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.

- **Norovirus Outbreak**: SHDHD was notified of, and investigated, a possible foodborne outbreak in mid-June. A restaurant patron sought care at an area Hospital for gastrointestinal illness the previous day and continued to feel ill at the time of his report. South Heartland ultimately gathered information for 42 individuals associated with the outbreak. Onset for this illness was approximately 25 hours after food consumption based on reported information. The overall illness attack rate for patrons was 21%.

- **Lead Investigations**: Nebraska DHHS recently launched a campaign with the assistance of all local health departments. This campaign involves social media messages as well as billboards (on Hwy 281 by Earl May) and additional training for case managers. We posted on Social Media (Facebook) to provide parents information and resources. Five new lead investigations were opened during this reporting period.

- **Mosquito surveillance**: Trapping for West Nile virus (WNV) testing started at the first week of June with 217 trapped in Adams Co., and 120 trapped in Webster Co. during week 3. Packets were sent to all veterinarians in our health district with information to promote equine WNV vaccination.

**National**
- **Measles Outbreak**: According to most recent update on June 20th, 1077 cases of measles have been confirmed in the US this year. The states that have reported cases to CDC are Arizona, California, Colorado, Connecticut, Florida, Georgia, Idaho, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Michigan, Missouri, New Mexico, Nevada, New Hampshire, New Jersey, New York, Oklahoma, Oregon, Pennsylvania, Texas, Tennessee, Virginia, and Washington. The following states have ongoing outbreaks: California, New York, Pennsylvania, & Washington.
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)?
     - **Radon**: South Heartland hosted a radon lunch event on May 14th at noon featuring Jim Morgan, Licensed Radon Measurement Specialist, SHDHD, Mark Montague, C&A Home Inspections, Ryan Meyer, Licensed Radon Mitigation, All American Radon, Mark Evans, Building Inspector, City of Hastings. All local realtors were invited to this event. The objective of this event was to provide resources to realtors in order to empower them as they communicate with their clients during real estate transactions. Additionally, this meeting allowed for us to gain a better understanding of how we can best help realtors have the contacts and information to improve the mitigation process as homeowners discover elevated radon. Each presenter had 5-10 minutes to share information about radon laws, mitigation information and health outcomes with a question and answer period at the end. South Heartland conducted a before and after survey to understand the quality of our meeting and how we may offer information to the public in the future. We also provided lunch and radon kits to all attendees. The final radon grant report was completed and submitted to DHHS in June.

3. Give people information they need to make healthy choices.
   (How well do we keep all people and segments of our district informed about health issues?)
   - Provide examples of key information related to physical, behavioral, environmental, social, economic, and other issues affecting health that we provided to the public.
   - Provide examples of health promotion programs that we implemented to address identified health problems.
     - **Satellite offices**: Staff covered monthly hours in Superior and Guide Rock in May and June. Topics included were Emergency Preparedness, West Nile Virus, and disease outbreaks in Public Health.
     - **Community sign boards**: were utilized to get information out (located in Edgar, Nelson, Lawrence, Red Cloud, Bladen, Roseland, and Kanesaw). May topics were physical activity and mental health. June topics were Access to care and health literacy.
     - **Radon testing and mitigation**: We continue to sell radon kits even though the summer months generally sees less kits being sold.
     - **SHDHD conducted Radon training class for realtors**: Presenters were SHDHD, Ryan Meyer, mitigator, Mark from C&A Home inspections, and Mark Evans, Hastings Building Inspector. The presentation time was smaller than expected with more time taken to answer realtor’s questions.
     - **Sun Safety**: SHDHD staff presented to 42 Webster and Nuckolls County youth about sun safe habit during UNL Extension’s youth outdoors training. SHDHD also presented 45 Hastings Aqua Court Lifeguard employees. Through evaluation, 100% of attendees increased their sun safety knowledge.
     - **News releases, public health columns, ads and interviews**: Topics covered in May and June included Mental Health, Physical Activity, Health Literacy, Fireworks Safety and West Nile. News releases that were published included Mental Health, West Nile Virus/Mosquito Prevention, and Health Literacy. Public Health columns and articles that were published: Ads for the VetSET Family Fun Day as well as ads offering assistance to those in our district who have been affected by flooding; benefits of physical activity on mental health, promoting safe behaviors for teens during prom/graduation season, health literacy, cervical cancer prevention, and West Nile prevention. Radio interviews on KHAS: benefits of physical activity on mental health and health literacy. SHDHD also promoted the VetSET Family Fun Day through a TV interview on KSNB.
     - **SHDHD Facebook**: In May, the number of people reached was 1,631. For June, the number of people reached was 2,177. The topics for Facebook and twitter in Mental Health, Physical Activity for May and Health Literacy and West Nile, HPV Cancer Awareness, Military Awareness, Pool Safety and Military Family Fun Day promotion for June.
     - **Mary Lanning Mental Health Awareness Dinner**: South Heartland provided information to all attendees about our CHIP priorities over the next five years and about the importance of mental health to our overall health. Sheri Dawson was the keynote speaker. Information at our booth was directed towards assisting US Veterans with mental health needs and other resources available to them. Five new veteran contacts were obtained and approximately 100 individuals stopped at our booth.
Tai Chi Moving for Better Balance & Stepping On Classes: Beginning Tai Chi classes ended at the YMCA in May and at the Golden Friendship Center in June. Red Cloud started a Tai Chi class for beginners the end of May and beginning Tai Chi classes will start up the end of August or first part of September in Hastings, Superior and Nelson. 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 12-week class. Stepping On started it first class for the year with 19 participants. Stepping On meets once a week for seven weeks for 1 ½ hours with guest experts talking about fall related topics. A pilot with two Mary Lanning Clinics (Community Health Center and Hastings Family Care) was started to promote and refer clients that have fallen or at risk for falling.

Smart Moves (Diabetes Prevention Program (DPP)): Brodstone, SHDHD (at Head Start) and ESU9 have completed five months of classes, and Mary Lanning has completed four. Village Pharmacy (Red Cloud) is still planning to start a class in 2019, date TBD. SHDHD submits monthly data reports for Brodstone, SHDHD’s Head Start and Village Pharmacy every six months to the CDC. 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.

YMCA’s SMBP Program: The YMCA has expanded the program to Brodstone Hospital while continuing to be heavily involved with ML’s Community Health Center and Hastings Family Care.

Opportunity House (South Central Behavioral Services day rehabilitation site): SHDHD provided physical activity presentation in May.

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. Libraries have been provided with a holder containing material on the Diabetes Prevention program, Smart Moves, Every Woman Matters program, sun safety and physical activity. SHDHD staff members will visit the libraries periodically to monitor the holders and change out the materials.

Reaching our Hispanic/Latino residents: We are re-connecting with Spanish media (Telemundo, an Omaha based television station and Buenas Dias Nebraska, Grand Island-based Spanish newspaper) and are testing an internal process for translating our English news releases and disseminating them to these media. We requested the newspapers be delivered to the SHDHD Hastings office. We are expanding our Facebook presence to include a page in Spanish that will be maintained by SHDHD’s bilingual community health workers.

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?

CHIP implementation: Identified, invited and confirmed chair and vice chair positions for the five steering committees that will lead implementation of the 5 priorities in the new Community Health Improvement Plan: Access to Care, Mental Health, Substance Misuse, Obesity & Related Health Conditions, and Cancer. Additional committee members self-selected during the CHA/CHIP process. Steering Committees will meet 2x per year to review progress data and make recommendations for quality improvement in strategy implementation.

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 application process involved two key supporting/collaborating partners: Mary Lanning Health Care and SHDHD. Notice of Awards were expected out in June, but have not yet been announced.

Obesity:
- Nutrition Advisory Board (NAB): The Nutrition Advisory Board is now meeting quarterly- there were no meetings in May or June.
- Prevention Connection, Superior’s follow up to their Walking Summit: Superior Design team continues to work towards the capacity to apply for funding to support a trail in their park. They have transformed an old lot into a “pop up park” with nice seating and more green space.
- Prevention Connection: Healthy Hastings follow up on action summit: Healthy Hastings continues to meet to fulfill their action plan. The team met in May to discuss the action plan items and progress the City of Hastings has made on the trail expansion process, as well as plans for Active Hastings Week and Downtown Farmers Market. As part of Active Hastings Week, SHDHD served a station along the trail for Bicycle Sunday Fun Day, May 5th. Forty-three kids and thirty-two adults gathered information or took a spin
through the obstacle course. SHDHD also participated in providing the City of Hastings feedback on how mobile different parts of the city were as part of their mobility study.

- **Prevention Connection: Sutton action summit**: SHDHD has brought on a new community for 2019 walkability efforts. The Sutton “design team” or core planning team met twice in May/June to begin the planning of the Summit. The group consist of 9 community members, all of which play a different role in the community.

- **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 three worksites - ESU 9 in Hastings, Head Start and Adams County Court House.

- **SHDHD WoW (Worksite Wellness)**: During the month of May, staff were encouraged to complete the walking challenge (5 staff completed) to get up and moving. In June, staff were invited to participate in a mental health-gratitude challenge. Staff were encouraged to identify two things each week they were grateful for and do one kind task for another staff member.

- **Whole Schools, Whole Community, Whole Child (WSCC)**: SHDHD has been actively connecting with schools about wellness activities, attending Hastings Public District and Harvard Wellness Team meetings, completing with schools the School Health Index assessment and implementing action plans. SHDHD worked with schools on gathering baseline student surveys, which collected information about their student’s physical activity and nutrition habits, this wrapped up their activities for the 1st year of the project. In addition, these two months were full of staff development for the schools. SHDHD and HPS staff attended the mental health awareness conference in Kearney. Nursing staff from both schools attended the annual Ne School Nursing Conference. Harvard and Blue Hill staff attended a CATCH kids training put on by Neb. Dept. of Education (NDE). Lastly Harvard, staff were trained on physical activity in the classroom and the PE department alongside NDE staff developed PE curriculum that met all state standards.

### Cancer

- **Cancer Coalition**: South Heartland Cancer Coalition met in June, with skin cancer and colon cancer projects and case management updates provided. The group discussed using consistent messaging to answer questions from the public given the recent information about sunscreen absorption and the FDAs proposal for change in sunscreen rules. The recommendation is to continue with sunscreen use and at a minimum use a sunscreen formulation containing titanium dioxide and zinc oxide which are “generally regarded as safe and effective” (GRASE) plus advising sun safe practices: wearing protective clothing, hats, sunglasses and seeking shade. Tamara Robinson with the Nebraska Cancer Coalition (NC2) will be discussing this with board member Dr. Watts, dermatologist, for perspective from dermatology and perhaps NC2 can put out a statement for Nebraskans.

- **Mary Lanning Healthcare Cancer Committee**: ML Cancer Committee will meet again in August. This group helps guide and oversee the activities of the ML cancer program. As ad hoc members of this group, we work with the program to collaborate on community cancer education and screening projects (which helps ML meet their COC Accreditation requirements and helps both ML and SHDHD meet community health improvement goals).

- **Lung Cancer**: Radon detection kits remain available at SHDHD, satellite offices and UNL Extension. The April SH Cancer Coalition meeting, included discussion about lung cancer screening and the need for more education about it. Sally Molnar, director of the Morrison Cancer Center, suggested having pulmonology present at the August ML Cancer Committee meeting.

- **Colon Cancer**: 289 FOBT screening kits were distributed free of charge to men and women age 50-74 who have not had any screening in the past year. Partners in Sutton, Clay Center, Blue Hill, Red Cloud, Superior and Hastings, as well as community and worksite health fairs, contributed to this effort. Of the 289 kits distributed, 161 or 56% have been completed and sent to the lab. In an effort to improve return rates, 2 reminders have been delivered first by letter and second by call or text. Our public health nurse has provided case management to the 2 clients with positive results. As a result of follow-up with colonoscopy, one client has been diagnosed with colon cancer and has received follow-up care.

- **Cervical Cancer**: Human Papillomavirus (HPV) vaccine educational materials are displayed and shared at monthly VFC clinics. 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.

- **HPV Cancer Prevention**: HPV banners in English and Spanish are on display at the Community Health Center. We also posted Facebook messages promoting HPV vaccination as a cancer prevention action.
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:
  - 2019 Health Hub / Every Woman Matters Funding (DHHS): Received an amendment on the 2018-2019 Health Hub subaward for additional funding of $32,952 through June 2020.
  - Health Hub Collaborative Impact Project (DHHS): Approved up to $4,993 to support collaboration between SHDHD, Hastings Imaging Center, and Hastings Radiology Associates to reduce barriers to completing breast cancer screening in low income women who do not qualify for Every Woman Matters program.
  - Title V CLAS and Literacy Innovation Project (DHHS): Awarded $5000 to complete SH’s proposed innovation project. The 6-month project was supposed to begin in April, but subaward executed on 05.16.19 with a May 1 start date.
  - HRSA Behavior Health Planning Grant (Health Resources and Services Administration, direct federal award): SHDHD received notice of award on June 29 that the proposal we submitted for $100,000, 1-year rural health network planning grant. Project period 07.01.19 – 06.30.20. The work plan includes creating a behavioral healthcare network, completing a behavioral health assessment and developing a plan to address identified needs including workforce training. This project helps us implement one strategy in the Mental Health priority of the Community Health Improvement Plan.
  - Maternal Child Health Childhood Obesity Proposal (DHHS): SHDHD submitted a project proposal in response to a request for proposals from NE DHHS Maternal and Child Health. Our proposal for $64,906 addresses childhood obesity, is focused on physical activity and nutrition for youth and would implement several strategies in the Obesity priority of the Community Health Improvement Plan. There will be a second application phase if our proposal makes the first cut. If awarded, the project period is slated to start August 1, 2019, and will require a 20% local match.
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.
- Tracked NE legislature activities using SHDHD’s legislative review process.
- Foodborne outbreak/Regulated entity. SHDHD notified our regional food sanitizer from Nebraska Department of Agriculture (NDA) regarding a foodborne outbreak associated with a restaurant. We coordinated our investigations because the NDA has the authority for restaurant inspections and is the enforcing entity on food safety and consumer protection activities for regulated entities, such as restaurants.

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 May/June, clinic staff delivered 68 vaccines to 29 patients at two monthly clinics. Of those 29 patients, 16 (55%) had no insurance, 6 (21%) had Medicaid, 7 (24%) were underinsured. 4 of the 29 patients (14%) were new to the clinic. Total donation collected from clients for May/June = $277.00 (avg. $4.07 per immunization or $9.64 per patient).
- Immunization: Adult Immunization Program: In May/June clinic staff delivered Tdap to 7 adults (age 19 and over). All 7 adults were new to the clinic. 6 were uninsured and 1 was underinsured.
Reminder/Recall to improve vaccination rates: In May, our quarterly reminder/recall activities were directed toward 2-3 year olds completing all vaccinations, and 12-17 year old completing the HPV vaccination series. Of the 51 active clients on the list, 33 (65%) were not up to date and received a reminder via letter or phone call.

Hastings College (HC) Influenza education and vaccine promotion: Intern applications have been reviewed and phone interviews are being schedule with 3 HC students interested in volunteer work for this project.

Community Health Worker (Bilingual):
- Engaged 3 new clients, 7 referrals to other organizations/providers, 1 client enrolled in EWM
- Working with 7 uninsured Spanish speaking women to complete mammogram (Collaborative Impact Project)
- Assisting with BPSM, blood pressure self-monitoring program
- Began Health Coaching 4 clients (Spanish speaking)

Community Health Worker (English Only) / Every Woman Matters (EWM) and Health Coaching: May/June: continue to do SMBP checks on four participants: one participant finished the 6th, 7th, & 8th in office hours blood pressure check, the 3rd & 4th nutrition program and completed survey. Two participant completed 5th, 6th, 7th & 8th office hours and 3rd & 4th Nutrition program and completed survey, and one participant completed 1st & 2nd, office hours and 1st Nutrition program. Two new participants completed 1st office hours. Health Coaching EWM clients started June 12th, was able to complete 1st Health Coaching call with 12/15 participants and connected 9 participants to Blood Pressure program and 3 participants to regular health coaching. Unable to connect with 3/15 participants – Left messages.

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 is completing the NACCHO Self-Assessment Tool and the training, “A Practitioner’s Performance Management Primer Training” (Michigan’s Embracing Quality in Public Health). The leadership survey will be analyzed and the staff survey completed to identify needed training.

The Workforce Development Plan: The QI-PM Team continuing to implement succession planning/knowledge transfer development and cross training opportunities for critical positions. Six job description revisions are completed to include core competencies. Staff evaluations are identifying training opportunities for individual development including the Career Development Planning tool developed to fit SHDHD’s needs.

CLAS and Literacy Improvement and Innovation Project (Title V): The CLAS and Literacy Innovations Project continues through 2019 and includes statewide and cross-sector partners sharing a common interest in advancing equity in the Nebraska population. The project will continue in 2020. SHDHD is one of four selected to complete an innovative CLAS project.

Nebraska Schools Mental Health Conference: SHDHD participated in NE School Mental Health Conference and learned how mental health needs are being addressed across the state. Staff gained the knowledge of local collaboration possibilities, evidence based practices and the value schools play in reduce/addressing mental health needs.


Community Health Worker (CHW) Training: Liz Chamberlain finished Community Health Worker training through the Utah Department of Health in June, completing the last two topics: Providing Social Supports and Substance Abuse. Odeth Mendez Peraza completed Civity Training with Rural Affairs, First Aid/CPR/AED, Motivational Interviewing, Mental Health First Aid, QPR, and Health Coaching trainings. She shadowed Caleb with the YMCA’s BPSM Program for additional experience.

NESIIS – Nebraska State Immunization Information System: Two SHDHD staff have been trained as new users in NESIIS by Immunization Clinic coordinator. Trained staff are assisting with clinic day activities and data entry.

CHW Regional Meeting: SHDHD will host the second regional CHW meeting on July 22nd from 5:30 – 7:30 pm to meet w/ other CHW, talk about work and experience, encouragement and respect for work and contributions.
2019 Immunize NE Conference: Janis Johnson and Dorrann Hultman attended the 2019 Immunize NE Conference remotely. This conference serves as the continuing education required by the NE Immunization Program.

Nebraska Cancer Summit: Dorrann Hultman and SH Cancer Coalition members Sally Molnar, director of the Morrison Cancer Center (MCC) and Donna Addleman, nurse navigator for the MCC, attended the Nebraska Cancer Coalition’s Cancer Summit.

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 projects: Projects to be completed include retention and document standardization. The QI plan will be revised with SMART goals to for the entire development & to crosswalk with the strategic planning on July 22.

Results Based Accountability, RBA: Staff continue to complete this spreadsheet to provide program updates at weekly staff meetings. This makes the process more efficient and focuses us on questions how much/how many, how well did we do, what difference did we make and how our work applies to the 10 Essential Services.

SHDHD Performance Management Dashboard: Staff identified 22 health department measures to include for HD performance management. Most measures are currently in use in staff programmatic areas. Data for these measures will be used to monitor HD successes, needs for revision or change, and used for departmental decision making.

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:
- 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 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 classes meet once a week for seven weeks for 1½ to 2 hours and then a booster session in 3 months; classes will be offered in Hastings the first part of August 2019.
- 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. The SHDHD Action Plan completion is in progress, due December 3, 2019 by 12 midnight.

MCH

Research/Contributing to the Evidence Base of Public Health:
- Public Health / Primary Care Linkages Study: SHDHD is participating in an environmental scan related to the integration of public health and health care conducted by the UNMC College of Public Health and the DHHS Office of Community Health and Performance Management. The first step is a survey of all Nebraska local health departments and the second stage is interviews with selected health directors, and Dr. Bever will be included in this stage.
- National Association of County and City Health Officials (NACCHO) National Profile Study: SHDHD completed a survey for the 2019 National Profile of Local Health Departments study which is NACCHO’s comprehensive look at local public health infrastructure and practice. By completing the survey, SHDHD is helping to develop a complete and accurate description of local health department infrastructure and practice.
Military families appreciate Military Family Fun Day

South Heartland planned a second annual Military Family Fun Day, held June 29 from 9:00 am – 4:00 pm at Timberlake Ranch Camp. This year we had 115 participants in this event, which was supported by Making Connections funds. Informational booths were set up throughout the day for participants to attend including: Janelle Brock – GI VA Suicide Prevention, Charles Wess – Lincoln VA Whole Health, David Conrad – Omaha VA Outreach Specialist, Ken Colson – Mobile Vet Center Lincoln, Karla Palmer – MCNA Dental Lincoln and Steven Dillman – Cease Fire Ministries.

Activities included high ropes course, blob, paintball, trail rides hiking trails, petting zoo, obstacle course, disc golf, swimming, canoes and paddleboats, fishing, and sand volleyball. Veterans and their families had a great time with some expressing “thank you” at the event (one veteran repeatedly throughout the day) and others sharing their appreciation through evaluations and by email:

- “Want picture of the whole group for my album for the memory of a great day.”
- “My son LOVED that he was able to get his own dog tags made.”
- “My husband is active duty, he’s a recruiter. He has very long hours. We rarely have a chance to spend time together as a family. It was an absolute blessing to have a day for family fun together!!”

- Liz Chamberlain, VetSET/Making Connections Coordinator

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