Prescription Opioids can be addictive and dangerous. It only takes a little to lose a lot. Area Substance and Alcohol Abuse Prevention (ASAAP) hosted a briefing in December on the alarming rise in Opioid use, featuring speakers Dr. Kenneth Zoucha, Medical Services Director of Behavioral for Nebraska DHHS, and Dr. Max Owens, Pharm D, Pharmacy Manager for Walgreens of Hastings. Dr. Zoucha and Dr. Owens joined Director Bever for a second presentation on Opioid Addiction to an adult education class at First Presbyterian in February.

Health departments support evidence-based policy change: Raising the price of tobacco reduces prevalence of youth smoking.

Karen Fox and Avis Shaw, Tai Chi Instructors in Superior, teach class participants a move called “Part the Wild Horse Mane”. Tai Chi is an evidence-based program to reduce the risk of falls.

SHDHD Staff members recognize National Wear Red Day to raise awareness of heart health and prevention of cardiovascular disease.
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 on our website, on SHDHD’s Network of Care website, through news releases and interviews to various forms of media, and upon request from partners or others.
- SHDHD has completed a contract with NEHII (Nebraska Health Information Initiative), allowing surveillance staff to have access to medical information, allowing for easier access and completion of investigations required by the CDC.
- SHDHD initiated the planning stage for the 2018 Community Health Assessment (CHA) process. We will be following the MAPP (Mobilizing for Action through Planning and Partnerships) process again. Part-time staff member Susan Ferrone will be coordinating the process.
- During spring semester, school surveillance has provided valuable information to DHHS with 100% reporting from each school in 2018. Schools received reports from SHDHD of data for the health district and individual school data for fall semester during the month of January. Schools have been helpful partners to SHDHD surveillance sharing information about influenza, chicken pox and gastrointestinal illnesses circulating this year.
- Analyzed and prepared data summary fact sheets on youth behavioral health (depression, suicide) and youth substance use (prescription medication misuse) and shared with SHDHD staff, with policy-makers (Hastings/Adams County Combined Services) and with attendees at forum on Opioid Addiction.
- Planning initiated for SHARP (Student Health and Risk Prevention) Survey administration at schools in our health district in Fall 2018.
- A norovirus outbreak involving 27 residents and 8 staff members occurred in January. This outbreak was ongoing for over three weeks. Materials were provided for prevention of additional illness. SHDHD partnered with the director of nursing to insure cleaning and isolation measures were in place to prevent additional illness.
- Hospitals continue to report influenza activity. Flu activity remains “widespread” in Nebraska and across 48 states in the US as of Week 7 ending February 17th. The CDC reports “this influenza season is notable for the sheer volume of flu that most of the United States is seeing at the same time which can stress health systems. The vast majority of this activity has been caused by influenza A H3N2, associated with severe illness in young children and people 65 years and older.” Based on both school and hospital surveillance, local activity continues to be widespread in Adams County, predominantly influenza B. Nuckolls County reported high influenza activity among school aged children earlier this month. Clay and Webster schools have reported steady flu activity since the end of December, 2017. One outbreak in a long-term care facility was reported to SHDHD involving six individuals associated with a nursing home. No influenza related deaths have been identified in residents of the South Heartland health district.
2. Protect people from health problems and health hazards.
(Are we ready to respond to health problems or threats? How quickly do we find out about problems? How effective is our response?)

- What key activities did we complete in the past 2 months to prevent, minimize, and contain adverse health events and conditions resulting from communicable diseases; food-, water-, and vector-borne outbreaks; chronic diseases; environmental hazards; injuries; and health disparities?
- What activities did we complete for emergency preparedness (e.g., planning, exercises, and response activities)?

**Emergency Preparedness & Response:**
- Completed a [Capabilities Planning Guide](#) (CPG) for the district. It outlines how we are working to meet the Emergency Preparedness needs, the positives, and where we need to strengthen our work.
- SHDHD Public Health Risk Coordinator taught [NIMS 100 and 700](#) classes in Red Cloud to approximately 25 EMS and Webster County staff. He will be teaching both classes again in Blue Hill. This was a request by the Webster County Emergency Manager Ron Sunday.
- Participated in a state-wide Full Scale Exercise planning meeting in preparation for a state-wide FSE to be held in 2019 and state-wide Tabletop Exercise to be held in 2018. Approximately 80 attendees included health departments, hospitals, emergency management, EMS, law enforcement, Nebraska State Lab, and DHHS.
- SHDHD represented at Local Emergency Planning Committee (LEPC) meetings in both Clay County and Adams County with approximate 15 attendees at each meeting. The Adams county LEPC included a short TTX on release of a hazmat-related substance in East Hastings and the response that each agency would have to it.
- Public Health Risk Coordinator is teaching Loren Uden, Clay County Emergency Manager, how to use the [N-95 mask](#) fitting machine so he can fit test EMS personnel in Clay County for preparedness against respiratory-borne illnesses.
- Responded to request from City of Superior to assist in obtaining bottled water due to a potential city water emergency. SHDHD response was initiated, but the issue was resolved prior to actual movement of any resources. Good opportunity to practice notification and communication and to educate response partners on roles and resources.

**Environmental Response:**
- Nebraska DHHS Lead Program teamed up with our surveillance coordinator to conduct a [home lead investigation](#). We were successful in identifying several sources of lead in the home.

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 in January and February.
- Utilized [community sign boards](#) (located in Edgar, Nelson, Lawrence, Red Cloud, Bladen, Roseland, and Kenesaw) to get information out. Topics covered in January and February were Radon, Hand Hygiene, Blood Pressure, and Exercise.
- Received several calls on Radon testing and mitigation. Helped customer make decisions on additional testing or looking for mitigation possibilities.
- [News releases, public health columns, ads and interviews](#): Radon ad, Make radon testing one of your New Year’s Resolutions, Taking the pressure out of checking blood pressure, Scrubby Bear, Vital Signs Health Fair ad, Share your love: Take good care of your heart, South Heartland Diabetes Prevention Program Site Receives CDC Recognition, and Heart Month: Know your numbers.

**SHDHD Facebook:** In January, the number of people reached was 4,129. For February the number of people reached was 2,858, people in addition to the 3,079 reached through paid ads on Smart Moves- DPP (through 18th). The topics for Facebook and twitter in January were Radon, mental health/VetSET, cervical cancer screening/HPV vaccination and “Get your flu shot”. February’s topics included promotion of Self-Monitoring of Blood Pressure and YMCA program, Smart Moves upcoming class, Mental Health/Veterans Mental health, National Cancer Prevention Month, cancer screening guidelines and “Get your flu shot.”


- **Worksite Wellness**: SHDHD’s worksite wellness program is restructuring with meetings held only once a quarter. February’s lunch and learn for the Adams County wellness network was “Generation Wellness.” The group learned how to communicate and tailor their wellness goals to meet their different generations they have at the worksite. There were 6 worksites present.

- **Senior Center Presentations**: Radon information and testing instructions provided at Adams Co. Senior services to approximately 25 seniors. Some had already tested and many had great questions about radon.

- **Scruffy Bear**: SHDHD hosted 2 scruffy bear presentations to 2 different schools with about 100 PreK-3rd graders learning how to wash their hands the “Scrubby Bear” way.

- **Radon**: January is radon action month. During the month of January, press releases were sent out to over twenty media outlets including newspapers, radio and social media. A health column was also sent out to local newspapers. We completed two Sunrise 60 interviews with KHAS radio, partnering with a local resident, Susan Kotas, who had a mitigation system installed in her Hastings home and then a second time when she built a new home in Juniata. We provided information about radon testing at Adams Co. Senior services, Nuckolls and Webster County congregate meals. In order to increase kit sales, we posted over 25 radon awareness posters in various locations such as grocery stores, senior centers and community centers to promote testing. We are providing a forum to the public featuring Mark Versh, from DHHS, in March. We have provided information about this forum to individuals purchasing kits. We purchased radio ad sound bite time and send out two radon ads to be published in local papers in all four counties. Included over 20 posts about radon on SHDHD Facebook page.

- **Stepping On classes**: Stepping On classes started in Hastings at Adams County Senior Services on January 18th with twelve participants. The 7th session will be on March 1st followed by a 3-month booster session in June.

- **Tai Chi Classes**: Beginning Tai Chi classes are starting back up in the SHDHD district. The YMCA - Hastings has two new Tai Chi instructors that started classes. Nelson and Superior have started their classes and Hastings - Adams County Senior Services will be starting a Beginning Tai Chi class on March 6th. Watch for start dates and time for Clay Center, Fairfield and Red Cloud. For individuals who have taken Tai Chi in the past and want to continue, SHDHD has Advanced classes in Red Cloud, Superior, Nelson, Fairfield, and Hastings.

- **Smart Moves (Diabetes Prevention Program (DPP))**: 2017 Smart Moves - DPP classes have come to an end. In the Hastings class the group lost 178 pounds or 4.3% of the group’s overall body weight (the CDC’s program goal is 5% weight loss for the group). In Superior the class lost 298 pounds or 3.9% of the group’s overall body weight. Combined the Hastings and Superior classes had a 68% completion rate. Two new year-long classes started in January and February: in Superior there are 27 class participants, in Hastings there are two classes starting, one at Mary Lanning with 10 participants enrolled and one at SHDHD with 11 participants enrolled.

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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?*

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

- **Access to Health Care**:

- **Prevention Connection**: Progress continues between SHDHD and three district clinics (Webster County Clinic, Community Health Clinic/ Mary Lanning and Quality Clinic of Sutton) as they work towards benchmarks identified through the 1422 chronic disease prevention grant. Blood pressure management is being monitored through dashboards and through established hypertension protocols, patients with elevated and high blood pressure are being encouraged to practice self-monitoring and report findings back to the clinic. Clinic staff are entering blood pressures obtained outside of the clinic into the patient’s chart, whether the values are submitted via a patient portal, provided by the local pharmacy, or brought directly to the clinic.

- **Team-based care** activities, such as daily huddles, provide focused communication and coordination of efforts for complex patients. Clinic staff are able to discuss the patient’s needs and prepare for adequate support personnel, all in an effort to deliver safe and reliable patient care.

- **Obesity**:

  - **Nutrition Advisory Board (NAB)**: The NAB met in January with 5 in attendance, the group continues to share sessions that are occurring throughout the district as well as barriers to accessing healthy foods. The participants were able to collaborate and learn from each other. The YMCA shared their vending success story with the board.
- **Prevention Connection: Choose Healthy Here**: Increasing healthy food options in convenience and grocery stores - SHDHD continues to work in three Hispanic stores in Hastings implementing the *Choose Healthy Here* (CHH) program. The three stores have successfully implemented their action plan and are now in the maintenance phase of the program. SHDHD continues to work with Fill 'N Chill to implement their action plan. It has been a quiet two months of planning as the store prepares to stock healthier foods by March 1st and SHDHD and partners will have signage, promotion and taste testing occurring in March.

- **Prevention Connection: Superior’s follow up to their Walking Summit**: Superior Design team hosted a community planning meeting to help plan for the trails grant. The community meeting only had 6 attendees but the groups worked hard and came up with three different maps the community can vote on as they move forward writing their grant application.

- **Prevention Connection Healthy Vending Initiative**: SHDHD continues to work with partnered sites to improve vending. Central Community College of Hastings is waiting on the vendor to get their healthier options in stock to host their taste testing. Nebraska Aluminum Casting (NAC) had their first planning meeting with the Vendor in February. The vendor is committed to getting the healthier options in the vending machine by April. NAC will also be implementing a Healthy Snack Station, where SHDHD will help purchase their start up materials and then NAC will continue to stock the station with healthy items for employees to purchase at cost.

- **Prevention Connection: Healthy Hastings follow up on action summit**: Healthy Hastings continues to meet to fulfill the action plan. At the January meeting (9 in attendance) and February meeting (5 in attendance) committees reported progress and shared that the Complete Streets Advisory Council is working on a plan for a trail on the south side of Hastings, a plan for new development that includes sidewalks, and the committee continues to pursue the idea of a strategic plan design to ensure implementation. The group also continued to plan their Active Hastings week that will occur May 6-12th 2018.

- **Prevention Connection: Smart Moves, Diabetes Prevention Class (DPP)**: SHDHD continues to work with partners in implementing this evidence-based year-long program. SHDHD became a CDC-Recognized site for the National Diabetes Prevention Program! SHDHD has partnered with Mary Lanning (ML) to collaboratively offer classes in 2018. ML will be hosting a class over the noon hour and SHDHD will be hosting one in the evening.

- **SHDHD WoW (Worksite Wellness)**: New Year, new wellness goals! In January the staff participated in a gratitude challenge, where staff were asked to go above and beyond what they usually do to show gratitude to the people and community around them, 6 staff completed the challenge. In February, to celebrate Heart Health month, the staff were encouraged to move during the day and take “exercise” breaks two times a day. Staff did a great job at this challenge with 7 staff participating. There was also a “Laughter - it is good for you” presentation by Sue Brown, with 7 staff attending.

- **Prevention Connection**: Village Pharmacy in Red Cloud continues to work with Webster County Clinic and Main Street Clinic to receive Smart Moves referrals and communicate with providers about blood pressures that are recorded in the pharmacy. SHDHD is also reaching out to local worksites to help promote the Smart Moves program at Village Pharmacy. Torey Kranau, PharmD/MPH practicum student at SHDHD has also kicked off her community outreach project with 4 local pharmacies (Sutton, Superior, Red Cloud and Keith’s Pharmacy of Hastings). She has identified evidenced based research on community outreach programs to enhance patients’ blood pressure (BP) as well as ways pharmacies can refer to community based programs. The student will be going to Sutton, Superior and Red Cloud pharmacies once a week in March, meeting with hypertensive patients and giving them “tips” or lessons on how to better manage their BP. In Hastings the student will be working to increase the number of referrals from the pharmacy to the YMCA self-monitoring BP program.

- **Cancer Coalition**: South Heartland Cancer Coalition met in January and February. The group reviewed the CHIP strategies around the priority goal of cancer and also the CHIP dashboard looking at where we are now and where we’ve been over the past few years as we work together implementing community wide education and screening promotion events and activities. Brief summary of current projects include:
  - Colorectal cancer screening and education is promoted to SH residents age 50-75 during our March 2018 Colorectal Cancer Campaign. Free FOBT kits from the Nebraska Colon Cancer Screening Program will be available through our department and minority outreach (year round), at area health fairs, select pharmacies and clinics and through the Hastings Health Ministry during the campaign.
• Community focused sun safety education to all ages and screening for those 18 and older will be occurring at Vital Signs Health Fair in March with the Morrison Cancer Center coordinating local providers to offer limited skin assessments for free. MCC will be following up with clients needing referral. This project was selected by the Mary Lanning Cancer Committee as a priority to help meet the program’s accreditation goals. MCC will be working with Hastings area schools presenting skin cancer education and sun safety messages to middle school students this spring.

• The coalition partners plan to hold another event for women this fall focused on education and promotion of breast and cervical cancer screening and living a healthy lifestyle

  ▪ A new mini-grant to SHDHD for Human Papillomavirus (HPV) education presents an opportunity for the coalition to be involved with the planned presentations to the public with follow-up Q&A time with champion providers (English and Spanish). Presentations will be held at the Hastings Public Library with marketing to all counties.
    o **Mary Lanning Healthcare Cancer Committee**: Cancer Committee met in January with SH staff attending. Together as partners we collaborate on community cancer education and screening projects which helps ML meet their COC Accreditation requirements.
    o **Lung Cancer**: Radon detection kits continue to be available through SHDHD and satellite offices. SHDHD was awarded a 2018 Radon mini-grant to support activities ramping up for Radon Action month in January. Tobacco Quitline cards are being included with each FOBT colorectal cancer screening kit.
    o **Colon Cancer**: FOBT colon cancer screening kits are available to all district residents age 50-75 throughout the year. Refer to Cancer Coalition for March 2018 Colorectal Cancer Campaign activities.
    o **Cervical Cancer**: Human Papillomavirus (HPV) vaccine educational materials are shared at monthly VFC clinics. Community Health Workers continue to work with clients to access health care and Every Woman Matters resources. Clients are navigated to screening and diagnostics or treatment when needed.
    o **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 (3 in Jan/Feb). Those not meeting requirements are connected with the clinics offering assistance. Despite assistance from Mary Lanning’s clinic for clinical and mammogram services, the radiology fee of approx. $200 is a barrier preventing many women from moving forward with screening. In January/February staff made 12 navigation contacts with women for breast and cervical cancer screenings and diagnostic services.
    o **Prostate Cancer**: ACS booklets “Testing For Prostate Cancer” will be available at all area health fairs.
    o **Skin Cancer**: See Cancer Coalition

**Substance Abuse**: SHDHD staff contributed to a panel presentation on Opioid Addiction for First Presbyterian adult education class in Hastings. Presenters were Ken Zoucha, MD, and Max Owens, PharmD, and Dr. Bever. Community forums to educate and raise awareness help meet our Community Health Improvement Plan priority strategies for substance abuse prevention. Due to strong interest in this topic, additional public presentations on Opioids are being planned (Next: April 13, League of Women Voters-Hastings featuring presenters Max Owens, Senator John Kuehn, and Dr. Bever.)

**Mental Health**: 
**VetSET/Making Connections**: SHDHD is currently doing at least 2 monthly media posts on Facebook and Twitter for Veterans, service members, and their families. Amy & Liz attended a Suicide Prevention training by MSG Kelli Hatzenbuehler - Army Nation Guard R3SP on January 29th, centered on Service Members, Veterans, and their Family members.

**Other Collaborations (1422)**: Hastings YMCA continues to implement their Blood Pressure (BP) Management program. SHDHD continues working with clinic partners at Hastings Family Care and Community Health Center in establishing clinic protocols for hypertension that include promotion of self-monitoring of blood pressure (SMBP). A meeting was held with lead clinic providers, Dr. Frey and Michelle Batterman, PA, to discuss the YMCA’s evidence-based SMBP program and the referral process available through their electronic health record system - EPIC.

Met with a nursing student from Creighton to explain SHDHD expectations and requests for assistance from nurses if a disaster or pandemic should occur. Explained nursing roles and who we use as volunteers.

**Public Health Risk Coordinator** met with Karen Klein regarding Emergency Preparedness for churches. Talked about preparedness, mental health response, and responding to disasters.

**Other Collaborations (Vital Signs Health Fair Board)**: 2 staff represent SHDHD on the VSHF board. Board meets monthly planning activities for this annual event. SHDHD and SH Cancer Coalition will provide 7 booths at the
fair in March and are working to recruit volunteers for the event. Connections have been made with the Creighton School of Nursing Program and 16 students will be helping at the fair for community outreach. Staff worked on an ad for the 2018 VSHF directory promoting public health and contributed a skin cancer/sun safety educational article to be included.

- **Other Collaborations (Hastings Health Ministry):** Community Health Services Coordinator/Public Health Nurse attends monthly meetings of the Hastings Health Ministry reporting on lifestyle change programs and other opportunities through the department.

### 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:**
  - Subawards and contracts executed:
    - Mental Health First Aid & Suicide Prevention (NALHD) $3,987.64
    - Lead Poisoning Surveillance and Prevention (DHHS) $6,200
    - SHDHD HPV Awareness (Nebraska Comprehensive Cancer Control Program) $10,000
    - Making Connections Year 2 (MC-2) (NALHD) $13,500

- **Performance Management System framework, PMS:** Implementation continues with Community Health Improvement Plan (CHIP) dashboard of progress, CHIP report and evaluating partner collaboration and data.

- **Prevention connection: Blood Pressure Management:** with partner consultant Praesidio, SHDHD continues to work with 3 clinics to implement a blood pressure protocol (policy) within their clinic workflow to flag patients that may be hypertensive, not well managed, or pre-hypertensive, and to promote systems changes to improve prevention and management of hypertension.

- **Workforce Development Plan:** continuing to work on core competencies (job descriptions), succession planning/knowledge transfer, implementation/tracking of work plan activities for 2017-18, including a staff exercise to identify types of data available in their program areas (using the Line of Sight diagram). Orientation resources, checklists and files are being implemented.

- **Policies-Plans-Resources:** Implementation continues for hard copies, updating electronic files, implementing tracking and completing the annual plans review calendar.

- **SHDHD, Two Rivers, Loup Basin, and Central District health departments worked together to complete the CPG (Capabilities Planning Guide) and MYTEP (Multi-year Training and Exercise Plan) for the state.** Doing so as a team assures us that we don’t miss something that we might miss if we did it ourselves. We are now revising the Special Needs Plan due to sub-award requirements for the 2017-2018 contract year requiring health departments to explain how we determine special needs populations, how we will help them prepare for emergencies and how we will assist them during emergencies.

- **Reviewed legislative bills at Nebraska Association of County Officials (NACO) Legislative Bill Review Day.**

- **Shared information with policymakers and public on legislation to increase Tobacco Tax to reduce youth smoking.**

- **Board of Health Position Statement Policy** approved by SHDHD Board Policy Committee. Board Vice President Dr. Phyllis Salyards met with the Executive Director in a work session to discuss first position paper on e-cigarettes (as an update to a 2014 Board Resolution on e-cigarettes). Also reviewed reports on medical marijuana as another area where the BOH may develop a position statement.

### 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 receives **[food recall alerts](#)** from the Nebraska Department of Agriculture. We also maintain a link on our website to the FDA Food Safety webpage.

**Education on radon-resistant new construction** (Appendix F of International Building Code) as part of Radon Awareness Month.

### 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 66 vaccines to 32 patients at two monthly clinics. Of those 32 patients, 19 (59%) had no insurance, 7 (22%) had Medicaid, 6 (19%) were underinsured and 0 were American Indian. 6 of the 32 patients (19%) were new to the clinic. Total donation collected from clients for January/February = $108.00 (avg. $1.57 per immunization or $3.25 per patient).

We continue to implement **strategies to help increase complete immunization rates** of 2 year olds and HPV rates of 11-18 year olds. NE DHHS Immunization runs AFIX (Assessment, Feedback, Incentives & eXchange) reports for our immunization program twice a year. First report comes anywhere between February and June and will allow us to set new goals for priority areas.

**SHDHD uses quarterly reminder/recall,** an **Evidence-Based Strategy for improving vaccination rates.** Reminder/recall letters and phone contact were made for 0-2 year olds and 11-14 year olds this quarter. Lack of confidence in the number needing reminder or recall on the report generated through NESIIS led us to work with the state NESIIS program staff to resolve. In person support and additional training from state staff is our next step.

In January/February the **Adult Immunization Program** delivered Tdap to 9 uninsured, 0 underinsured adults age 19 and over. All 9 adults were new patients.

**Vouchers for free flu vaccine** through Walgreens are no longer available. **Uninsured clients are now being referred** to Central District Health Department in Grand Island for federally-funded vaccine or to Clay County Health Department for reduced cost vaccine.

Staff have been working with 3 **Hastings College** student volunteers and the campus nurse on efforts to improve flu vaccination in students and staff. A contest between residence halls, with free t-shirts as the prize, was held in November/December. Students/staff were surveyed the end of January. Team reconvenes to review survey data in March.

**Community Health Worker (Bilingual):**

**Every Woman Matters (EWM)/Encounter Registry:**

- Health coaching for 34 total clients (Spanish speaking) - 24/34 are also participating in the self-monitor blood pressure program (SMBP), and 21/34 follow up telephone calls were made, with 7 of those calls being their 3rd and final call.
- 10 adult clients were assisted in office, 38 adult referrals to other organizations/providers.
- 8 FOBT colorectal cancer screening kits distributed.
- Self-monitor blood pressure program, SMBP: 10 enrolled, 83 blood pressures taken in office.

**Immunization:** 14 adult and 8 child referrals.

**Inspirado Diabetes Management Project (Minority Health, with Mary Lanning):** Interpretation for 4 adult participants at vision exams in January.

**Community Health Worker (English Only):**

**Every Woman Matters and Health Coaching:** January: 1/2 received 1st health coaching session and the other one, 4 attempts were made and marked to send letter. 1/1 received 2nd health coaching session. 3/5 received 3rd health coaching session and completed their EWM Follow-up Survey. Signed up 2 EWM clients: 1 for the YMCA Self-Monitored Blood Pressure program, SMBP, and 1 for Smart Moves in Red Cloud (will continue to health coach, HC, these 2 clients until the program they signed up for is completed). February: 1/1 received 1st health coaching session, 1 client unable to connect because phone was not in service for 2nd health coaching session. 1/3 received 3rd health coaching session and completed their EWM follow-up Survey, the other two are signed up for YMCA SMBP or DPP Smart Moves and will continue to health coach them until program is complete. Currently doing 4 health coaching for SMBP and have 6 health coaching clients signed up for Smart Moves in Hastings, 1 in Red Cloud, and 19 in Superior.
8. Maintain a competent public health and personal health care workforce.  
*(Do we have a competent public health staff? How can we be sure that our staff stays current?)*

- Describe our efforts to evaluate LHD staff members’ public health competencies. How have we addressed these deficiencies?
- Describe the strategies we have used to develop, train, and retain a diverse staff.
- Provide examples of training experiences that were provided for staff.
- Describe the activities that we have completed to establish a workforce development plan.

- **Performance management, Results Based Accountability:** RBA continues to be implemented weekly in performance measures of programs and services (quantitative, qualitative and outcomes). This informs staff of all program activities, successes, needs, and alignment with the Essential Services and PHAB domains.

- **The Workforce Development Plan:** Implementation of the work plan continues and most objectives are close to their target dates. Submission of PHAB reopen documents (September-October) delayed timely completion of some of the objectives.

- **CLAS and Literacy Improvement and Innovation Project (Title V):** J. Johnson is participating in this state project (monthly meetings) and providing input for the local health department perspective. Project to be completed in December, 2018.

- **Collaborations to Enhance Medicaid/Medicare Reimbursement:** SHDHD staff members J. Korth, B. Wolfe, and M. Bever, along with partners Tara Higby, Manager Quality Healthcare Clinic, Sutton; Jodi Shuck, Manager Hastings Internal Medicine; Dave Long, Vice President of Ambulatory Care, Mary Lanning Healthcare; and Jodi Mohr, Director of Primary Care Clinics, Mary Lanning Healthcare, attended a workshop sponsored by the Nebraska Association of Local Health Directors featuring national healthcare consultant Tim O’Neill discussing models for partnerships to capitalize on Medicaid/Medicare Reimbursements for community-based public health services.

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, as well as Brodstone Hospital’s cafeteria improvements.

- **Scrubby Bear:** Hastings College student intern Grace Belton’s January Term project was to update and improve SHDHD’s Scrubby Bear program. She improved the book appearance and size, the singalong song, as well as the evaluations. SHDHD now has the teachers fill out the initial evaluation of the presentation and then a follow-up survey to determine if there was any student knowledge gained and retained. The intern analyzed program data from the past 2 years and shared the results with staff. Staff noted areas of the district where the Scrubby Bear program has not been requested and will adjust marketing accordingly next year.

- **The Quality Improvement – Performance Management Team:** Continues to meet 1-2 times per month and has focused on succession planning/knowledge transfer documentation, organizational culture, 2018 QI projects HD training, and beginning plans for the 2018-19 Community Health Needs Assessment and Improvement Plan.

- **Community Health Improvement Plan (CHIP):** priority areas have been reviewed and data uploaded to our scorecard. Discussions and meetings with partners for obtaining partner input and information/stories that support the data are in progress to complete an annual CHIP report. A simpler community health improvement tracking chart was developed for the 2017 Annual Report.

10. Contribute to and apply the evidence base of public health.  
*(Are we discovering and using new ways to get the job done?)*

- Provide examples of evidence-based programs our department is implementing.
- Describe how we have collaborated with researchers to conduct any research studies (e.g., completed surveys, interviews, or focus groups).

- **Evidence Based:**
As part of the Chronic Disease Prevention project (Prevention Connection), SHDHD is in the final year (4 year work plan) of evidence-based strategies for prevention of cardiovascular disease and diabetes.

SHDHD is partnering with worksite wellness committees and using evidence-based practices for improving physical activity and nutrition in worksites.

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 fall prevention in older adults who have a fear of falling or that have fallen. In the South Heartland District, beginning and/or advanced Tai Chi classes are offered in all 4 counties. Tai Chi classes are set up to meet twice a week for 12 weeks for 1 hour. Stepping On class began on January 18, 2018 at Adams County Senior Services in Hastings. Stepping On classes meet once a week for seven weeks for 1 ½ to 2 hours and then a booster session in 3 months.

We are continuing to use the evidence-based Reminder Recall process for immunization clinic clients to improve immunization rates.

Public Health Accreditation Board (PHAB) Standards and Measures: Completion of accreditation will align SHDHD with these evidence-based measures, improving quality and performance. Site visitors are reviewing SHDHD submitted documentation and the site visit is April 18-19. Site visitors will send any questions about our documents the end of February and an agenda for the site visit early March.

Research:

Stories: How we made a difference....

Community Support for Health Care Access

One area of focus in the 1422 Chronic Disease Prevention Grant is the use of electronic health records, including the patient portal system. In working with Webster County Clinic, it became apparent that an electronic tablet at the clinic would greatly assist them in the on-site enrollment and education of patients on portal use and its value in communicating with the clinic.

SHDHD was able to connect with Great Plains Communications, the internet provider for the Red Cloud area, with a special request for the provision of a tablet. Laura Kocher, Director of Marketing and Public Relations at Great Plains, arranged for the purchase of a new Kindle Fire for the clinic. In sharing the news of the purchase, she wrote “I always find that if someone can sit down and show me something, step by step, it is always beneficial”.

A special thanks from SHDHD to Laura and Great Plains Communications for making a difference.

Submitted by Jean Korth, Chronic Disease Prevention Program Assistant
Healthy Vending Initiative

Hastings YMCA Success:

#1. **Foot Traffic:** The Hastings YMCA had a successful vending initiative because there are so many kids here day in and day out.

#2. **Taste Testing:** We have done taste testing on our food and drinks, and especially the carbonated waters were a big hit. The kids thought that it tasted just like pop.

#3. **Resilience:** To make the change it required some effort on the YMCA part. I checked on each drink that Pepsi carried to see if it qualified for the healthy vending, had several meetings, and emails to get what we wanted. So far the healthy drinks have been a huge hit, and hope to be adding more options in the future.

#4. **Largest impact:** I thought that the taste testing helped out a lot. Even when I tried some of the drinks myself, I was shocked on how good they were!

- Prepared by Hastings YMCA staff to highlight their Healthy Vending project which is supported by SHDHD’s Chronic Disease Prevention Grant.
- Submitted by Brooke Wolfe, SHDHD Chronic Disease Prevention & Health Promotion Coordinator