



Above: Clay County
Right: Adams County
Below: Nuckolls County



Above: Access to Care "lens"
Below: Webster County



**Strategy Setting Meetings-
Community Health Needs
Assessment Process**



St. Cecilia's Health Ministry collaborated with SHDHD to promote a variety of programs.



Geena Piper presenting to staff her internship work done during fall semester

Below: Preparing for delivery of SNS
Right: Checking in inventory



Above: Pickers being given their directions.
Middle: Maintaining proper cold chain
Right: All exercise participant debriefing

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

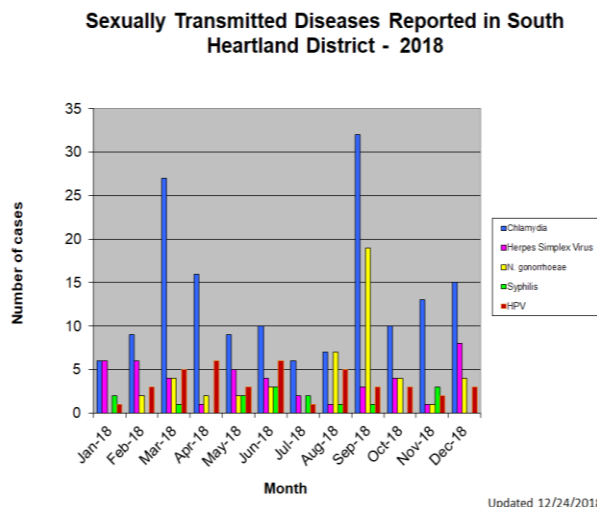
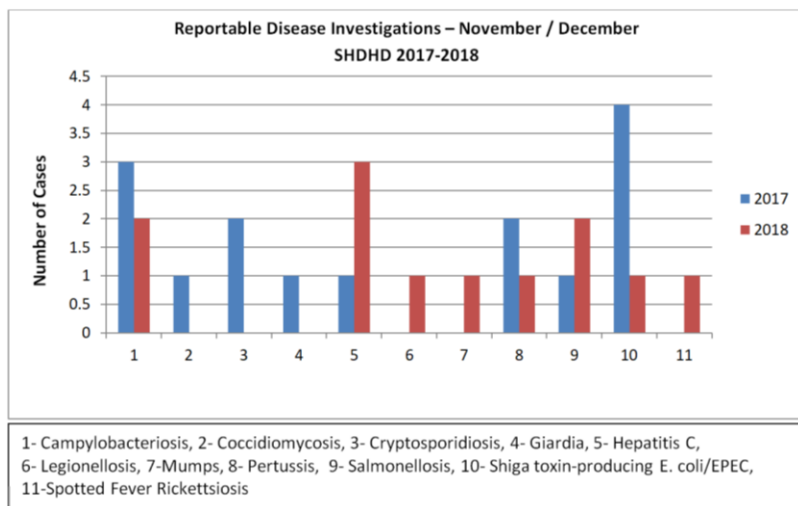
1. Monitor health status and understand health issues facing the community.

(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 Community Health meetings](#): Community Input Strategy Meetings were held on November 14th and December 12th at locations in all 4 counties connected by video. In preparation for these events, staff compiled materials including summary sheets for strategies and meeting evaluations for both meetings. We are in the process of reviewing information gathered from professionals and community members to select strategies for the upcoming 2019-2024 CHIP.
- [Hospital ILI](#): Across the State, there has been a marked increase in influenza-like illness (ILI) activity starting the week of December 17th. SHDHD surveillance staff continues to monitor activity and communicate with hospitals regarding hospitalizations for ILI. While we have had hospitalizations this fall for influenza and ILI, there have been no deaths. Less than 3% of individuals to any of our three hospitals have been admitted due to ILI.
- [West Nile Virus](#): During the 2018 season, Nebraska reported 288 cases of WNV. SHDHD continued to receive lab reports during the months of November and December. The final report was completed and submitted on December 14th.
- [Food Recalls](#): During the months of November and December, food recalls that may have been distributed to SHDHD included several products with undeclared allergens, salmonella, listeria and E.coli contamination. Recall items are monitored to alert the public and provide information to DHHS when individuals are infected.
- [School Surveillance](#): Fall Semester ended for ESU 9 schools on December 21st, 2018. Reports of influenza cases have increased in the previous two weeks. Gastrointestinal illness has been reported by several schools, but no outbreaks identified. Reports for the school surveillance program will be sent out to 33 schools at the beginning of 2019. Reports will include individual school information as well as district information.



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:**

- **Strategic National Stockpile (SNS) Sub-hub Planning:** SHDHD conducted an SNS Full Scale Exercise on November 28, 2018. 30 volunteers from all four counties, staff, and partner agencies, as well as news media all took part in the exercise, which was a tremendous success. We were able to demonstrate “Cold Chain Management”, which is keeping vaccine within a 36-46 F degree range. We were able to complete this within 3 hours of the time we picked up the SNS at the hub in Grand Island. Garry Steele from Edgar was the subhub site manager and Steve Eddy, head of the NWS in Hastings, was the Operations Chief in the subhub itself. A huge thank you to everyone who made this the tremendous success that it was. We also had great news coverage.
- On November 9th, J Morgan took part in a **TTX at Mary Lanning Healthcare** regarding surge in case of a Pandemic Flu. There were approximately 35 participants.
- **Lead Home Investigation:** SHDHD and DHHS partnered to complete a home investigation for a child living in Adams County. Several sources of lead were identified in the home environment and suggestions provided for making changes to decrease or remove the lead exposure.
- **Health Alert (HAN) sent to healthcare providers and facilities:** Over the past three months, there have been two cases of pertussis. SHDHD collaborated with Dr. Daniel Brailita to approve a message to update providers about symptoms and treatment when evaluating a potential case of pertussis. The HAN was sent on December 6th to all local providers, hospitals, labs, and urgent care clinics.

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 office:** Staff covered monthly hours in Superior and Red Cloud in November and December. Red Cloud doesn't have a center that has as many activities since it has moved, so JM is starting to go to the Guide Rock center instead. Topics covered for congregate meals included Holiday Stress and cold weather EP.
- **Community sign boards:** were utilized to get information out (located in Edgar, Nelson, Lawrence, Red Cloud, Bladen, Roseland, and Kenesaw). November/December topics were obesity, flu shots, falls prevention, and holiday stress.
- **Radon testing and mitigation:** Continue to receive calls and share information on radon testing and mitigation, including one contractor. Superior library has sold most of their radon kits and will be receiving more. This is a relatively new site for us to sell radon kits. An ad for the Hastings Tribune Holiday Greetings Page was published on December 22nd, promoting testing and encouraging community members to be concerned about the quality of indoor air. The Radon grant proposal was submitted to DHHS in November for the upcoming 2018- 2019 season.
- **Hand Washing:** SHDHD led the Scrubby Bear Presentation to 35 pre-school students at Blue Hill Elementary.
- **News releases, public health columns, ads and interviews:** Topics covered in November and December - Community Health Worker ads, Board meeting notices, Sunrise 60 interviews: FALLS program for December and Veteran Healthcare in November, Good, Healthy Life program on NET, Full Scale Exercise interviews on television, in the newspapers, and the radiogram; Medical professionals recommend getting a flu shot before the holidays; Walk like a Penguin and other December tips. SHDHD staff reviewed and revised the communication calendar for 2019.
- **Community Presentations:** Presentations were given at Good Samaritan Village Goldbeck Tower and The Terrace in December with a total of 20 residents in attendance. The focus was the role of the health department and a brief introduction to Health Literacy and ways to break down communication barriers during an office visit.
- **SHDHD Facebook:** In November, the number of people reached was 1,577. For December, the number of people reached was 2,231. The topics for Facebook and twitter in November were “thank you service men and women”, Diabetes Prevention and Hand Washing. December's topics included promotion of the “Ask the Question” campaign for service men and women, holiday safety and fall prevention.
- **Worksite Wellness:** SHDHD's worksite wellness program is restructuring with meetings held only once a quarter. December SHDHD and Mary Lanning hosted “Community Health Improvement Plan- How it Impacts My Worksite” lunch and learn with 1 out of 5 worksites in attendance. This program is currently being assessed and looking at how we can better meet worksite's needs.

- **Childhood Obesity:** SHDHD has been active connecting with schools about wellness activities, attending Hastings Public District Wellness Team meetings, presenting at NE SHAPE conference with Hastings Public Schools, and beginning to work with schools to complete the School Health Index Assessment.
- **Tai Chi Moving for Better Balance Classes:** Beginning Tai Chi classes - SHDHD hosted four **Beginning Tai Chi classes** offered in the district thus far: Superior, Nelson, Hastings – YMCA and GFC, with 17/25 participants, or 68%, finished the class. In addition, 17 participants that finished the class began the class with combined TUG (Timed Up and Go) scores average of 9.97 seconds and finished with a combined TUG score average of 7.81 seconds. 15 out of 17 participants (88%) demonstrated quantitative gains and/or maintained their pre score for TUG. Year round Advanced Tai Chi classes are offered 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. Currently there are 35 participants participating in the advanced Tai Chi classes. Three Falls Prevention presentations were completed during this period: Adams County Senior Services, Roseland Congregate Meal and South Central Behavioral Services / Opportunity House Day Rehab. For the month of December, focus was on Falls Prevention for 1) Sign boards, SHDHD sign board in parking lot (Prevent Falls: Walk Like a Penguin) and 2) Community Sign Boards in the district at 7 locations: Kenesaw, Roseland, Edgar, Nelson, Lawrence, Red Cloud, and Bladen (Winter Fall Prevention: Fall Safety Tips for Winter poster). 3) Also, “Fall Safety Tips for Winter” public health column (Hastings Tribune and local county papers), 4) KHAS radio podcast, 5) Facebook and Twitter posts during the Month of December.
- **Smart Moves (Diabetes Prevention Program (DPP)):** SHDHD’s Smart Moves classes continue to occur- Superior, SHDHD, and MLH’s Smart Move classes have completed months 10 and 11 of the program, with only one month left. Brodstone, SHDHD and ESU9 will be starting a 2019 class in January, ML will be starting a class in February, and Village Pharmacy will be starting a class at the beginning of 2019- date TBD.
- **YMCA’s SMBP Program:** South Heartland’s community health workers continue to have an active role serving as Healthy Heart Ambassadors for the program and holding office hours each Monday from 12:30 - 3:30 to assist participants in learning the correct way to measure their blood pressure. This collaboration with the YMCA in delivering their Self-Monitored Blood Pressure program allows us to engage and continue working with women identified for health coaching through the NeDHHS WISEWOMAN Program (Well-Integrated Screening and Evaluation for Women across the Nation).
- **Opportunity House (South Central Behavioral Services day rehabilitation site):** education provided for the following topics by SHDHD staff during December - Falls Prevention (STEADI, Stepping On, and Tai Chi Moving for Better Balance).

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:** The 2019-2024 CHIP is in the process of development from the Community Health Needs Assessment. CHIP strategy meetings are completed with next steps for strategic planning, finalizing the CHIP and implementing community partner led steering committees to monitor progress for each priority area.
- **Access to Health Care:** Staff continues collaborative efforts with local agencies to address the identified need for navigating low income, undocumented women, who do not qualify for Every Woman Matters, to breast and cervical cancer screening.
- **Obesity:**
 - **Nutrition Advisory Board (NAB):** The Nutrition Advisory Board will only be meeting quarterly with the next meeting in January. However, in November, SHDHD joined UNL Extension’s nutrition team zoom meeting to share how the two entities collaborate on activities and how goals align. We presented to 6 members.
 - **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.
 - **Prevention Connection: Healthy Hastings follow up on action summit:** Healthy Hastings continues to meet to fulfill the action plan. The team didn’t meeting in November or December, however they were invited to attend the presentation from JEO about their walkability study findings. SHDHD participated in this meeting and was able help prioritize the area for the next trail expansion.

- Prevention Connection: Better Health Outcomes Through Collaboration: SHDHD met with the Mary Lanning Vice President of Ambulatory Services and the Director of Clinic Operations to discuss a collaborative effort to provide CMS Chronic Care Management services.
- Prevention Connection: Smart Moves, Diabetes Prevention Class (DPP): SHDHD continues to work with partners in implementing this evidence-based yearlong program. SHDHD has worked with community partners and has established 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 WoW (Worksite Wellness): During November, SHDHD staff focused on gratitude and donating, 90% of staff donated food to the food drive with over 100 items donated. Staff also had the opportunity to listen to a guest speaker about donations. In December, all staff participated in the end of the year networking opportunity followed by a carry in lunch. Three board members and one spouse also attended the carry in lunch. SHDHD also participated in Adams County Worksite Wellness meeting in December, providing them with stress reduction articles for staff and evaluation suggestions.
- Whole Schools, Whole Community, Whole Child (WSCC): SHDHD helped Harvard Public Schools and all 7 of Hastings Public School buildings complete the initial school health index assessments. The school health index is a CDC driven school assessment that assesses the following areas: nutrition, physical activity, physical education, community involvement, policies, social and emotional, counseling services, safety and dietary services. As part of the Nebraska Department of Education funding SHDHD received, schools are asked to complete this assessment as baseline. SHDHD staff met with schools, completed the assessments and began planning who would be a part of each school's wellness team.
- Community Presentation on obesity and healthy lifestyle was given to clients at Opportunity House in Nov.
- EWM Health Hub Presentation: SHDHD program coordinator presented to local health dept. hubs across the state sharing SHDHD's keys for achieving success in navigating women to breast and cervical cancer screening and health coaching to lifestyles supports during the 2017-18 subaward period.
- Cancer
 - Cancer Coalition: South Heartland Cancer Coalition meeting in Nov. was cancelled due to lack of attendance. No meeting was held in Dec. due to the meeting date falling on Christmas Day. We look to re-energize the coalition as we begin a new CHIP.
 - Mary Lanning Healthcare Cancer Committee: Cancer Committee met in November. Together as partners, we 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.
 - Colon Cancer: DHHS has accepted our screening plan for 2018-19 and will be shipping new FOBT kits to us by the first of the year. Kits will be available year round at SHDHD and will be shared with some district clinics and pharmacies and with parish nurses for distribution to anyone age 50-74.
 - Cervical Cancer: Human Papillomavirus (HPV) vaccine educational materials are displayed and 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.
 - HPV Cancer Prevention: HPV banners in English and Spanish are on display at the Community Health Center.
 - Breast Cancer: Using the Encounter Registry web-based tool, 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 (1 in Nov./Dec.). In Nov./Dec. staff documented 3 navigation contacts to 1 woman for breast and cervical cancer screenings and diagnostic services. 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. A collaborative impact project with local partners was initiated to address this need, but barriers to implementation have occurred. Work to overcome barriers will continue.
 - Prostate Cancer: No current activity.
 - Skin Cancer: No current activity.
- Substance Abuse: SHDHD is participating in a discussion with partners to bring the film series "Do No Harm- The Opioid Epidemic" to the Hastings Museum theater.

- **Mental Health: VetSET/Making Connections** - Started promoting Ask the Question Campaign “Did you or a Family member serve in the Military?” to partners: South Central Partnership, Case Managers, Community Care Connection participants, Health Ministry, MAAA /Senior Centers, social media and during MAPP Strategic Planning Meetings.
- **Other Collaborations (Hastings Health Ministry):** The group met in Nov. The Dec. meeting was cancelled due to conflicting schedules. SHDHD staff uses this opportunity to share community program updates at each meeting.
- **Vital Signs Health Fair Board:** 2 SH staff are members of this board which held its first meeting in Oct. to begin planning for the March health fair.
- **Other Collaborations (Hastings Public Schools):** SHDHD and Hastings Public School (HPS) collaborated to present at the 2018 Ne SHAPE conference. The team presented on the progress made over the past 5 years with HPS school wellness initiatives and now community partnerships were key.

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:**
 - **Tai Chi / Stepping On Falls Prevention Suabaward:** fully executed agreement for October 1, 2019 – September 30, 2019 for \$13,000.
 - **2019 Immunization Funding:** submitted proposal for SHDHD immunization program funding for the period Jan 2019 – June 2019 for \$10,300. Awaiting subaward.
 - **Lead Poisoning Surveillance:** submitted a work plan and budget for Lead Poisoning Surveillance and Prevention subaward with DHHS for \$6,900 – executed subaward received 12/10/2018
 - **Health Hub / Every Woman Matters:** waiting for subaward from DHHS. We were able to continue some activities during October, which they assure us will be reimbursed, but other activities are on hold until we have a signed agreement. Still no subaward as of 01.04.19.
 - **Radon Awareness and Risk Reduction:** submitted a work plan and budget for subaward with DHHS Environmental Health for \$3,000. Requires \$3,000 match. Project start date slated for December 15, 2018. No subaward received as of 01.04.19.
 - **Making Connections (Veteran, Military Service Members & their Families):** Executed contract received 11/13/18 for \$13,500.
- **HRSA Rural Health Network Development Planning:** under the leadership of South Heartland District Health Department, five partners developed a proposal to work together to create a behavioral healthcare network, complete a behavioral health assessment and develop a plan to address identified needs including workforce training issues. The partners are Mary Lanning (and their behavioral health services and their clinics, serving Adams and Webster counties, and serving long term care centers in all 4 counties), Brodstone (Nuckolls Co), Quality Clinic (Clay County) and South Central Behavioral Services (serving all 4 counties). The proposal was submitted in November for a slated project period beginning July 1, 2019.
- **Performance Management System framework, PMS:** The SHDHD PM process will be evaluated for usefulness and need for quality improvement. The performance management system measure is included in SH’s PHAB Action Plan, “to integrate performance management throughout SHDHD and continue training to develop staff and BOH understanding of performance management system”. The Action Plan objectives and actions include training for staff and updates for the BOH. The new NACCHO QI Survey will evaluate QI and PM knowledge.

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.
- We developed a new [Public Health Law Review template](#) and used it to provide information to the board regarding the Public Charge Test rule change proposed by the U.S. Department of Homeland Security. At the November Board meeting, the board had directed the executive director to develop a response letter opposing this rule change. The law review template was used to capture information about the rule change and this was shared by email along with the response letter to the board for feedback, and the final response letter submitted on December 8 to www.regulations.gov website.

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 Nov./Dec. the [Vaccine for Children](#) clinic staff delivered 179 vaccines to 43 patients at two monthly clinics. Of those 43 patients, 28 (65%) had no insurance, 7 (16%) had Medicaid, 8 (19%) were underinsured. 7 of the 43 patients (16%) were new to the clinic. Total donation collected from clients for Nov./Dec. = \$214.00 (avg. \$2.55 per immunization or \$4.05 per patient).
- In Dec. two new QI [strategies to help increase complete immunization rates](#) were selected after review of AFIX (Assessment, Feedback, Incentives & eXchange) reports with our state Community Health Nurse. Selected strategies focus on redesign of our reminder recall protocol and improving communication with clinic staff around vaccine coverage rates.
- SHDHD uses quarterly reminder/recall, an [Evidence-Based Strategy for improving vaccination rates](#). There was no reminder/recall activity in Nov./Dec.
- In Nov./Dec. the [Adult Immunization Program](#) delivered Tdap to 1 adult age 19 and over. This client was uninsured.
- SHDHD staff continues work with 3 [Hastings College \(HC\) student volunteers and the HC school nurse](#) on activities to educate college students about influenza and to promote flu vaccination to students and staff.
- In Nov. [student intern](#), Geena Piper, worked with Immunization Program coordinator to survey the directors of district child care centers, nursing homes and long term care centers about Agency Immunization Policies and current influenza vaccination coverage for staff, students and residents. Agencies were offered future support for strengthening or developing policy around immunization.
- [Community Health Worker \(Bilingual\)](#):
[Every Woman Matters \(EWM\)/Encounter Registry](#): No activity. Looking to fill this position.
- [Community Health Worker \(English Only\)](#):
[Every Woman Matters and Health Coaching](#): November / December continue to do SMBP checks on two participants: one Hispanic participant (completed middle of December) and one English-speaking participant. November / December: No health coaching – waiting for authorization to continue health coaching from the state.

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 \(PM\)](#): Training will be determined to advance understanding of performance management and expand PM implementation ("to integrate performance management throughout the HD and continue training to develop staff and BOH understanding of performance management system" PHAB Action Plan). This will start with the new NACCHO QI survey that combines both QI and PM.
- [The Workforce Development Plan](#): The QI-PM Team continues to work on succession planning/knowledge transfer development for critical positions and monitoring QI project progress. The draft Succession Plan was reviewed by the Board Policy Committee in December.

- **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.
- **NALHD Health Literacy Mini-grant Implementation:** SHDHD Health Literacy Policy was developed for review by the Board Policy Committee and full board in January.
- SHDHD staff, B. Wolfe, completed the **virtual facilitation training** hosted by TOPs training, using Adobe Connect, to continue learning about the online program and the ability to facilitate conversations with partners via distance.
- **“Psychology of Change” IHI webinar series:** B. Wolfe, completed an online 8 session webinar. This series is designed to help organizations foster change in a healthy collaborative way that will make a positive impact on the organization. Brooke is sharing a summary of the training with the QI-PM team members, and training of other staff and BOH will be determined by the team.
- **State Steering Committees:** SHDHD participated in the Diabetes Prevention State steering committee quarterly meeting and the Whole School, Whole Community, Whole Child State Steering committee meeting.
- **Trauma Informed Care Webinar:** SHDHD participated in “Trauma- Informed Supervision: It’s for everyone” webinar.
- Hastings College senior Geena Piper is doing a **credit-based internship** with SHDHD and completed a portion of her internship working with Jessica Warner in health surveillance. She completed her internship on December 3rd, 2018.
- M Bever is participating in a **Community of Practice for human resources** hosted by Nebraska Association of Local Health Directors. The current focus is on worksite safety policies and job descriptions as well as a plan for staff and leadership training in local health departments.
- Brittany Harrington, **NDHHS ERC Coordinator conducted a site visit** at SHDHD on December 4th. She wanted to get to know what our office was like and discussed changes that will be beneficial to smaller rural health departments. She attended our FSE on November 28th and was impressed by the outcome. She will be a good advocate for the smaller health departments and bring fairness to requirements of smaller ones compared to City Readiness Initiative (CRI) health departments.

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:** client interaction tracking (Access database), standardization of SHDHD documents, finance and operations standardization of the grant compliance files/indirect cost allocation, and records retention.
- **Full Scale Exercise After Action Report:** Jim Morgan is leading development of an After Action Report for the November 28 Full Scale Exercise to test Strategic National Stockpile and which will include how well we met the exercise goals and recommendations for improvement.

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

- *Provide examples of evidence-based programs our department is implementing.*
- *Describe how we have collaborated with researchers to conduct any research studies (e.g., completed surveys, interviews, or focus groups).*
- **Evidence Based:**
 - **Prevention Connection:** SHDHD completed a vending assessment to determine the amount of change over the past year. The vending machines have not reached the 30% healthy as needed to become an “award” winning machine, but they have moved from 15% healthy to 20% healthy.
 - 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 and a new class will be starting after the first of the year in 2019. **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 after the first of the year.
 - We are continuing to use the evidence-based **Reminder Recall** process for immunization clinic clients to improve immunization rates.

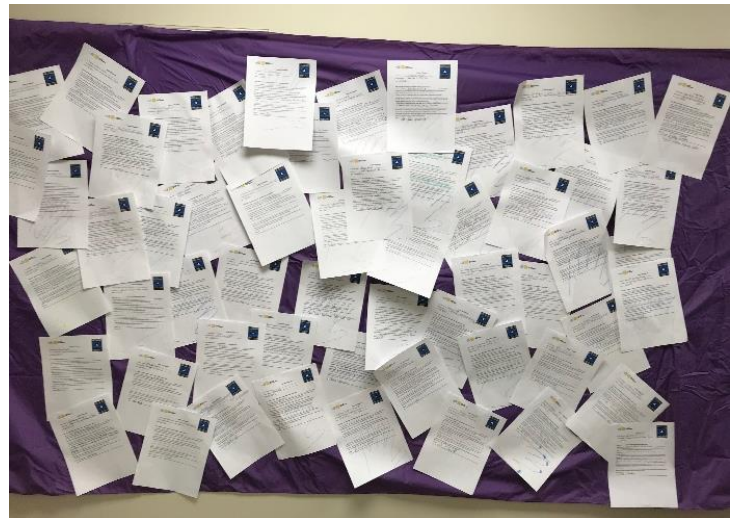
- **Public Health Accreditation Board (PHAB) Standards and Measures:** Completion of accreditation will align SHDHD with these evidence-based measures, improving quality and performance. SHDHD developed their Action Plan for the 16 measures identified by the PHAB Committee and uploaded it to ePHAB on November 21, 2018. The PHAB Committee accepted the SHDHD Action Plan on December 3, 2018 and we will have 1 year to implement our objectives and actions.
- **NALHD Health Literacy Mini-grant:** Evidence shows persons with limited health literacy skills are more likely to have chronic conditions and are less able to manage them effectively. Through the NALHD Health Literacy Mini-grant, SHDHD completed a Health Literacy Check-up, and created an action plan for future staff education and evaluation related to health literacy practices. We are now working on implementation of action plan goals.
- **Research/Contributing to the Evidence Base of Public Health:** The **2017-2021 Nebraska State Health Improvement Plan (SHIP)**, in collaboration with statewide partners, promotes the health and well-being of Nebraskans as a whole using a statewide assessment to establish priorities, plan for action, and empower collective impact. The **Health Equity priority group** is working to increase the capacity of organizations to do health equity work. To better understand, support and grow current efforts, the public and private partners involved with SHIP are conducting this brief survey to identify health equity activities occurring in Nebraska. SHDHD participated in this workgroup and completed the survey.

Stories: How we made a difference....

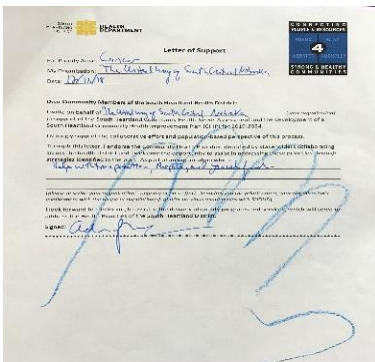
**Mobilizing for Action Through Planning and Partnerships (MAPP)
Many Hands Make Light Work**

During the months of November and December, SHDHD hosted three days of community meetings to begin the strategy planning for the 2019-2024 CHIP. It is essential to gather community input on the strategies partners feel would make the largest impact on the priority areas.





SHDHD facilitated one meeting solely on identifying strategies to address access to care and two meetings each on the four health priority areas: Mental Health, Substance Misuse, Obesity and related health concerns, and Cancer. Community organizations came together at sites in each county, connected to SHDHD by videoconference. During the December strategy meetings, each participant reviewed the strategies that were suggested during the November meetings, provided additions, added comments and were asked to endorse the strategies their organization could support implementing. From all of this feedback, the MAPP core planning team will identify evidence-based strategies that best fit the community's suggestions. As part of the Community Health Improvement Plan, these formal strategies will be complete with goals, objectives, performance measures, baseline values and target values.



There was overwhelming support from community partners and the picture shows just that. Each participant had the option to "support" a priority area and the community health improvement planning process by completing a letter of support and tracing their hand as a signature. With community partners leading strategies and improving the health of the communities they serve, SHDHD's 2019-2024 CHIP will be a success.



South Heartland Bi-Monthly Board Report: Staff-Specific Program Updates, November-December 2018

<p>Jim Morgan</p>  <p>Public Health Risk Coordinator</p>	<p><u>Emergency Preparedness:</u> SHDHD conducted a Full Scale Exercise about the SNS and its transport and distribution. I believe it was a great success. We had volunteers from all four counties be staff members at the subhub. Garry Steele was instrumental in making this succeed as well as Steve Eddy from the NWS. Everyone did a great job and it was the first time any health department used an EOC in the subhub or use “Cold Chain Management” in transporting vaccine. It was a total success. I can’t thank the participants enough for them making this the success it was. I was very pleased with news media participation and the coverage they gave afterwards.</p> <p><u>Environmental Health:</u> People are becoming more aware of the importance of radon testing and mitigation. They are also becoming more educated in what to watch out for and what their rights are in the mitigation process.</p>
<p>Dorrann Hultman</p>  <p>Community Health Services Coordinator</p>	<p><u>Every Woman Matters Health Hub (EWM) Cancer Prevention / Immunization Program:</u> Since losing our bilingual Community Health Worker in early November we have experienced challenges with both the Immunization and EWM Health Hub programs. Staff are to be commended for their willingness to step up and assume the extra responsibilities.</p> <p>For the December Immunization clinic, LISPALOMA, a ML interpreter (past SHDHD employee), was employed to make the reminder phone calls to Spanish speaking families. The clinic schedule was arranged so that clients with interpretation needs were scheduled later in the day when Albert, our part time employee and HC student, could be here to provide interpretation. Jessica helped with additional interpretation for an adult early in the clinic day and made calls after the clinic to reschedule clients who did not show for their appointments. Liz C. filled in at clinic check-in assisting clients with the initial paperwork. We will continue to find work arounds for staffing/interpretation challenges until we are able to fill the bilingual CHW position.</p> <p>Our EWM Health Hub is impacted twofold, first from the delay of signed sub-award which should have been in place by October 1, 2018, and second the current inability to connect with our minority population who have been a large part of the breast and cervical navigation work done in the past several years. With this shift in focus from Hispanic minority it allows us now to direct all of our focus on the rural, low income clients we have difficulty reaching. We are looking forward to the venues scheduled at commodity distribution sites across the district in Jan./Feb.</p>
<p>Liz Chamberlain</p>  <p>Community Health Worker</p>	<p><u>Falls Prevention:</u> SHDHD hosted four Beginning Tai Chi classes offered in the district thus far: Superior, Nelson, Hastings – YMCA and GFC, with 17/25 participants, or 68%, finished the class. In addition, 17 participants that finished the class began the class with combined TUG (Timed Up and Go) scores average of 9.97 seconds and finished with a combined TUG score average of 7.81 seconds. 15/17 participants (88%) demonstrated quantitative gains and/or maintained their pre score for TUG. Completed three Falls Prevention presentations during this period: Adams County Senior Services, Roseland Congregate Meal and South Central Behavioral Services / Opportunity House (Day Rehab facility for the Mental Ill). During the month of December, focused on Falls Prevention on Sign boards, SHDHD sign board in parking lot (Prevent Falls: Walk Like a Penguin) and Community Sign Boards in the district at 7 locations: Kenesaw, Roseland, Edgar, Nelson, Lawrence, Red Cloud, and Bladen (Winter Fall Prevention: Fall Safety Tips for Winter poster). Also, “Fall Safety Tips for Winter” public health column (Hastings Tribune and local county papers), KHAS radio podcast, Facebook and Twitter posts during December.</p>
<p>Brooke Wolfe</p>  <p>Public Health Promotions and Prevention Coord</p>	<p><u>Whole School, Whole Community, Whole Child:</u> SHDHD identified school wellness team leaders to lead the wellness initiatives over the next five years at Harvard and Hastings Public Schools (Nebraska Department Of Education chosen schools). Both schools also completed their baseline assessment using the CDC School Health Index School Environmental scan. From this assessment, schools will choose their focus area and action plan strategies.</p>

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<p>Jessica Warner</p>  <p>Health Surveillance Coordinator</p>	<p><u>Disease Surveillance:</u> Investigated one probable and one suspect case of pertussis in December. A HAN was sent out to providers, hospitals, labs and urgent cares after review by Dr. Brailita. In November, I completed the WNV grant report and the Radon grant proposal for the upcoming season. Over the past three months, I have been working with Geena Piper, a HC intern who will be starting medical school in the fall. She completed her internship on December 3rd assisting with fact sheets for MAPP and investigations. School surveillance ended on December 21st for all ESU 9 schools. I have been working on data input and expect to get reports out to all schools early in 2019. Hospital ILLI is going well this season with very few reports of influenza in December. I partnered with Steve Drda of DHHS to complete a lead home investigation for a child living in Adams Co. We were able to identify several sources of lead. I opened and closed seventeen reportable disease investigations during this reporting period. One case report form was sent to DHHS and CDC for Spotted Fever Rickettsiosis. I have been busy with several committees including Ethics, Quality Improvement, Worksite Wellness and the Core Team, working on various projects for MAPP/CHIP.</p>
<p>Amy Market</p>  <p>Reception</p>	<p><u>Master Database:</u> Worked on updating our master database contact list. In particular updating all of the physicians in our four counties.</p> <p><u>VetSET/Making Connections:</u> Joined the Family Readiness Group (FRG) for the 2-135th GSAB out of Grand Island. I will be attending monthly meetings there and have already set up a date and time for Liz Chamberlain to come out to meet the group and give a presentation on the VetSET/Making Connections program and activities that South Heartland will be participating in the near future.</p>
<p>Janis Johnson</p>  <p>Standards and Performance Manager / Public Health Nurse</p>	<p><u>Immunizations (VFC, Vaccines For Children):</u></p> <p><u>Accreditation Coordinator:</u> Action Plan submitted to PHAB 11.21.18 and accepted by PHAB Committee on 12.03.18. We have begun to implement and develop documentation to fulfill the objectives and actions for the Action Plan, which is due 12.2019.</p> <p><u>CHA/CHIP:</u> Core team participation, planning and development of meeting materials, facilitation of the Clay Co. meetings, and guidance for documentation of MAPP process to comply with PHAB evidence based measures.</p>
<p>Jean Korth</p>  <p>Chronic Disease Prevention Program Assistant</p>	<p><u>Health Literacy:</u> With the completion of the 1422 grant, my focus has largely been focused in the MAPP process. I have facilitated the meetings in October, November and December in Webster County. In addition to meeting facilitation, I compiled comments and strategy ideas from all of the participants in the four counties to determine common themes used by the core team to begin identifying CHIP strategies. Informational presentations on South Heartland District Health Department and Health Literacy were given in December at Goldbeck Towers and The Terrace at Good Samaritan Village in Hastings.</p>
<p>Susan Ferrone</p>  <p>Lifestyle Coach for Diabetes Prevention & Community Assessment Coord.</p>	<p><u>Community Needs Assessment, Community Health Improvement Plan:</u> Completed facilitation of 3 strategy setting meetings, bringing the CHA process to a close. From these strategy setting meeting outputs, the Community Health Improvement Plan will be developed.</p> <p><u>Smart Moves Class:</u> Last 2 Smart Moves classes are planned to round out our 2nd Smart Moves class. We are nearing our 5% class weight loss goal, which will help maintain our CDC recognition status.</p>