Tai Chi Fall Prevention Classes: Above, Nelson Advance Tai Chi—Instructors Kathy Brethour and Dennis Melvin.

Workforce Development: Staff completed self-assessments on the core competencies for public health professionals (Council on Linkages, 2014). The results from assessing our levels of competence on the 8 key dimensions of public health practice will help us determine areas of focus for future training and will be used as one component of the SHDHD Workforce Development Plan and for individual staff training plans.

Wear Red Day: Staff wore red for National Wear Red Day—Go Red for Women, held on the first Friday in February every year to raise awareness about heart disease being the No. 1 killer of women. During the month of February, SHDHD messaged about heart healthy habits for women and men.
Healthy Vending and Healthy Cafeterias: Taste Testing new vending options at the YMCA Hastings and new Choose Healthy Here signage at Brodstone Hospital cafeteria

UNMC College of Public Health team visits SHDHD: SHDHD staff and board members visit with Dr. Ali Khan (Dean of the College of Public Health), Dr. Brandon Grimm and Dr. Deborah Levy about priorities, programs and successes at SHDHD. Dr. Khan shared state data and priorities to move Nebraska’s ranking toward the healthiest state in the Nation (currently Nebraska is #12). Dean Khan and board member Dr. Charles Neumann tested their balance with a Tai Chi “timed up and go” assessment. Media coverage by Brandon Peoples of KHAS radio.

SHDHD Worksite Wellness:
Staff wellness challenge
Bi-monthly Report on the Ten Essential Services of Public Health

1. Monitor health status and understand health issues facing the community.
   *(What’s going on in our district? Do we know how healthy we are?)*
   
   - How do we collect and maintain data about conditions of public health importance and about the health status of the population, and how do we make it available to our partners and our community?
   - What major problems or trends have we identified in the past 2 months?

   **Local**
   - Surveillance data, water violations, and other [health information is made available](#) on our website, through links.
   - **Influenza** has hit hard this season with 641 individuals in our district being hospitalized with Influenza Like Illness (ILI) during the months of January and February. Currently, NE is at “WIDESPREAD” influenza activity level with 28.22% of rapid tests with positive results. Diagnostic surveillance indicates 5,652 total positives out of 27,497 across the state with 29 adult deaths attributed to influenza (median age 86).
   - One nursing home reported an outbreak of influenza with three residents being hospitalized.
   - **Respiratory syncytial virus** (RSV) is also circulating with 32% of rapid tests resulting positive. All ages have been affected by RSV including the elderly and children in daycares.
   - **School surveillance** - Gastrointestinal illness has been a predominant cause of absence during this period, however, nearly every school has reported students absent due to influenza. Reports for fall semester were sent out to principals and secretaries at thirty-five schools providing absence information for each school and the entire health district.

   - As of February 17, 2017, there have been 5,040 [Zika Virus Disease Cases](#) Reported to ArboNET for US States and DC. US Territories including Puerto Rico have reported at a total of 37,023 cases of Zika virus. Pregnancy Registries reports 1,455 Pregnant Women with “Any Lab Evidence” of Zika Virus Infection for US States and DC and 3,156 pregnant women for US Territories as of February 7th, 2016.

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)?
   - DHHS started entering [elevated lead lab reports](#) into NEDSS in October. During January/February, 77 labs were reviewed and letters sent to parents of children with elevated levels. Contact was made with three parents to assist in identifying sources of lead.
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.

- Staff covered monthly satellite office hours in Superior, Clay Center, and Red Cloud.
- Utilized community sign boards (located in Edgar, Lawrence, Red Cloud, Bladen, Roseland, and Kenesaw) to get information out. Topics covered in January-February: Safety, Radon, Heart Health, High Blood Pressure.
- News releases, public health columns, ads and interviews: News releases/columns/Sunrise 60 Podcasts included topics for radon action month, heart health month, and UNMC leader visits with South Heartland District Health Department podcast. Ads that were published: for new Tai Chi classes, Radon kits, and Fall Prevention classes. Additional news releases on Fight the Flu and Screen, Vaccinate to Prevent Cervical Cancer, Nebraska Injury Prevention & Control, Local network of parish nurses giving medical/spiritual care, and Scrubby Bear full page with pictures and captions.
- SHDHD Facebook: In January the average people reached per post was 69 people each post For February the average people reached per post was 90 people each post. The topics for Facebook and twitter were Radon Awareness, Cervical Cancer Awareness and screening recommendations, HPV vaccination, Influenza education and vaccine promotion and Heart Disease prevention.
- Worksite Wellness: 2017 starts a new year for the Worksite Wellness Network with new topics and new businesses joining. In January, 9 business participated in the free network teaser. Tonya V. from Workwell did the presentation over “Changing the worksite culture.” In February the topic was heart health “controlling blood pressure”- presented by SHDHD staff. There were 9 employees from 5 businesses in attendance. The network meetings are also hosted every other month in Superior for 5 businesses. In January there were only 2 businesses present but there was great conversation about the Workwell presentation “Why Worksite Wellness?”
- Senior Center Presentations: Four presentations were given in four senior centers across the District. Senior Congregate meals throughout the district covered topics on influenza, radon, cold weather safety, fall prevention and VetSET program.
- Fall Prevention: Helps older adults improve their balance and reduce the likelihood of falling. Research has shown that people who complete the program are half as likely to fall and are less fearful about falling. 90 older adults benefitted from 8 Beginning Tai Chi classes offered in Hastings, Red Cloud, Superior, Nelson and Sutton. Of the participants who completed the 12 week series 79% improved on functioning, mobility, strength and balance. Another 63 older adults benefited from 4 Advanced Tai Chi classes offered in Hastings, Red Cloud, Superior and Nelson. Currently there are 13 instructors in the SHDHD district teaching Tai Chi classes. Two instructors were sent to “Stepping On” training in Lincoln to be able to conduct 7 week workshop where participants learn exercises and strategies to help prevent falls. Stepping On workshops will be led by a health professional and a peer leader – someone who, just like participants, is concerned about falls. In addition, local guest experts provide information on exercise, vision, safety, and medications. Watch for a workshop in Hastings May 2017. Looking for instructors to teach “Stepping On” for Webster, Clay and Nuckolls County.
- Smart Moves (Diabetes Prevention Program (DPP)) –SHDHD continues to be involved in State DPP Action Planning.
  - Superior Smart Moves started 2 classes with 21 participants in each class. They continue to offer as worksite wellness program and several employees are participating as well as community members integrated into the classes. Some participants receiving Every Woman Matters Scholarships, one receiving 1422 scholarship, 2 receiving Brodstone assistance, as ineligible for our grant opportunities due to living outside of Nebraska.
  - Hastings Smart Moves class started with 13 participants. Mary Lanning offering as worksite wellness program and several employees are participating as well as community members integrated into the class. We have participants receiving Every Woman Matters scholarships.
- Provided heart health, healthy blood pressure, hypertension education to media, presented to worksite wellness group, and at the Bridge.
- Health Coaching: 3 trained staff are working to provide health coaching sessions (3) by phone to 49 women across the district, who are enrolled in the Every Woman Matters program.
➢ **Vital Signs Health Fair Board:** 2 staff are active members and meet monthly October through April to plan educational opportunities for VSHF participants. March 25-26 are this year’s dates. Activities planned are the inflatable colon, scavenger hunt, and, for skin cancer prevention, adding skin assessments by APRNs to the skin scope and sun safety education area.

➢ **4. Engage the community to identify and solve health problems.** *(How well do we really get people and organizations engaged in health issues?)*

- **Describe the process for developing SHDHDs community health improvement plan (CHIP) and/or implementing your work plan.**

- **Provide examples where we engaged the public health system and community to address health problems collaboratively. What were the evidence-based strategies that were implemented?**

**Community Health Improvement Plan (CHIP) Implementation** – Staff continue to implement the CHIP strategies with our partners:

➢ **Access to Health Care:**

- **Community Health Worker (CHW) initiatives** – Two meetings were held with education provided on bidirectional referral and hypertension. We are working to improve attendance by assessing other ways to connect and network with community health workers.

- **Prevention Connection** – Facilitated Merit-based Incentive Payment System (MIPS) webinar registration by our contracted Health Information Technology specialty group Praesidio, inviting all primary care clinics, 5 watched or registered to view archive. With contractor, Praesidio, provided electronic health record Meaningful Use gap analysis for Sutton Quality Clinic.

- **Discussions with Heartland Health Center about timeline and steps needed for expanding federally qualified health center services to Hastings.**

➢ **Obesity:**

- **Prevention Connection – Nutrition Advisory Board (NAB) -** The NAB met in January with 9 in attendance. The group was very helpful in guiding SHDHD to potential partners for Choice Healthy Here implementation, vending connections and promotion ideas. Outcomes from the meeting include: 4 potential partners for choice healthy here programing, vending signage suggestions for two worksites and two food pantry connections.

- **Prevention Connection – Healthy food options in convenience and grocery stores.** SHDHD spent the last two months networking with the new partners for the Choose Healthy Here program. The potential partners are Pump and Pantry of Hastings, CPI in Superior and The Food Cupboard of Hastings. Sanchez Plaza has committed to being a part of the program and store improvements/action planning will soon be occurring. We are establishing partners (UNL extension in Hastings and Nuckolls county) to continue to be involved in the 2016 partnered grocery stores. SHDHD also networked with food pantries in the Hastings and Superior area to improve their healthy food availability. SHDHD participated in the Food Insecurity conference in January where all non-profits with a focus on providing food for Hastings community members came together to share resources and develop a mission for future collaborations.

- **Prevention Connection: Superior’s follow up to their Walking Summit.** Superior met in January, 9 of the 11 members were presents. Meeting outcomes include: an action plan for the walkability project web page on the city’s website, a school walking challenge, ideas on applications for grant funding and an agreement to ask the city to repaint the bike lane connecting the parks.

- **Prevention Connection: Healthy Vending initiative** SHDHD hosted their first taste testing of the new healthier vending options at the YMCA. Between SHDHD staff and YMCA partner there were 127 interactions with YMCA clients and positive feedback. Nebraska Cold Storage (NCS) completed their employee surveys, met with the vendor and established a time line for actions. SHDHD will be hosting taste test at NCS come March. Brodstone has been working hard on improving their cafeteria options. SHDHD helped with signage to promote healthier foods, as the Brodstone dietary staff work to improve the healthy options available to patients and employees.

- **Prevention Connection: Healthy Hastings follow up on action summit.** Healthy Hastings continues to meet to fulfill the action plan. No meeting in January but in February there was 7 in attendance. All committees reported progress with the most progress in the community event planning committee- with their first planned event beginning in March. The coalition activated their communication process. The group also spent time discussing grant/funding opportunities.
• SHDHD WoW (Worksite Wellness) Staff have begun a new trip round the track for 2017 SHDHD wellness. Again the wellness team is hosting lunch and learns and providing activities/challenges for staff to participate in. For the month of January a life audit was the challenge- 63% staff participated. February for heart health month a lunch and learn from Mary Lanning registered dietitian presented-82% staff participated. In addition the staff activity is asking staff to do desk exercises twice a day all month long with a wellness team reminder twice daily.

• School Wellness: SHDHD has partnered with the Nebraska Department of Education to host and deliver Coordinated School Health Institutes for 2 schools in the district (Alcott Elementary and Longfellow Elementary). The first institute was February 14th with 10 participants - both schools, Hastings District Office staff, and UNL extension staff were all present. In addition SHDHD hosted their 3rd CATCH KIDS training on February 22- with 1 school and 2 community organizations (Hastings YMCA and Hastings College Physical Education faculty and 2 students) participating (7 in attendance). SHDHD continues to be an active member of the Hastings Public Schools District Wellness team.

➢ Cancer:
  • SH Cancer Coalition: South Heartland Cancer Coalition met in January and February. Collaboration occurs as we share time and resources while working toward the common goal of raising awareness of the need for cancer screenings, education to inform of symptoms and advantages of early detection and promoting evidence based screenings. Recent areas of focus: HPV vaccination, breast and cervical cancer screening/education, with Colon Cancer the focus of March activities.
  • Mary Lanning Healthcare Cancer Committee: SHDHD participated in the quarterly meeting. Presented local data from health needs assessment and shared ideas for prevention and screening activities that ML can partner with us on. Communication has continued as we plan for some of these activities at Vital Signs Health Fair in March.
  • Lung Cancer: ‘Smoking and Cancer’ educational flyer and Nebraska Quit Line cards continue to be included in all FOBT colon cancer kits. SHDHD promoted Radon Action Month throughout the month of January, with news releases, public health column, radio and TV interviews. Staff identified residents who have mitigated their homes and will be interviewing them for additional radon testing and mitigation promotion. Radon detection kits continue to be available through the HD and satellite offices. Invited presentation on radon to 25 individuals at Werner Construction.
  • Colon Cancer: Although we focus our campaign in March and April, FOBT kits for colorectal cancer screening are available to South Heartland residents 50-74 at no charge throughout the year. Plans are underway for the 2017 colorectal cancer education and FOBT kit distribution campaign.
  • Cervical Cancer: Human Papillomavirus (HPV) vaccine educational materials are shared at monthly VFC clinics. Cervical Cancer and HPV presentation was given at the Minority Women’s Health Event in October. Cervical Cancer/HPV educational presentation was given to 13 residents at the Bridge in January. 3 residents had no previous understanding of HPV.
  • Breast Cancer: Using the Encounter Registry we continue to identify women in need of breast, cervical and colorectal cancer screening as well as resources to lifestyle change. Needs are assessed including health coverage and other barriers that might stand in the way of a woman completing cancer and cardiovascular screenings. Those without insurance who meet the Every Woman Matters program requirements are assisted with completing the Healthy Lifestyle Questionnaire to enroll in the program. Those not meeting requirements are connected with the clinics offering assistance or Komen funds. CHWs help navigate these women to screenings and to diagnostic services.
  • Prostate Cancer: “Should I be tested” booklets from the ACS continue to be promoted at all health fairs.
  • Skin Cancer: Morrison Cancer Center (MCC)/Mary Lanning is partnering with us for their community outreach/prevention activities. Skin cancer was selected as a priority based off of the incidence and mortality rates in our district that were identified in the 2016 Community Health Needs Assessment. Projects will include sun safety education, Skin Scope and visual skin screenings by nurse practitioners at VSHF. Hastings College Student has created a Sun Safety education power point and is connected with Hastings High School Staff directly involved with peer to peer mentoring and is arranging times to present to students who can then present it to younger students. Dr. Farris, Surgeon, and Sally Molnar, Director of MCC, also have an interest in working with us to present Sun Safety education to Hastings High School Students in health classes this spring.

➢ Substance Abuse:
  • SHDHD is mobilizing partnerships with law enforcement in each county in planning for March and April Medication Takeback events.
SHDHD partners with Area Substance and Alcohol Abuse Prevention (ASAAP) and provides support to their prevention initiatives.

**Mental Health:**
- **Integrated Care** – A partnership between Children and Adolescent Clinic staff (primary care physician, psychologist, Master’s student), a pediatric psychiatrist, SHDHD, and the Behavioral Health Education Center of Nebraska (BHECN) is moving us toward a local pilot project in Collaborative Care, an evidence-based method supported and promoted by the American Psychiatric Association.
- **VetSET** – Began making follow-up with partner Organizations / Agency to strengthen partnerships and encouraging them to update their information to the Network of Care Website (6 out of 43 so far). Planning / negotiating with a local expert to provide Military Cultural Competency 101 presentations to area organizations. Met with Mayor Corey Stutte to discuss ways that the City of Hastings could move toward being a “VetSET” community.

**Other Collaborations:**
- Discussions with Hastings YMCA on ways to partner for a healthier community – The Hastings YMCA is planning to pursue a community-based blood pressure project modeled after a successful pilot in Boston, focused on partnering with pharmacists, and education and support for self-management of blood pressure to reduce cardiovascular disease. This will be a nice complement to the blood pressure management strategies that SHDHD is implementing through the 1422 Prevention Connection project.

5. Develop public health policies and plans.

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

- What policies have we proposed and implemented that improve population health and/or reduce disparities?
- Describe how our department engaged in agency-specific strategic planning to develop a vision, mission, and guiding principles that reflect the community’s public health needs, and to prioritize services and programs.
- What plans are we developing and implementing to improve our department’s quality and effectiveness (plans for quality improvement, workforce development, branding, communication, and performance management)?

**Grant Proposals (Plans)/Awards/New Funding:**
- SHDHD will receive an additional $2,390 for accreditation activities through an amendment to our current Accreditation subaward with DHHS.
- Revised our work plan and budget for 1422 Chronic Disease Prevention subaward with DHHS due to changes in staffing, adjustments in contractor scopes of work, and guidance from DHHS program staff. No change in total budget.

**SHDHD’s Performance Management System framework** is continuing to be implemented through performance measurement evaluation and ongoing quality improvement activities.

**SHDHD’s SHDHD Communication Plan** is being developed, summarizing communications from other plans. This will be reviewed with staff members and the BOH Policy Committee. The Plan will be presented to the Board in May 2017. A branding template file, for staff access, was added to the Branding Strategy. **Principles of the Ethical Practice of Public Health**, was reviewed by staff and will be presented to the Board for adoption in March.

6. Enforce public health laws and regulations.

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

- Describe our efforts to educate members of our community on public health laws, policies, regulations, and ordinances and how to comply with them.
- What laws and regulations have we helped enforce to protect the public's health?

**Nebraska Clean Indoor Air Act:** No smoking violations reported this period.

**SHDHD continues to monitor public water system violations** and post these results on our website. No water violations for this period.

**Shared the Nebraska Landlord Tenant Act** with residents with complaints about mold or bedbugs.

**Received call from Adams County Attorney’s office in regards to methamphetamine testing.** It involved parents and their friends being heavy meth users in the house. The children have now tested positive for meth in their systems and have been removed from the house. The concern was the level of meth in the house and how it could be tested. We gave guidance as to the types of tests that exist and our responsibility to assure the
results of meth testing for houses where a “meth lab” was in operation. There was no evidence of this in the house. We worked with the county attorney’s office to provide resources without being involved in the testing itself.

7. Help people receive health services.
(Are people receiving the medical care they need?)
- Describe the gaps that our department has identified in personal health services.
- Describe the strategies and services that we have supported and implemented to increase access to health care and establish systems of personal health services, including preventive and health promotion services, in partnership with the community.
- In January/February the Vaccine for Children clinic staff delivered 61 vaccines to 30 patients at two monthly clinics. Of those 30 patients, 24 had no insurance, 6 had Medicaid and 0 were underinsured. Total donation collected from clients for January/February = $52.00 (avg. $0.85 per immunization or $1.71 per patient).
- In January/February the Adult Immunization Program delivering Tdap to uninsured or underinsured adults 19 and over, administered 5 Tdap to 5 patients who were uninsured. In February SHDHD staff coordinated a free flu shot clinic for residents and staff at Crossroads Mission who are without resources to get a flu shot. Clinic was provided by Walgreens who through their partnership with DHHS has vouchers from free adult flu shots each year. 11 clients came through the clinic, 10 received flu vaccine, 8 were not up to date on Tdap so were provided information to schedule at SHDHD’s next clinic.
- Prevention Connection – Community Health Workers identified in the health district were invited to attend regular networking and education meetings led by SHDHD staff. Outcome: the group would like monthly meetings to network, learn about resources in district, and access to training/education. Our goal is to have them play a role in bidirectional referral including healthy food access, Smart Moves DPP class, and more.
- Community Health Worker
  Every Woman Matters (EWM)/Encounter Registry: 16 adult clients assisted in office; 10 adult client seen at home visits; 44 adult medical referrals to other organizations/providers. (Some of these referrals may be for their children, including 6 children that were referred to SHDHD’s immunization clinic. 3 adults were also referred to our clinic.) Health Coaching support calls to 8 eligible Spanish speaking participants.
  Immunization Clinic (VFC): Registered all clients and assist Spanish speaking as needed.

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.
- Accreditation Coordinator J Johnson is leading ongoing SHDHD staff training for performance management. Equity, Core Competencies and Ethics training were completed for staff and the Board (Ethics information was sent with the board packet for review prior to the March meeting). Results Based Accountability continues to be implemented weekly in performance measures of programs and services (quantitative, qualitative and outcomes). Staff have viewed examples of Story Boards and training will be provided by Katie Brandert after the Annual Meeting Luncheon. The Quality Improvement Procurement project will be made into a story board.
- Hastings College Interns and other students – SHDHD will be serving as capstone project preceptor for Katherine Kotas, an MPH student at UNMC. As an undergrad at Wayne State, Katherine completed a summer internship with SHDHD. For her MPH Capstone, Katherine will be analyzing fall injury data in our health district. Project proposal was submitted and we have started identifying datasets to include in the project. HC student intern Corrine Huthoefer is working on disease investigation and health data projects during her spring semester internship at SHDHD. HC pre-veterinary student intern Kim Spartz continues to provide support for radon testing data entry and analysis, as well as her focus on dog bite prevention (local data analysis and research on evidence based prevention approaches) following a suggestion last year from Board member Dr. Phyllis Salyards. Dr. Salyards has interest in implementing prevention training in schools and other venues with the Canine and Friends group.
- **Prevention Connection:** 1 Staff member attended the DHHS/UNL extension Choose Healthy Here project training.
- **Collaborative Planning Training:** Executive director attended a training on collaborative planning provided by the Prevention Institute along with other state partners interested in mental health and wellness strategies. Some tools and processes will be shared with other staff for use in partner collaborations.
- **Public Health Core Competencies:** As part of workforce development, all staff completed public health core competency self-assessments and the aggregate results were summarized using radar charts. We will be prioritizing areas of opportunity and designing workforce development training plans based on these priorities.
- **Workforce Development Planning:** Board members Chuck Neumann and Nanette Shackelford, staff members Janis Johnson and Michele Bever met with a team from UNMC College of Public Health (Dean Ali Khan, Dr. Brandon Grimm, Dr. Levy) and local education leaders (Dr. Marci Kemnitz, President CCC Grand Island Campus, Dr. Gary Johnson, Dean of Academic Affairs Hastings College, Dr. Amy Morris, Chair and Professor of Biology) to discuss opportunities for public health workforce development. Outcomes: we identified several opportunities for collaboration and information sharing on career pathways, internships and curriculum implementation. Janis and Michele also met w/ Dr. Paulette Woods-Ramsey, new CCC Dean of Health Sciences, and discussed shared workforce development interests.
- **New Board Member Orientation:** Provided training to new board member Matt Blum, including National Incident Management System (NIMS) training provided by J Morgan and public health orientation provided by M Bever.

9. **Evaluate and improve programs and interventions.**

(Are we doing any good? Are we doing things right? Are we doing the right things?)

- Provide examples of our evaluation activities related to evidence-based public health programs.
- Provide examples of QI projects that we have completed or are in process.

- **Choose Healthy Here initiative evaluation:** Continued with Gretchen Swanson Center for Nutrition (GSCN) and NeDHHS on evaluation of Choose Healthy Here materials in partner Grocery Stores. Received pilot study results and hope to improve values for the second year of implementation.
- **The Quality Improvement Team and the Accreditation Leadership Team (ALT):** QI Team meets the first week of the month and ALT meets as needed, with smaller document workgroups meeting Tuesdays and as needed. The QI procurement project is an ongoing evaluation using the QI tool, Plan-Do-Check-Act. We are also implementing a second project for supply tracking to increase the correct match of the inventory use to the corresponding grant. The Accreditation Leadership Team continues to work on alignment of documents to PHAB (Public Health Accreditation Board) standards and measures, uploading completed documents into our files. February 10 marked the half way point to our document submission deadline, August 10.
- **SHDHD staff participated in DHHS’s performance measure activities for 1422 grant Year 3.** The 2nd step was completed which is entering data into the Results-Based Accountability website. Staff worked with DHHS and the Social & Behavioral Sciences Research Consortium.
- **SHDHD Audit completed by McDermott & Miller - Denise reviewed vacation accrual procedure, reconciled some issues and established a process for internal control to ensure accuracy.**
- In order to improve staff communication, increase work plan progress, and improve budget monitoring, SHDHD staff established bi-weekly huddles for two major programs that each have multiple strategies and multiple staff contributing to the project (1422 Prevention Connection and Health Hub). In February, decided to begin holding weekly huddles for VetSET and at least monthly huddles for Immunization Clinic.
- **Immunization staff began a process improvement** for clinic work flow to improve efficiency and client experience. As a first step, staff are completing a process map (Swim Lane Method) to document the current process.

10. **Contribute to and apply the evidence base of public health.**

(We are 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:**
  - SHDHD is beginning to implement the year 3 work plan consisting of evidence-based strategies for prevention of cardiovascular disease and diabetes as part of the 4-year Chronic Disease Prevention project (Prevention Connection).
SHDHD is partnering with worksite wellness committees and using evidence-based practices for improving physical activity and cancer screening in worksites.

Tai Chi – Moving for Better Balance and Stepping On are evidence-based programs for fall prevention in older adults. In South Heartland, beginning and/or advanced classes Tai Chi classes are being offered in all 4 counties and Stepping On will be offered in Adams County to start until we find more instructors to train in other counties.

We are continuing to use a Reminder Recall process for immunization clinic clients to improve immunization rates.

Public Health Accreditation Board (PHAB) Standards and Measures are evidence based. SHDHD continues to become more aligned with these evidence based standards and measures as we progress through the accreditation process and apply them to our plans, policies and programs. This includes the review of current plans, and the development of other required plans, to align them with the PHAB standards and measures. Required documents must meet the PHAB guidelines for each measure.

Coordinated School Health Institutes: In partnership with Nebraska Department of Education, SHDHD is bringing in a third round of evidence-based Coordinated School Health Institutes to improve school wellness. The series of 4 institutes began in February and will end in May.

Research:

SHDHD executive director was interviewed as part of a research project at the UNMC College of Public Health focused on identifying ways that Nebraska local health departments are partnering with primary care clinics to improve community health.

Stories: How we made a difference…. 

In two letters written to Michele this January, Spanish speaking clients shared the following comments (translated from Spanish) about Lorena, South Heartland’s bilingual Community Health Worker:

“...thanks to her I am healthy today. Lorena’s dedication and love made me change my mind in regards to the colon cancer screening test, which in fact turned out to be positive. She is always concerned about every member of the community she serves.”

“She never says “no” when someone needs her, even if it’s after work hours. This is evidence that she really loves her job.”