcare System.
- ➤ Rural Behavior Health Network: SHDHD continues to implement the HRSA project by hosting four rural health network meetings. All of the 5 agencies involved in the network were able to attend at least three of the meetings in these last two months. The Network, developed/approved/dispersed a consumer and provider survey to assess the current Behavior Health needs across the district and have started collecting local hospital data on readmissions, referrals etc. The Network is working on a network structure by developing/approving a mission statement. The network will look at a vision statement and bylaws in the upcoming months. In addition to the Network meetings, program staff and executive director participate in regular HRSA Technical Assistance webinars and monthly calls to ensure the project is progressing and Network is sustained beyond the grant cycle.
- ➤ <u>Vital Signs Health Fair Board</u>: Two SHDHD staff were reappointed to the VSHF board. One staff attended the special planning meeting in September. Exploring changing the community health fair model after 2020.
- Other Collaborations:
  - Hastings Health Ministry Network, HHMN: Two SHDHD staff members attended and contributed at the
    monthly network meeting in September, one staff attended in November. A copy of the CHIP was shared,
    as well as other education.
  - o <u>Local Emergency Planning Committee, LEPC</u>: Participation in October of one staff member in Adams County and two staff members in Clay County.

# 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 (New Plans):
  - Public Health Emergency Preparedness (DHHS): Subaward executed on 09.16.19 (Project start date was 07.01.19)
  - Opioid Prevention (DHHS): Subaward not yet executed. SHDHD submitted a work plan for a three year
    grant that will allow for prevention and interventions directed towards opioid abuse. This grant has a
    planning component that requires a strategic plan. Strategies and measures from our CHIP Substance



Misuse Steering Committee will align nicely with this grant. Total award for each year: \$18,241 (with potential for additional funding).

- Accreditation (DHHS): Subaward executed on 10/15/19 for project period 10/1/19 09/30/20 (\$10,000).
- Central States Center for Agricultural Safety and Health (CS-CASH): Promoting a Culture of Health and Wellness in the Rural Ag Community: A Collaborative Approach with partner commitments from Blue Hill Clinic, Blue Hill Ambulance, Red Cloud Ambulance, and Nebraska Extension. Awarded \$20,000, project period 11.01.19 – 04.19.21. Not yet executed (start date 11.91.19)
- Falls Prevention (DHHS): Submitted workplan and budget for Oct 2019 Sept 2020 project period to continue Tai Chi: Moving for Better Balance and Stepping On classes, and STEADI falls risk screening and referral initiative. Subaward is now fully executed.
- NE Comprehensive Cancer Control Program: SHDHD submitted a proposal to support strategies in our Cancer Priority: Increase the number of partner clinics working to increase their cancer screening rates. We were one of 3 (out of 6 applications) to get a notice of award: \$25,000. Project period 11/15/19 08.31.19. Not yet executed.
- Childhood Lead Poisoning Prevention Program (DHHS) Submitted work plan and budget for 09.30.19 09.30.20 (due date 10.31.19) for \$7200 (allowed amount).
- Performance Management System framework, PMS: A combined quality improvement and performance management policy was developed along with a revision of our PMS framework (diagram). Combined QI-PM Plan is in progress. Also, staff continue to track program specific measures in the performance management dashboard to measure health department performance.
- ➤ MCH Title V Grant Proposal: JW is participating on a statewide workgroup generating strategy ideas and data sources that will be part of a state-wide proposal for grant funding through Title V. This is a component of access to care as part of our CHIP priorities.
- Community Health Assessment (CHA) Report and Community Health Improvement Plan (CHIP), 2019-2024: are available for partners and the public on the SHDHD website.
- ▶ <u>DHHS Annual Report</u>: The DHHS Office of Community Health and Performance Management supported NALHD to produce reports for each Nebraska LHD. The 2019 Annual Profile Report to the legislature is now complete and also available for the board and public.
- Public Health and Primary Care Integration for Falls Prevention: The STEADI (Stopping Elderly Accidents, Deaths & Injuries) initiative is being implemented by two Mary Lanning Clinics referring patients for upcoming Fall Prevention Classes. STEADI consists of three core elements: <u>Screen</u> patients for fall risk, <u>Assess</u> modifiable risk factors, and <u>Intervene</u> to reduce risk by using effective clinical and community strategies (such as referral to Stepping On and Tai Chi programs). Combined, these elements can have a substantial impact on reducing falls, improving health outcomes, and reducing healthcare expenditures.
- Public Health Emergency Preparedness (PHEP) Plans: J Morgan is meeting with Emergency Response Coordinators from Central District, Loup Basin, Two Rivers, Southwest, and the TRIMRS Coordinator to complete the new ERP (Emergency Response Plan) and ORR (Operational Readiness Review) requirements of the new PHEP Subaward. These must be completed by the end of the year.
- Partner Coordination, Pandemic Planning: J Morgan is a member and attended the quarterly meeting of the MAAA Advisory Board. Discussion included how SHDHD and MAAA can work together to meet the needs of the vulnerable populations in our district, especially in the case of a Pandemic.
- ➤ <u>SHDHD Strategic Plan</u> Completed a 2-page SHDHD 2020-2025 Strategic Plan summary document, reviewed by Strategic Planning and Policy Committee members. Will go to full Board 11.06.19 for approval of goals

## 6. Enforce public health laws and regulations.

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

- Describe our efforts to educate members of our community on public health laws, policies, regulations, and ordinances and how to comply with them.
- What laws and regulations have we helped enforce to protect the public's health?
- Nebraska Clean Indoor Air Act: No smoking violations reported this period. Met with 8 Law Enforcement agencies in all four counties and distributed and discussed SHDHD procedures on NCIAA enforcement.
- ➤ <u>NE legislature activities</u> participating with Friends of Public Health in statewide local public health planning for a legislative request for increased funding for local public health departments.



➤ <u>Local laws and ordinances</u> – We have been reviewing local, state and federal laws and ordinances to gather a list of those impacting public health interventions and documenting, as appropriate, the regulated entities, the authorities, the inspection schedules, SHDHD roles and responsibilities, partner organizations, etc.

## 7. Help people receive health services.

(Are people receiving the medical care they need?)

- Describe the gaps that our department has identified in personal health services.
- Describe the strategies and services that we have supported and implemented to increase access to health care
  and establish systems of personal health services, including preventive and health promotion services, in
  partnership with the community.
- ▶ Immunization: Vaccine for Children Program: In Sept./Oct., clinic staff delivered 175 vaccines to 82 patients at two monthly clinics and an additionally scheduled a flu shot only clinic. This extra clinic was scheduled due to the need to accommodate and vaccinate for flu prior to the end of October as recommended by the CDC. Of those 82 patients seen, 69 (84%) had no insurance, 10 (12%) had Medicaid, and 3 (4%) were underinsured. 22 of the 82 VFC patients (39%) were new to the clinic. Total donation collected from clients for Sept./Oct. = \$392.00 (avg. \$3.57 per immunization or \$4.78 per patient).
- ➤ Immunization: Adult Immunization Program: In Sept./Oct., the clinic staff delivered Tdap to 2 adults (age 19 and over). Both adults were new to the clinic and were uninsured. SHDHD brought in WG pharmacy to hold a flu shot clinic, with free flu vaccine vouchers for the uninsured, at the department on 10/17/19 and at the "Be Well, Feel Good, Get Checked" women's health event on Saturday, 10/19/19. 44 adults were vaccinated at these clinics with 38 vouchers given for no cost flu vaccination.
- Reminder/Recall to improve vaccination rates: No activity in Sept./Oct.
- ➤ <u>Hastings College (HC) Influenza education and vaccine promotion</u>: 3 meetings were held with this group with student led activates for educating about flu and promoting vaccination on campus: traveling education table, posters in residence halls, restroom stalls, various buildings and the student union.
- Community Health Worker (Bilingual):
  - Engaged 15 new clients, 1 referrals to other organizations/providers, 1 client enrolled in EWM
  - Working with 10 uninsured Spanish speaking women to complete mammogram through the Collaborative Impact Project. 3 women are scheduled to complete their mammogram screenings with interpretation provided by SHDHD CHW.
  - Provided interpretation for 30 VFC patients.
  - Completed 2 presentations for the Minority Health Grant in September and 2 in October.
- September/October: continue to do <u>SMBP checks</u> on five participants: one participant finished the 7<sup>th</sup> through the 8<sup>th</sup> office hours blood pressure check and completed YMCA SMBP survey. Two participant completed 7<sup>th</sup> through the 8<sup>th</sup> office hours and 4<sup>th</sup> Nutrition program and completed YMCA SMBP survey, one participant completed 4<sup>th</sup> through the 8<sup>th</sup> office hours and 3<sup>rd</sup> and 4<sup>th</sup> Nutrition program and completed YMCA SMBP survey. One participant completed 2<sup>nd</sup> through 6<sup>th</sup> office hours and 2<sup>nd</sup> and 3<sup>rd</sup> Nutrition program. One new participant completed paperwork. Health Coaching EWM clients for <u>September</u>: able to complete 2<sup>nd</sup> Health Coaching call with 3 participants and 3<sup>rd</sup> and final Health Coaching for 2 participants and completed EWM survey. Unable to connect with 2 participants during September. <u>October</u>: Completed 3<sup>rd</sup> and final Health Coaching for 5 participants and completed EWM survey. Connected 7 participants to Blood Pressure program.

# **8**. Maintain a competent public health and personal health care workforce. (Do we have a competent public health staff? How can we be sure that our staff stays current?)

- Describe our efforts to evaluate LHD staff members' public health competencies. How have we addressed these deficiencies?
- Describe the strategies we have used to develop, train, and retain a diverse staff.
- Provide examples of training experiences that were provided for staff.
- Describe the activities that we have completed to establish a workforce development plan.
- ➤ Performance Management (PM): The QI-PM Team has completed the NACCHO survey and training, the staff has completed the survey and training will follow. The combined score for the 2 surveys is 4.3 on a 6 stage scale. The QI-PM Team is prioritizing transitional strategies in each of the 6 stages to develop goals to work toward stage 6 a culture of quality.



- ➤ <u>The Workforce Development Plan</u>: The plan has been reviewed and revised and better addresses SHDHD capabilities, gaps and barriers training goals will be developed from these and the combined analysis of core competencies for all staff.
- <u>CLAS and Literacy Improvement and Innovation Project (Title V)</u>: The CLAS (<u>Culturally and Linguistically Appropriate Services</u>) and Literacy Innovations Project final report was submitted 10.30.19.
  - The <u>CHIP Infographics</u>: English and Spanish for each of the CHIP priority health areas are nearing completion with usability testing and translation edits. Feedback from the SHDHD Infographic Design Team, staff, usability testing participants and 5 Steering Committee members have all been positive.
  - o Language interpretation skills training: Odeth Mendez and Albert Pedroza are currently completing.
  - Staff CLAS and Health Literacy pre- and post-tests: show improvement in knowledge and understanding and point out areas requiring further training.
- Community Health Worker (CHW) Program Metropolitan Community College Omaha: Liz was accepted into the HRSA grant's CHW on-line program starting December 2, 2019. She will need to complete 6 on-line classes in two years. She was given an extension of a year, since she works full time at the health department.
- TOP® Facilitation Strategic Planning Training: Brooke attended the 2-day TOP® Strategic planning workshop in October learning how to facilitate strategic planning using the Technology of Participation (TOP®) method.
- <u>Data Training</u>: Staff participated in three webinars provided by the DHHS DPH Data Collection, Qualitative data and Data Visualization (communicating data in Word and Excel).
- ➤ <u>Lead Paint Risk Assessor / Paint Inspector Certification</u>: DHHS offered certification training for environmental Health staff and invited surveillance staff to participate. Jessica completed these certifications in October in order to conduct home risk assessment in our district.
- Lead Healthy Homes Midwest Regional Conference: The Healthy Homes conference provided updates related to lead testing, sources, community collaborations, risk assessment and available grants. HUD provided information for the process of applying for grants and what is available to improve homes and reduce community lead exposures. J Warner and M Bever attended this Midwest regional conference in Indianapolis, IN.
- ➤ <u>Bridges Out of Poverty:</u> Three staff members (LC, OM, JW) attended a training hosted by Hall County Housing Authority for understanding and working with low income individuals to help them achieve their dreams/goals.
- ➤ <u>Emergency Response</u>: J Morgan attended the annual Emergency Response Coordinator (ERC) Workshop in Broken Bow. 20 ERCs and some state representatives attended. Discussion topics: new ERP, Message Mapping, Vulnerable Populations, PHEP and SNS updates, and additional training in NESIIS.
- ➤ <u>Ebola, PPE training</u>: J Morgan attended highly infectious disease (HID) PPE and specimen collection and preparation training at MLMH. He is one of the few ERC's who are designated to deliver HID specimens to the Nebraska State Lab should State Patrol not be available due to time restrictions.

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

- Provide examples of our evaluation activities related to evidence-based public health programs.
- Provide examples of QI projects that we have completed or are in process.
- ➤ QI Plan: A QI-PM Policy was developed to revise the QI plan to include performance management (QI-PM Plan). This plan will be cross walked with other plans strategic planning, workforce development plan, CHIP to develop goals and improve tracking and reporting of outcomes (performance management system).
- ➤ <u>SHDHD Performance Management Dashboard</u>: Staff are tracking 22 health department measures currently in use in administrative and programmatic areas. Data for these measures will be used to monitor SHDHD successes, needs for revision or change, and for departmental decision-making and quality improvement.

# **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:



- o In the Every Woman Matters/Community Health Hub project, SHDHD uses evidence-based strategies to address health inequities and improve screening rates for cervical, breast and colon cancers.
- Tai Chi Moving for Better Balance and Stepping On: are evidence-based programs for falls prevention in older adults who have a fear of falling or that have fallen. In the South Heartland District, beginning and/or advanced <u>Tai Chi classes</u> are offered in all 4 counties. Tai Chi classes are set up to meet twice a week for 12 weeks for 1 hour. The finish of fall prevention grant cycle (September 2019) Tai Chi classes 26/27 participants (96%) improved/maintained their <u>Time Up</u> and <u>Go score</u> (TUG). For the <u>Stepping On</u> classes 30/32 participants (94%) improved/maintained their TUG.
- Stepping On classes: meet once a week for seven weeks for 1½ to 2 hours and then a booster session in 3 months; classes started in Hastings on October 9, 2019
- We are continuing to use the evidence-based Reminder Recall process for immunization clinic clients to improve immunization rates.
- STEADI: SHDHD is piloting the evidence-based STEADI (Stopping Elderly Accidents, Deaths & Injuries) program with 2 area clinics. In these partnerships, health care providers are encouraged to conduct falls risk assessments and refer at-risk patients to the health department for connection to falls prevention classes. Since June 22 participants were referred to SHDHD to fall prevention classes. During September, Fall Prevention Coordinator promoted the evidence-based program by visiting 56 health care facilities or businesses: 14 primary care clinics, 3 hospitals, 2 urgent care, 8 physical therapy, 7 vision clinics, 13 pharmacies, 1 shoe business, 6 senior centers/MAAA, a small town community center and a small town bank to present them with Fall Prevention informational cards and Stay Independent (STEADI brochure) for their clients/patients and staff.
- <u>Public Health Accreditation Board (PHAB) Standards and Measures:</u> Completion of accreditation will align SHDHD with these evidence-based measures, improving quality and performance. The SHDHD Action Plan completion is in progress, due December 3, 2019 by 12 midnight.
- Mental Health Screening Practices: SHDHD's new HRSA-funded project to develop a rural behavioral health network is surveying behavioral health and primary care providers to determine their evidence-based screening practices and barriers to implementing screening/assessments.
- ➤ Research/Contributing to the Evidence Base of Public Health:
  - <u>Best practices in Closed Points of Dispensing (PODs)</u> SHDHD participated in a study with Dr. Terri Rebmann, a researcher with the Institute for Biosecurity within Saint Louis University (SLU) to assess best practices related to selecting, recruiting, and managing closed POD sites. The research will help identify best practices for selecting, recruiting, and managing closed POD sites. Many disaster planners have requested this information. Our experiences will contribute to improvements in POD planning nationwide.
  - A report titled "The Integration of Public Health and Primary Care: An Environmental Scan of Nebraska" authored by David Palm, August Kamara, and Brandon Grimm at the UNMC College of Public Health was released on September 5, 2019. The report describes the linkages between local health departments and primary care clinics in Nebraska. SHDHD participated in the research for this report completing an on-line survey about linkage initiatives with primary care clinics in our district. SHDHD was also one of 5 health directors participating in follow up phone interviews for more in depth discussion about some of our major activities, including if they have been successful, why have they been successful or if they have not been successful, what are some of the reasons why. We also discussed barriers and opportunities for the future and types of technical assistance and funding that would be helpful for moving forward.



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

## **Helping Uninsured Minority Women Access Screening Mammograms**

Out-of-pocket costs for mammogram readings are impeding access to breast cancer screening for low income minority women in the South Heartland District (SHDHD). Through a collaborative impact project between our department, the Hastings Imaging Center (HIC) and Hastings Radiology Associates, we are working together to provide no cost radiology reads for the mammograms of uninsured women.

The women qualifying for this project do not meet the qualifications for the Every Woman Matters Program. We assist them with applying for financial assistance through Mary Lanning Healthcare (MLH) and once they are qualified, navigate them to a provider for a physical exam. Next, they are navigated to the HIC for their screening mammogram with a Spanish-speaking technician. Interpretation support is also provided by SHDHD staff.

Eight women have had access to screening mammograms through this project with one woman needing diagnostic follow-up. For two of these women this was their first screening mammogram. For others it had been many years since their last mammogram.

The verbal feedback from these women has been very positive. One of the women shared that the experience was not as uncomfortable as she thought it would be. Another said, "The day I was seen for my mammogram I was treated well by the interpreter (Odeth, a community health worker with SHDHD) and the lady that did my mammogram (Kris). I was very happy to have been able to be part of this program and not have had to pay anything as I have a lot of medical debt. This was a big relief for me."

After submitting this success story to NE DHHS Every Woman Matters program. Melissa Leypoldt, program director, congratulated us on our work and shared that she was submitting our story to the CDC for Nebraska's quarterly reporting.

-	Dorrann Hultman,	Community Health	n Services Coo	ordinator, SHD	)HD
***	*****	*****	*****	*****	*****



# South Heartland Bi-Monthly Board Report: Staff-Specific Program Updates, Sept-Oct 2019

#### Jim Morgan



Public Health Risk Coordinator

## **Dorrann Hultman**



Community Health Services
Coordinator

# Emergency Preparedness and Environmental Health: WNV transing is over. Working to finish the Emerger

WNV trapping is over. Working to finish the Emergency Response Plan and Operational Readiness Review by December 31<sup>st</sup>. I am really looking forward to the tabletop exercises that will include schools - I hope that they agree to become closed Points of Dispensing (PODs). Having our Memorandums of Understanding renewed with Law Enforcement and Emergency Managers is satisfying and was being pushed by the state.

Every Woman Matters Health Hub (EWM) Cancer Prevention / Immunization Program: As we were preparing for our Aug. 1st immunization clinic we recognized that we had only a few appt. times remaining for the clinic on October 3rd. Looking at the schedule, many were kids coming in for flu shots only. This didn't leave us room to schedule the kids who were behind on shots after the Aug. and Sept. clinics. We made the decision to hold a "flu shot only" clinic on Oct. 10th. This worked well and helped us to vaccinate a greater number of children for flu.

We brought in Walgreens again with their free flu shot vouchers to serve the parents of our VFC kids and reduce the cost and language barrier.

#### Liz Chamberlain



Community Health Worker

# Fall Prevention: During September, I worked to promote the fall prevention program with organizations that could refer people to falls prevention classes. I went to 56 health care facilities or businesses throughout the district: 14 primary care clinics, 3 hospitals, 2 urgent care, 8 physical therapy, 7 vision clinics, 13 pharmacies, 1 shoe business, 6 senior centers/MAAA, and a small town community center and small town bank to present them with Fall Prevention ½ page informational cards and Stay Independent (STEADI brochure)

for their clients/patients and staff.

Walkability: I successfully engaged 38 Sutton Comm

**Brooke Wolfe** 



Public Health Promotions and Prevention Coordinator

<u>Walkability</u>: I successfully engaged 38 Sutton Community members in the community Walkability Summit to develop an action plan with 5 key focus areas.

<u>Rural Behavioral Health Network</u>: Including SHDHD, we have 5 agencies engaged in the Rural Behavior Health Network. We are working to develop a sustainable network to develop and implement a behavior health strategic plan that aligns with the community health improvement plan and addresses the needs identified through the provider/consumer assessment data currently being collected by network members.

#### Jessica Warner



Health Surveillance Coordinator

<u>Disease Surveillance</u>: Three Health Alerts (HANS) regarding mumps exposures were sent out to two public schools, one preschool and all hospitals, healthcare providers, labs, urgent care facilities. I have investigated one confirmed, two probable and two suspect mumps cases and two pertussis cases in Sept/Oct. Schools and hospitals are sending data to me for monitoring influenza activity. I completed two DHHS certification courses for Lead Hazard Risk Assessor and Paint Inspector in September. I also attended the Lead Healthy Homes Midwest Regional Conference in October. We submitted a grant proposal/work plan for a new opioid grant that will align with CHIP priorities over the next three years.

## **Alex Stogdill**



**Program Assistant** 

I have been assisting staff in multiple program areas: Helping prepare documents/record meeting minutes for CHIP Steering Committee meetings, developing/formatting documents for the Accreditation Action Plan, assisting with scheduling and data collection for the immunization clinic, assisting with events such as the Women's Health Event and Medication/Drug Take Back Event, and I recently attended an assessment training in Omaha to bring back ideas/information to implement in different areas of the department.



# South Heartland Bi-Monthly Board Report: Staff-Specific Program Updates, Sept-Oct 2019

#### **Janis Johnson**



Standards and Performance Manager / Public Health Nurse

#### Immunizations (VFC, Vaccines For Children):

Accreditation Coordinator/CHA/CHIP: I am continuing to finalize documentation requirements for our PHAB Action Plan (due 12/3/19). Staff are assisting with those measures that are addressed in their program areas.

Quality Improvement-Performance Management: 4/16 of the action plan measures address our plans and processes in workforce development, quality improvement and performance management. The development of these areas has definitely moved our knowledge and processes forward!

Jean Korth



Chronic Disease Prevention Program Assistant

<u>Health Literacy</u>: One of the practices in health literacy includes breaking complex information into understandable chunks. To assure the information in the new CHIP Health Priorities Infographics is understood by members of the South Heartland District community, I have been conducting understandability testing (usability testing). Participants viewing the infographics liked the "What can I do?" sections, use of icons, and the choice of colors, while understanding our strategies and expected results.

#### **Odeth Méndez-Peraza**



Bi-Lingual Community Health
Worker

Community Health Worker (CHW): Every week I try to complete at least 2 lessons for my Interpreters Skills Training. So far, I have completed my first module and continue to work on my second module. This training has helped me immensely by giving me knowledge and tips into the medical interpreter's role. As I continue to work with women in the Collaborative Impact Project, I have been able to help 8 women access their mammogram screening and 2 more were recently scheduled. I finished presenting last month and this month to the Harvard community. They were very grateful, asked many questions, and were eager to learn more about the health topics.

## Albert Pedroza



Lifestyle Coach for Diabetes Prevention, Mosquito Trapper, and Interpreter for Immunization Clinic

### Smart Moves Diabetes Prevention Class:

<u>West Nile Virus Mosquito Trapping</u>: Mosquito trapping has ended for the season. Currently summarizing the trapping data for the season, including species and numbers trapped according to trapping site.

<u>Health Literacy</u>: Translating the new CHIP Health Priorities Infographics into Spanish.