▶2013 Annual Report of the Nebraska Health Care Funding Act (LB 692)

West Central District Health Department

All local public health departments receiving funds under the Act are required to report on the activities carried out during the fiscal year July 1, 2012 – June 30, 2013.

Please respond to the questions and provide specific examples and outcomes wherever possible. You may not be able to respond to every question but be complete as possible.

This report is due to the Office of Community and Rural Health by **October 1**, **2013**. Please e-mail to Pat DeLancey (patti.delancey@nebraska.gov).

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- 1. Monitor health status and understand health issues facing the community.
- a. How do you make data available to your partners and your community?

The Health Department is accessible 24 hours a day/7 days a week. Three staff members are designated contacts for the Health Department and can be reached at any time by cell phone or email. Additional contact information for the Health Department is available through the Health Department website.

Most Health Department services are categorized into one of four categories, Dental Services, Health Services, Outreach Services and Environmental Services.

All departments participate in routine reporting to the Board of Health (BOH). Information provided to the BOH includes revenue, staffing, services provided and patients served.

Departments provide aggregate data on services provided and health related information as appropriate when requested by individuals and agencies. The public is directed to the BRFSS (Behavioral Risk Factor Surveillance System) website to review public health trends and needs, identify risks, and assess health care access. The public is also directed to the County Health Ranking website for state and county data and statistics on mortality, morbidity, health behaviors, clinical care, social/economic factors and environmental factors.

Another essential data source for our partners is the Community Health Improvement Plan (CHIP). CHIP has been used by a number of organizations to support their current and future works. The CHIP was completed May, 17 2012 and is available in hard copy at the Health Department or online at www.wcdhd.org.

Frequent communication occurs with local hospital and primary care providers on disease surveillance. Staff contact information, along with door posters on reportable communicable diseases are distributed to health care providers annually.

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b. What major problems or trends have you identified in the past year?

Access to dental care for those underserved is a significant issue within our service area. The Health Department serves a Medicaid population of 58.9%, self-pay of 35.5% and other at 6.6%. Most dentists in our service area do not accept Medicaid and for those who do, it is on limited basis. Having public health hygienists and a full time dentist would create access to dental services in our community that are not being met. A related challenge is recruiting a dentist to the rural area to work with the underserved. Despite the challenges, community members gathered to discuss options for brining a dentist to the health department. In the interim, the dental department started their WE CARE program by contracting with a retired dentist to provide needed emergency dental care approximately three days a month. The clinic was offered as a first-come, first-serve basis, serving approximately 1112 patients the 2011-12 fiscal year.

Through the CHIP process, the community wanted to see the Health Department lead an assessment process for determining if a FQHC would help address access to healthcare for Medicaid and uninsured populations. Currently the Emergency Room at Great Plains Regional Medical Center is used as a medical home for many Medicaid or uninsured clients, taxing resources needed for true medical emergencies. This proposal has been postponed at this time due to the lack of funding available to assess the need for a FQHC. Community discussions continue and data is being collected to determine if the answer is the Health Department adding medical provider services for Medicaid and uninsured clients.

c. If you updated your community health assessment during the past year, describe the process and the major outcomes.

The community continues to reference the work of the CHIP and the priorities identified in the CHIP continues to be a focus for agencies and organizations; however, collaboratively, we have failed to update progress and major outcomes in the written plan itself. Evidence of community progress in the identified priority areas is obvious through networking and partner discussions.

Funding Source: LB 1060

2. Protect people from health problems and health hazards.

a. What key activities did you complete in the past year 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?

The Health Services department participates in daily local and state Disease Surveillance activities watching for health related concerns of the community to determine when and if there is need to respond to an epidemic or outbreak. No major epidemics or outbreaks requiring action on behalf of the Health Department occurred.

Health Department staff partner with Chadron State College in the trapping and collection of mosquitoes to track the concentration of West Nile virus for the local area. Chadron State College completes testing and provides data to the State Epidemiology Department. As of October 9, 2012, 25 positive pools were found in Lincoln County as compared to 4 positive pools found in 2011.

The Health Services department provided 24 Flu Clinics serving more than 250 people in places of business throughout the service area including personnel with banks, schools, law enforcement, the community college, city and county and the Department of Roads.

b. What activities did you complete for emergency preparedness (e.g., planning, exercises, response activities) in the past year?

The Health Department actively participates and leads community meetings, planning activities and exercises for emergency preparedness. The following activities depict their in-depth involvement: Federal Emergency Management Agency Region 7 meeting, Table Top Bio-Detection System for Postal Service, Table Top for Airport, BDS Full Scale Exercise Planning meeting, Lincoln County Exercise Planning meeting, West Central Medical Response System (WCMRS) Table Top exercise, WCMRS Functional exercise, Health Alert Network Telehealth Test, Chempack Table Top exercise, LincUp Shelter in Place, BDS Training, Public Information Officer Training, National Incident Management System 100 & 700 Training to Medical Reserve Core volunteers, Lincoln County Exercise Planning Team meeting, Nebraska Food Safety Task Force Conference, Mass Fatality Planning, Long Term Care Facility Disaster Preparedness Conference, and a Social Media in a Disaster workshop.

80% of Health Department administration has completed all FEMA Incident Command Systems modules.

Funding Source: LB 1060

3. Give people information they need to make healthy choices.

a. Provide two to three examples of key information related to physical, behavioral, environmental, social, economic, and other issues affecting health that was provided to the public.

The Health Department partners with local media outlets to provide the public with health information. The following link www.wchdh.org/home/videos.html provides several examples.

Public service announcement are made at various key points of the year for disease prevention, sun safety and strengthening families.

The Health Department used National Public Health Week to connect with the public. A special topic was addressed each day through social media.

Monday: Ensuring a Safe Healthy Home for Your Family. The public was provided sample emergency plans and those who drew up and sent in a picture of their plan were entered in a drawing.

Tuesday: Providing a Safe Environment for Children at School. Tips for antibullying and bullying signs to watch for were posted on the WCDHD Facebook page.

Wednesday: Creating a Healthy Workplace. Offices were asked to submit photos of themselves walking over lunch or eating a healthy lunch together to be entered in a drawing.

Thursday: Protecting Yourself While on the Move. Families were asked to send pictures of themselves buckled in, wearing helmets, or other pictures of them being safe while on the move to be entered in a prize drawing.

Friday: Empowering a Healthy Community. The new Healthy Families America program was introduced. Information on the benefits of

breastfeeding was shared. Families stopping by to learn more about the program were entered in a prize drawing.

Each and every day of the week discounted blood draws and BMI checks were made available. On Wednesday, free fluoride treatments for children under 12 were provided.

b. Provide two to three examples of health promotion programs that were implemented to address identified health problems.

The Minority Health Initiative (MHI) staff organized a new Health Topics Program for minority populations. Professionals from the community volunteered their time to cover topics on heart disease, obesity, diabetes, women's health, and oral health. Additionally, attendees participating in monthly health screenings by having their blood pressure, pulse and blood sugar tested. The information was charted for each attendee. When test results are not within normal ranges, attendees are given related health information and encouraged to see a medical provider.

Sun safety education was demonstrated during the annual Farm Safety day held for elementary schools in Lincoln County. Children were shown the importance of wearing protective clothing such as long sleeves and hats while out in the sun, in addition to wearing sun screen. The children made bracelets with sun sensitive beads that change color when in the sun to remind them to wear sun screen protective clothing.

c. Provide two or three examples of activities you completed to provide targeted, culturally appropriate information to help individuals understand what decisions they can make to be healthy.

The Dental department presented preventative dental care programs for two groups. One program was for a MHI (Minority Health Initiative) group of 25 participants to demonstrate proper brushing and flossing techniques and to show Spanish instructional videos covering topics such as crowns, root canals, tooth extractions, periodontal disease, regular maintenance, and prevention were shown. Another program was provided for the Frontier House for 40 participants. The Frontier House serves adults who suffer from diagnosed mental health illness. Demonstration of proper brushing and flossing techniques were given and information on how often to go to the dentist was provided. Wrap up included lively question and answer sessions after both presentations.

Funding Source: LB 1060

4. Engage the community to identify and solve health problems.

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

Building on the work previously done through the 2010-11 Mobilizing Action through Planning and Partnership (MAPP) process, the Community Planning Team met to develop community strategies to address the four priority issues identified which included: Domestic Violence/Child Abuse, Access to Health Care (Dental, Mental and Primary Care), Disease Management and Prevention, Healthy Pregnancy/Teen Pregnancy Prevention. Four work groups, composed of representatives from mental health, medical community, family serving agencies, Health and Human Services, city council, district 42 senator, and other community members, were formed to brainstorm and come to consensus on Outcome Objectives (SMART-Long Term), Impact Objectives (SMART-Short term 2 to 5 years), and Process Objectives. With the work completed by the team, the Community Health Improvement Planning (CHIP) document was compiled and distributed to the team. A copy of the CHIP can be obtained at the Health Department.

- b. During implementation of your work plan or other community-driven plans:
- What were the evidence-based strategies that were implemented?
- What were the key communication activities that were implemented?
- Who were some of the key partners that were involved in the implementation of the work plan? What were some of their key contributions?
- What is the impact on the health of community members?

Widely due to the collaborative work of the community, the Health Department was awarded funding for a Home Visiting program to address domestic violence/child abuse, access to healthcare, and healthy pregnancies. Healthy Families America (HFA) was the program selected because its core components filled the largest percentage of gaps identified by the team. HFA is a nationally-recognized, evidence based model that connects expectant parents and parents of newborns with educational information and support through home visiting. Through this program, families receive the support and encouragement they need to build strong family bonds, find ways to reduce stress, connect to needed resources, make sure children are on track

with their physical and mental development, and much more. This program helps families build strong foundations that will last a lifetime.

The 21 member West Central Partnership Children and Families Alliance helped to support and promote the program with their own professional organizations and other professional associations. HFA staff met with family serving agencies, physicians and pediatricians to explain program details and build a referral base for the program. The program was also promoted through the Health Department, television, and radio.

Since family recruiting began in June, numerous families have been assessed and are ready to enroll in the program. We wait in anticipation to see how the program will grow and impact the community.

The Health Department partnered with two middle schools to offer the Teen Outreach Program (TOP): Real Teens, Real Life, Real Results. TOP is an evidence-based youth development program to increase healthy behaviors, life skills, and a sense of purpose. TOP leads to happy, productive, motivated, and skilled teens that are well prepared to take advantage of educational, family, and civic opportunities on an on-going basis! Teens who complete TOP experience: 52% lower risk of school suspension, 60% lower risk of course failure, 53% lower risk of pregnancy. Sixteen teens regularly attended TOP.

NORC at the University of Chicago conducted a study called "Applying Evidence-Based Models in Rural Communities," on behalf of the Federal Office of Rural Health Policy (ORHP) at the Health Resources and Services Administration (HRSA). After learning about the Tooth Tour, NORC requested an interview to learn more about the oral health program. NORC develops toolkits of evidence-based and promising resources rural communities can use to design programs increasing access to oral health. This study is part of the Rural Health Outreach Tracking Evaluation, a four-year project that monitored and evaluated the effectiveness of programs under the Outreach Authority of Section 330A of the Public Health Services Act, making recommendations for improving programs and disseminating results nationally.

Following the interview, the Rural Assistance Center (RAC) highlighted the Tooth Tour program in the toolkit making the program publicly available on the Rural Assistance Center (RAC) website at:

http://www.raconline.org/success/project-examples/348/

Funding Source: LB 692

5. Develop public health policies and plans.

a. What policies have you proposed and implemented that improve population health and/or reduce disparities?

The Dental department helped reduce oral health disparities by improving access to dental services for the underserved population by using a sliding fee scale, fee for service system which is based off of federal poverty guidelines. Patients qualify for services if they fall within the financial parameters.

The Dental department also researched sliding fee scales, cost of services of the University of Nebraska College of Dentistry, The National Dental Advisory Service, and the Gering FQHC (Federally Qualified Health Center). From the information they gathered, they restructured their cost of services to better serve the population base.

b. Describe how your department has 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.

The Health Department Strategic plan is brought before the local Board of Health twice annually to review and update. A copy of the updated plan is distributed to the staff and board. Additionally, the Health Department administration reviews the plan and prepares their BOH updates based on the parameters of the plan.

Goal Statement 2 in the Health Department Strategic Plan is to Expand and Diversify Sustainable funding. The Great Plains Regional Medical Center Chief Medical Officer and several local dentists recognized the need for a full-time dentist to care for the dental needs of the growing Medicaid population. Key stakeholders from the community met to discuss possible solutions to the identified dental need. The meeting held at the Health Department involved two local dentists, the Health Department Executive Director and Dental Administrator, and community advocates. It was determined that placing a dentist in the Health Department could potentially best close the gap for Medicaid clients and uninsured needing dental care. The next phase included the Health Department creating an attractive business proposal to recruit dental candidates to the Health Department.

Goals Statement 3 in the Health Department Strategic Plan is to Maintain Capacity to Engage the Public Health Government Entity. Previously the physician role on the board was a dual role, 1) to be representative of the medical community, and 2) to be the medical consultant for all health related issues and orders. The BOH approved a proposal to create two positions to fill each role with two different licensed physicians. Physicians' workload often prevent them from volunteering for demanding roles. Removing the medical consultant duties from the board position decreased the workload of both positions allowing physicians the opportunity to fill each without overloading their duties.

c. Describe your efforts to develop and implement a quality improvement plan for your department.

The Health Department reached several milestones toward continuous quality improvement. We utilized a team approach for all decisions regarding CQI and accomplished all of the following: decided on QI Team Membership, named our QI Program (AIM) Acknowledging Improvement Matters, decided on overarching goal areas, identified possible action projects, examined PHAB Standards and Measures for QI (9), drafted a CQI Plan, shared the draft CQI plan with NE Division of Public Health, participated in CQI training events, developed supporting materials for CQI process (Prioritization Matrix, Project Planning, Problem Resolution Planning, Project Numbering, etc.), scheduled regular CQI team meetings, created a CQI Share file accessible to all staff where all CQI documentation is centrally stored, and most importantly have started making a culture change with staff putting quality at the forefront.

Funding Source: LB 1060

6. Enforce public health laws and regulations.

a. Describe your efforts to educate members of your community on public health laws, policies, regulations, and ordinances and how to comply with them.

Health Department staff members joined a community effort to petition the request by local bar management to extend the hours of operation to 2:00 a.m. Due to this collaborative community effort, the City Council denied the request.

b. What laws and regulations have you helped enforce to protect the public's health?

The Health Departments helps enforce the Landlord Tenant Act by collaborating with the City Inspector to investigate mold calls and concerns.

The Health Department also helps enforce the Clean Indoor Air Act by completing compliance checks with the support of law enforcement when reports are made regarding individuals smoking where they are not permitted. Individuals are contacted to meet with Health Department staff and law enforcement. Reported individuals are made aware that they are breaking the law. They are provided a pamphlet outlining the law and given a warning. If a second report is made, the individual may be ticketed for noncompliance by local law enforcement. To date, no second reports have been received.

The State Patrol Office notifies the Health Department when Clandestine labs have been uncovered. It is the responsibility of the homeowners to contract with a certified Clandestine clean up professional; however, the Health Department must approve the cleanup work plan. Once clean up is complete, the site is tested to assure decontamination was accomplished. The Heath Department must review the decontamination test results before approval is given to occupy the residence. The Health Department has not received any reports of Clandestine labs from the State Patrol Office this fiscal year.

Funding Source: LB 1060

7. Help people receive health services.

a. Describe the gaps that your department has identified in personal health services.

Financial barriers continue to exist in the general health care area, evidenced by the daily number of calls and concerns the Health Department receives from individuals needing affordable general health care. Currently, call volumes are being tracked and will be studied to determined next steps in meeting general health care demands of the public.

A gap in women's health care for preventative breast screenings exist in the Health Department service area. To lessen the gap, the Health Department was awarded a Susan G. Komen foundation grant which allowed for a

partnership with People's Family Health Services to provide much needed preventative breast screenings. Funding from the Susan G. Komen grant helped serve 929 individuals with unmet breast health needs from April 2012 to June 2013.

b. Describe the strategies and services that you 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.

The Dental department's Tooth Tour hit the road providing dental care at 6 elementary schools throughout the service region for 127 children. Participating children received dental education, cleanings, X-rays, fluoride treatments, and diagnosis (follow-up care was recommended when dental issues were recognized). A "report card" is mailed to families to communicate with the parents about the dental experience their child received.

In addition to direct services, the Dental department partnered with 9 local elementary schools to provide dental care education messaging to 1330 children.

The Health Services department partnered with school systems in the service area to provide hand-washing education classes to all 2^{nd} grade classes. Hand washing is one of the most important steps that can be taken to avoid getting sick and spreading disease.

The Health Department provides cost effective immunization services for Lincoln, Logan and McPherson counties. In the 2012-2013 fiscal year, 7809 immunizations were given to 2990 clients.

Funding Source: LB 1060

8. Maintain a competent public health workforce.

a. Describe your efforts to evaluate LHD staff members' public health competencies. How have you addressed these deficiencies?

Upon hire, candidates' credentials are reviewed to insure they meet minimum competency expectations.

Position specific licenses and credentials are reviewed at the annual evaluation.

All Dental hygienist are certified Public Health Hygienist. Training required for certification and renewal is provided by the Health Department.

All staff have been trained in (ICS) Incident Command System so they are able to adequately respond in the event of a public health emergency.

Disease surveillance staff have attended applied epidemiology training and have completed Principles of Epidemiology 3030.

Home visitors meet training requirements of the evidenced-based Healthy Families American model before being assigned to assist families.

Immunization staff attend the Annual Nebraska Immunization conference to obtain legislative and funding updates, compliance information and any new guidelines for the year.

b. Describe the strategies you have used to develop, train, and retain a diverse staff.

The Health Department administrative team designed and implemented a new employee orientation program to help acclimate new staff to the public health environment making them feel comfortable and welcome their first day on the job in the midst of a fast-paced environment.

The Health Department budgets to cover pertinent training for staff needing CEUs or other relevant training needed to perform the expectations of their position.

Regular monthly staff meetings are held to network and help keep staff current.

c. Provide at least two examples of training experiences that were provided for staff.

Training is considered vital to the success of the health department. All staff are strongly encouraged to participate in the following trainings: HIPPA, CPR, and Cultural Competency. Staff also participate in department specific training to keep current with skill sets and technology demands. Though the

list is exhaustive, the following are many of the trainings/conferences attended by staff: Patterson Eaglesoft, HIPPA, CPR/1st Aid, Bridges of Poverty, Health Impact Assessment, Quality Improvement, Accreditation, PHAN (Public Health Association of Nebraska), Immunize Nebraska, HRSA Preceptors and Tele-Dentistry, Results-Based Accountability, PIWI (Parents Interactive with Infants), Lactation, Smoking Cessation, Healthy Families American Core training, Growing Great Kids Curriculum training, TOP, data training, National Healthcare Coalition Conference and other related training as deemed appropriate.

d. Describe the activities that you have completed to establish a workforce development plan.

Administrative staff continually monitor and assess workforce needs. As attrition has occurred, the opportunity to create new positions addressing workforce demands has resulted. Over the past year, the Health Department has reorganized its organizational chart to include an administrator over each department (Health Service, Dental and Outreach). Additionally, the following positions were added: Financial Officer, Outreach Administrator, Health Services Receptionist, Quality Improvement/Accreditation, and a Dental Assistant.

Currently the organizational chart includes the following positions which it wishes to fill positions in Human Resources and Environmental Services.

Funding Source: Both LB 692 & LB 1060

9. Evaluate and improve programs and interventions.

a. Provide at least two examples of your evaluation activities related to evidence-based public health programs.

Through the newly approved quality improvement plan, the Health Department will begin program evaluations in the next fiscal year.

b. Provide two examples of QI projects that have been completed or are in process.

Healthy Families America formalized a QI project for improving the process to obtain referrals.

Other formal QI projects will begin in the next fiscal year.

Funding Source: LB 692

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

a. Provide at least two examples of evidence-based programs your department is implementing.

The Dental department uses Duraflor® 5% Sodium Fluoride Varnish proven to reduce tooth decay. This product has been shown to release significantly more fluoride to interact with tooth enamel, and at a faster and more effective rate than other fluoride products. It penetrates enamel to strengthen and harden teeth and is virtually non-allergenic. The Dental department also promotes the use of dental sealants on both primary and permanent teeth reducing the rate of tooth decay by 60%.

b. Describe how you have collaborated with researchers to conduct any research studies (e.g., completed surveys, interviews, or focus groups).

The next fiscal year, the Health Department will be participating in two research projects for Healthy Families America.

Funding Source: Choose an item.

STORYTELLING

Highlight at least one significant accomplishment or success story for your department during July 1, 2012 – June 30, 2013. What was the impact of public health on individuals and families in your community? What did you accomplish? (What outcomes or impact did you achieve? Did the success promote efficiency or effectiveness? Does the success link to or support a broader strategic plan, health improvement plan, or specific essential service?)

Adopt-A-BackPack Program

The Health Department helps coordinate the Adopt-A-Backpack program which was initially funded through a Healthy Schools Healthy Kids grant. When grant dollars went away, Health Department staff along with several others wanted to help sustain this valuable family program for our community, so they created the Adopt-A-BackPack coalition. The mission of the Adopt-A-Backpack program is to meet the needs of chronically hungry children by providing them with child-friendly, easy to prepare food over the weekends and over school vacations when other resources are not available. While the Health Department coordinates the logistical piece of program, the program itself is truly a collaborative effort. Last year, the community joined the Health Department in raising more than \$18,000 to continue the program. The Food Bank of the Heartlands provides supplies for backpacks for 20% of the free and reduced meal count for each school. The need for backpacks go beyond the 20% provided so the money raised through the coalition is used to meet the needs of the remaining children.

Each backpack meal contains two breakfasts, two entrée meals, fruit cups and shelf stable milk. The Wal-Mart DC's VAP Program (Volunteerism Always Pays) packs the food and delivers it to the schools. Over 5000 meals were delivered to more than 150 families last school year.













100TH TOUR 2012 - 2013

