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Public Health District

Message from the Board President

Panhandle Public Health District prepares a report detailing news and information important to the public each year. We use the report as a primary way of communicating the Community Health Improvement Plan goals and progress. Over 30,000 copies of this report are distributed to homes and businesses across the Panhandle.

PPHD serves 10 of the 11 counties in the Panhandle and collaborates often with Scotts Bluff County Health Department to improve the heath, safety, and quality of life for all who live, learn, work, and play in the Panhandle. Our work includes efforts in worksite wellness, home visitation, coordinated school health, diabetes prevention, smoke-free environments, children's health, injury prevention, disease investigation and general preparedness. Our strategic plan is represented in the graphic below.



Bob Gifford PPHD Board President

A county commissioner and a community-spirited citizen appointed by the commissioners from each of the 10 counties, a physician, a dentist, and a veterinarian make up the 23 member board. The board meets every other month and holds a day long strategic planning meeting annually. The list of board members is on page 30.

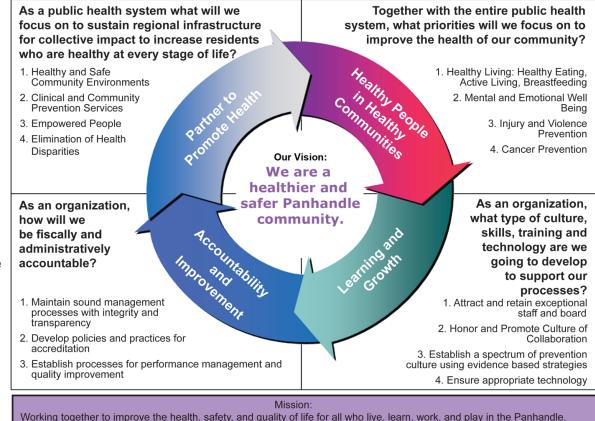
The board of health operates under the Six Governance Functions, as recommended by the National Association of Local Boards of Health.

The six governance functions are:

- policy development
- resource stewardship
- legal authority
- partner engagement
- · continuous improvement
- oversight

We hope you enjoy reading the 2014 Panhandle Public Health District Annual Report. It is a pleasure serving on the board of health and I would like to thank the other board members for their service as well as the excellent and dedicated staff. If you have any questions or comments, please don't hesitate to contact us.

Bob Gifford
Board President
Banner County Commissioner
www.pphd.org



Community Health Improvement

A Community Health Improvement Plan (CHIP) provides guidance to the health department, its partners, and its stakeholders, on improving the health of the population. The plan is based on local assessment activities and is critical for developing policies and defining actions to target efforts that promote health. Partners use the Community Health Improvement Plan to set priorities and coordinate and target resources.



The National Prevention Strategy, aims to guide our nation in the most effective and achievable means for improving health and well-being.

The Strategy prioritizes prevention by integrating recommendations and actions across multiple settings to improve health and save lives.

The Strategy envisions a prevention-oriented society where all sectors recognize the value of health for individuals, families, and society and work together to achieve better health for Americans. For complete details go to http://www.surgeongeneral.gov/initiatives/prevention/strategy/.

The Nebraska State Health Improvement Plan provides a roadmap for the future of public health. The plan focuses on several priority issues including: reducing heart disease, stroke, and cancer; strengthening and expanding health promotion programs in the state; and enhancing the integration of public health, behavioral health, environmental health, and health care services.

The goal is to help people, families, communities and public health agencies work together to improve the health and quality of life for all Nebraskans. For complete details go to http://dhhs.ne.gov/publichealth/Documents/SHIP%20Plan.pdf.

live, learn, work, and play



For a Healthier Panhandle

The Panhandle Community Health Improvement Plan aligns with the National and State Plans with an emphasis on:

- Healthy Living: Healthy Eating, Active Living and Breastfeeding
- 2. Mental and Emotional Well-Being,
- 3. Injury and Violence Prevention, and
- 4. Cancer Prevention.

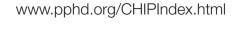
For complete details go to:

http://www.pphd.org/CHIPIndex.html.



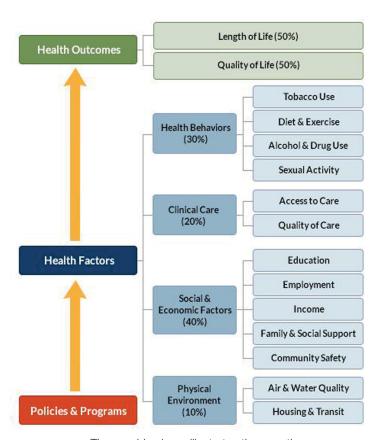
(I-r) John Mentgen, CEO, RWMC; Robin Stuart, CEO, MCCH; Harold Krueger, CEO, CCH; Ken Hunter, CEO, KHS; Todd Sorensen, CEO, RWHS. (Not pictured are Dan Griess, CEO, BBGH; Jim Hansel, CEO, RWGC; Julie Schnell, Interim CEO, GMH; Jason Petik, CEO, SRMC.)

The Rural Nebraska Healthcare Network worked together with PPHD to complete the Mobilizing for Action through Planning and Partnership (MAPP) Process for each of the Nebraska Panhandle hospital service areas during 2014. Each of the hospitals chose priority areas based on their Community Health Needs Assessment and in alignment with the regional Community Health Improvement Plan. The hospitals look forward to working with community partners to optimize health and continue to meet their missions.





Health Rankings



The graphic above illustrates the equation used in the ranking process. <u>www.countyhealthrankings.org</u>

The County Health Rankings measure the health of nearly all counties in the nation and rank them within states.

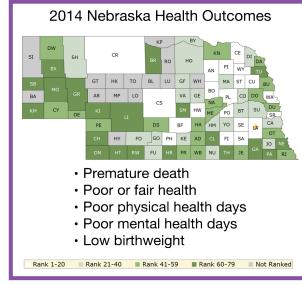
The health of the community is determined by more than just how many people eat right and exercise. Factors such as education, employment, access to care, housing, and transportation play key roles in a person's health.

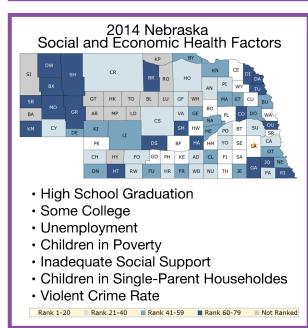
The Rankings are compiled using county-level measures from a variety of national and state data sources.

Partners across the region are working to address the factors that make up our rankings as depicted in the maps at right.

"We are heading in the right direction."
Ali S. Khan, MD, MPH
Dean of UNMC's College of Public Health

Nebraska ranks 10th in a report issued by the United Health Foundation earlier this month. Dr. Khan traveled the state in 2014 to talk with stakeholders about how to improve the state's health indicators. He believes with a real concerted effort we can reach No. 1 by 2020. He is shown at Carhenge during his recent visit.





Working together we can improve the health of the Panhandle by making the healthy choice the easy choice.



Priority Area: Healthy Living Healthy Eating, Active Living, Breastfeeding

Healthy Eating Goals: Increase fruit and vegetable consumption, decrease consumption of high energy dense foods, decrease consumption of sugar-sweetened beverages.

Active Living Goals: Increase physical activity and decrease screen time.

Breastfeeding Goals: Increase breastfeeding initiation, duration, and exclusivity.

Community

Healthy Eating: Community gardens, farmers markets, and Bountiful Baskets are located throughout the Panhandle. Bountiful Baskets is a food coop that offers a produce basket, half fruit and half vegetables, for \$15

Active Living: More and more Panhandle communities are including community planning and design practices to improve physical activity.

Breastfeeding: Hospitals supportive of breastfeeding are on the rise in the Panhandle. Several hospitals offer the services of a certified lactation consultant and WIC programs have peer support.

Worksites

Healthy Eating: Panhandle Worksite Wellness Council members are creating a healthy environment for employees by adopting policies or guidelines on healthful food options at staff meetings, company sponsored events, in cafeterias, and in vending machines. Kitchen equipment is provided for employee food storage and cooking. Employee health and wellness programs, such as National Diabetes Prevention Program are offered.

Active Living: Worksites are encouraging physical activity during breaks by mapping out routes in and around the workplace. Since sitting is the new smoking when it comes to adverse health behaviors, more and more worksites provide walking or standing work stations and on-site exercise equipment for employees.

Breastfeeding: Worksites are supportive of breastfeeding moms by designating a private room to express milk, having refrigeration nearby, and allowing sufficient break times to pump or nurse.

Schools

Healthy Eating: Schools are participating in Coordinated School Health. School Improvement Plans include health-related goals and objectives on nutrition services and foods and beverages available in school. Many Panhandle schools are offering more fruits, vegetables and non-fried foods.

Active Living: Schools are enhancing physical activity opportunities including physical education, after school programs, and implementing recess before lunch. Some have joint use agreements in place so that community members can access gyms and playgrounds for physical activity.

- Nearly 2 in 3 adults are overweight or obese in the Panhandle.
- Fewer than 1 in 4 adults consume five or more servings of fruits and vegetables per day.
- More than 2 in 5 adults do not meet recommended guidelines for physical activity.



www.pphd.org/CHIPIndex.html



Priority Areas: Mental and Emotional Well-Being, Injury and Violence Prevention, Cancer Prevention

Mental and Emotional Well-Being Goals: Increase the quality of life for all ages and reduce child abuse and neglect rates.

Injury and Violence Prevention Goals: Prevent unintentional injuries and violence, and reduce their consequences.

Cancer Prevention Goals: Reduce the impact of tobacco use and exposure on cancer incidence and mortality, increase cancer screening rates, and reduce the exposure to ultraviolet light.

Mental and Emotional Well-Being: Many resources in the Panhandle promote positive childhood development, positive parenting, and violence free homes: Circle of Security Parenting classes, Early Head Start, Healthy Families America, Early Development Network. Families and Schools Together, the Six Pence programs, Community Response, and Alternative Response. Childcare providers are trained to meet new standards. The Federation of Families for Children's Mental Health supports organizations like Speak Out to provide assistance to families and promote early identification and access to services for mental health needs. Mental health care access is increasing with the use of telehealth. A strong respite program is able to provide assistance to care givers.

Injury and Violence Prevention: The Panhandle Prevention Coalition promotes strategies to reduce alcohol related injuries including: alcohol compliance checks, sobriety checks during community celebrations, "Click It or Ticket" campaigns, distracted driving awareness and ongoing training for responsible beverage servers. Area hospitals have fall prevention programs, with some reaching

into the community through medication reconciliations and home assessments. Tai Chi and senior strength building classes are offered in some Panhandle communities. Worksite Safety and Wellness programs promote environmental and policy changes to prevent injury and illness.

Cancer Prevention: Worksites, schools, multi-family housing, community parks, and county fairs are supportive of comprehensive tobacco-free policies. Tobacco compliance checks occur regularly as a strategy to reduce underage tobacco use. Supporting increased referrals to the Quitline to reduce tobacco use is becoming the norm. Clinicians use patient reminders to promote cancer screenings and out-of-pocket expenses are reduced through new insurance regulations. Nebraska passed LB132 making indoor tanning beds off limits to children younger than 16 unless accompanied by a parent or quardian. Tanning facilities must post clear warning signs about the health risks of tanning. All Panhandle pools offer free sunscreen and provide shaded areas for lifeguards and swimmers through the Pool Cool program.



- Injuries resulting from motor vehicle accidents are the leading cause of death for children age 0 to 19.
- 13.8% of youth between 14 and 17 years of age reported having serious thoughts of suicide.
- Smokeless tobacco use in the Panhandle is twice that of the Nebraska average.



Panhandle Worksite Wellness Council

Worksites are making the healthy choice, the easy choice. Adopting a worksite policy, system, or environmental support is a great way to make a healthy place for employees and customers.



of tobacco products.

Everywhere - By everyone - At all times

Gordon Memorial Hospital

 Adopted a tobacco-free policy (including e-cigarettes) for the entire hospital campus, clinic, and nursing home.



Jessica Davies
Panhandle Worksite
Wellness Coordinator



- Adopted breastfeeding policy, room designation with a locked door, and refrigeration.
- Employees are notified of covered lactation services under the city's insurance: breast pump following the birth of the child, prenatal breastfeeding education, postpartum lactation care.





Cirrus House

- Adopted guidelines for food offered at company meetings and events, dietary standards for meal planning, and a healthy beverage policy with 24-hour access to a water source.
- All company social activities and meetings begin with five minutes of physical activity.

Western Nebraska Community College

- WNCC campus representatives, along with Scotts Bluff County Health Department, conducted walkability assessments at the Scottsbluff, Alliance, and Sidney campuses.
- Signs show paths 1/4, 1/2, and 1 mile sections to show easy routes for employees and students walking over a break or lunch hour.



Northwest Community Action Partnership is seeing benefits from being a member of the council.

"We are so happy to be a part of this movement. The council support has transformed our workforce, productivity, attitude, and endurance for the very difficult work that we do!! We appreciate all the assistance you have provided. Also, we are LOVING our walking workstation, it is used for a good chunk of the day."

Karen Harbach, Director



NCAP was the winner of the walking workstation for the National Walk @ Lunch Day promotion the council sponsors each spring.

Pictured on the walking workstation above is Betsy Taylor, NCAP Fiscal Director. Taylor has had tremendous success on her wellness journey through her company's worksite wellness program and shared her success at an NCAP all-staff meeting.

Taylor said, "As I was prepping for the staff presentation, I asked my daughter what benefits she has seen in me. She relayed that I was much happier, had more energy, and was now buying way cuter clothes!" She added, "I have certainly seen a reduction in my stress and am able to think much quicker."

The National Diabetes Prevention Program was offered to their employees through Panhandle Worksite Wellness Council membership at their main Chadron location and using technology to outlying Alliance, Gordon, and Valentine locations.

2015 National Walk @ Lunch Day | April 29

http://www.pphd.org/pwwc.html



Panhandle Public Health District featured in report to the White House and Congress

For the last four years the National Prevention Council (NPC) has submitted a report to the White House and relevant committees of Congress describing national progress toward specific prevention, health promotion, and public health goals defined in the National Prevention Strategy.

"We are honored to be selected as a featured story with other departments and agencies across the nation."

The NPC feature highlights the Panhandle Worksite Wellness Council. The PWWC serves as a conduit to enhance policies, systems, and environmental supports in the workplace so that the healthy choice becomes the easy choice.

Jessica Davies is the coordinator for the PWWC. She provides technical assistance to council member worksites, reaching

over 10,000 employees through roughly fifty employers.

"One in five employed persons in the Panhandle benefits from a variety of these worksite wellness initiatives and we are excited to see that number grow."

Acting Surgeon General Boris Lushniak, MD, shared his excitement about the success stories in the report. "I am thrilled by this progress. We are truly working together to shift the Nation from a focus on sickness and disease to one based on prevention and health. In the process, we are demonstrating the value of prevention approaches that involve diverse sectors of our society working towards common goals.

The full report can be viewed at http://www.surgeongeneral.gov/initiatives/ prevention/2014-npc-status-report.pdf.

Melissa Cervantes is the Worksite Wellness Administrative Assistant for PPHD. Melissa is a 2007 graduate of Hemingford High School. Melissa attended the University of New England and received her Bachelor's Degree of Science in Marine Biology in 2011. She was also able to enjoy some of her favorite activities, which include fishing and hiking, while studying on the New England coast. She is currently working on her Master's Degree of Science in Conservation Biology through the University of Nebraska at Kearney. Melissa is excited to bring new ideas about environmental health to PPHD and work with organizations on healthy habits through worksite wellness.



Melissa Cervantes
Worksite Wellness
Administrative
Assistant



National Prevention.

Public Health Council

Health Promotion, and

The following Advisory Committee Members and businesses graciously give of their time to provide guidance and oversight of the council:

- Executive Chairman Shelley Beguin, Gordon Memorial Hospital
- Secretary/Treasurer Karen Harbach, Northwest Community Action Partnership
- Dan Newhoff, Box Butte General Hospital
- · Lucas Schumacher, Cabela's

Panhandle Public

- Diana Lecher, Chadron Community Hospital
- Carrie Havranek, City of Gering
- Annie Loutzenhiser, FALCO
- Theresa Swank, Gering Public Schools
- · Crystal Smith, Platte Valley Companies
- · Linda Roelle, WNCC

PANHANDLE

WORKSITE

WELLNESS

COUNCIL

Panhandle Safety & Wellness Conference award recipients



Governor Heineman received a leadership award.

Four Panhandle businesses were honored by the Governor and Chief Medical Officer for sowing the seeds for wellness. Jessica Davies, Panhandle Worksite Wellness Council Coordinator, also presented Governor Dave Heineman and Barbara Pearson, DHHS Block Grant Administrator, with awards in recognition of their outstanding leadership in wellness. Davies quoted John Quincy Adams, stating "If your actions inspire others to dream more, learn more, do more and become more, you are a leader."



Brian Coyle accepted the award on behalf of Pearson.

The City of Chadron has a diverse wellness committee with representatives from each city department and has held a variety of wellness challenges. The City recently adopted policy supporting breastfeeding mothers and created a private, comfortable space for use at two of their facilities. The second annual health fair saw a 63% participation increase.

Northwest Community Action Partnership offered the National Diabetes Prevention Program as a benefit of council membership. NDPP has had an exciting impact for employees and the group

is still active and meeting monthly. NCAP also adopted healthy meeting guidelines for all company-sponsored functions.

"We anticipated resistance on not serving pizza or donuts at meetings but the change has been well-received overall! We have been excited with the results of our wellness program, our mental wellness score has increased by 7% in the past year." - Jennifer Sorensen, NCAP HR Director

Sidney Regional Medical Center (SRMC) has devised a pay-as-you-workout program to encourage employees to use the fitness membership benefit. Employees are paid \$5 for each 30 minute gym visit up to three times a week or a \$15 total payout which has worked to increase physical activity levels. SRMC has worked diligently to increase nutritious offerings through the cafeteria, vending, and company-sponsored functions.

"Our Nutrition Services team provides at least half low-fat and healthier items in our café along with readily cut-up fresh fruits and veggies for employees to grab-and-go." - Tammie Brunkow, SRMC Employee Health Nurse



(I-r) – Governor Heineman, Cheri Scott, Stephanie Barker, Trevor Teichroeb, Travis Miller, and Dr. Joe Acierno



(I-r) – Governor Heineman, Wayne Anderson, Karin Fischer, Zach Meyer, Rossella Tesch, Bev Bartlett, Donna Rust, and Dr. Joe Acierno



(I-r) – Governor Heineman, Dana Brennan, Tammie Brunkow, Cathy Arterburn, Donna Phelan, and Dr. Joe Acierno



(I-r) – Governor Heineman, Karen Harbach, Jennifer Sorenson, Sam Fisher, Rachel Johnson, Diane Moore, Floyd Merkel, and Dr. Joe Acierno

2015 Conference | Tuesday, September 22 http://www.pphd.org/pwwc.html





Coordinated School Health

Coordinated School Health is a systems-building process by which schools, school districts, and communities develop capacity and create an infrastructure that supports continuous improvement in health-promoting environments for students and staff. Here is what participating schools are doing in each of the CSH areas.

Sidney After-School Program Strengthens schools, families, and communities.

Bayard Public Schools Received the Governor's Excellence in Wellness Award at the Sower Level for establishing a quality wellness program.

Potter-Dix **Public Schools** Implemented a clear liquids clear bottles policy. This encourages students to stay hydrated by drinking water throughout the day. Putting liquids in clear bottles eliminates the issue of students trying to drink sugary drinks that can lead to cavities.

Minatare Public Schools Offers healthy vending.

Chadron Public Schools Offered a day-long Mental Health First Aid Training to ALL school employees training them on mental health signs and symptoms, warning signs, and procedures for crisis situations with a refresher training at the beginning of the school year.

Coordinated School Health benefits the entire school and in return the entire community.

Potter-Dix Public Schools Provided asthma training outlining symptoms of an asthma attack for all staff led by the school nurse. Procedures for nebulizers and epi-pens were covered.

Banner County Public Schools Provides education on MyPlate and reinforces the Health importance of moderation. Education

School Health

Services

Physical Education

CSH is a vehicle for school improvement —improving students' academic performance and overall well-being by promoting health in a systemic way.

Healthy School Environment

Family &

Community

Partnerships

Employee

Wellness

Counseling, Psychological, & Social Services

Garden County Public Schools

Students receive yoga brain breaks in the classroom provided by Cheri Farris, RYT, with Volunteers of America, while she is providing nutrition education and overall wellness promotion.

> Mitchell Public Schools Provides students with a health report card.

Chadron Public Schools Offers a "Grab & Go" breakfast in the high school as well as the regular breakfast hot meal before school. Between 1st and 2nd block the "grab and go" is offered to increase breakfast participation.

Gordon-Rushville Public Schools Salad

Nutrition Services

bar available for all students.



Prediabetes in the Panhandle

People living with prediabetes in the Panhandle

33% and growing



over 22,000 people more than 1 out of 3 adults - have prediabetes

9.1% of adults have diabetes



WAYS TO PREVENT OR DELAY TYPE 2 DIABETES

Eat Healthy

Manage Weight















Timing is everything it seems. Just before last Christmas our son proposed to the beautiful woman who is now his bride. The thought of myself in wedding photos gave me a pronounced sense of dread. I didn't want to be a disappointment to them and I wanted to be able to enjoy the pictures from their day without the reminder of my unhealthy weight.

The number one thing that made NDPP successful over anything else I had ever tried was the manner in which the class helped us make small steps regularly in making lifestyle changes.

Each session we talked about putting small things into practice in a way that was not difficult or embarrassing. We started logging. We started moving. We started talking. We started reading labels before buying. We started sharing. We weighed regularly. And we started to melt.

When I was able to meet the first goal of 7% weight loss I thought, "Wow! This is it, I've done it. Let's keep going and see what happens." So I did. I kept going. I was going farther and walking longer. I kept melting. It was wonderful.

The wedding has come and gone. It was a beautiful day and I felt as though I belonged with the finery. The best part is that after years of putting everyone else in my life first, I started taking care of myself, too.

> "I'm a loser and it feels great!" - NDPP participant



•

National Diabetes Prevention Program in the Panhandle



The National Diabetes Prevention Program in the Panhandle is reducing the number of residents at risk for type 2 diabetes and chronic illnesses. This evidence-based program is proven to lower the risk of type 2 diabetes (high blood sugar) by 58%.

NDPP is a year-long lifestyle change program. People at risk for type 2 diabetes meet as a group with a trained Lifestyle Coach. During the program, group members learn ways to add healthy eating and physical activity into their daily lives. NDPP has two main goals: lose 5%-7% of starting body weight and be physically active for 150 minutes a week.

The group meets weekly for 16 weeks, then monthly for the rest of the year. Through the program, group members track their food and activity. They also work with the Lifestyle Coach and the group to overcome obstacles to a healthy lifestyle, including stress reduction and coping skills.

Diabetes is greatly affecting the health and

economy of the U.S. One in 9 adults has diabetes. One in 5 health care dollars is now spent caring for someone with diabetes.

The Centers for Disease Control and Prevention estimate that if trends carry on more than 1 in 3 Americans could get diabetes. Medical costs for people with diabetes are more than two times higher than for people without diabetes. Every dollar PPHD spent on NDPP in the Panhandle in the startup phase and the first year, resulted in \$28 in benefits.

"We are seeing tremendous success in the Panhandle; people are losing weight and changing their lives."

Contact NDPP Regional Coordinator Tabi Prochazka to register for a class in your community.

NDPP Success

12 Business Classes completed the 12 month program in 2014

Over 900 pounds were lost 160 participants

Success Since 2012

36 Community classes

13 Business classes

457 participants

Over 2,700 pounds lost

33 Lifestyle coaches

11 counties covered

Know your risk fo	or prediabetes. Answ	er these quick questic	ons.		Yes	No
Are you a woman that had a baby weighing more than 9 lb at birth?			1	0		
Do you have a brother or sister with diabetes?			1	0		
Do you have a parent with diabetes?			1	0		
Find your height on the chart. Do you weigh as much as or more than the weight listed for your height?			5	0		
4'10 - 129	5'2 - 147	5'6 - 167	5'10 - 188	6'2 - 210		
4'11 - 133	5'3 - 152	5'7 - 172	5'11 - 193	6'3 - 216		
5'0 - 138	5'4 - 157	5'8 - 177	6'0 - 199	6'4 - 221		
5'1 - 143	5'5 - 162	5'9 - 182	6'1 - 204			
Are you younger t	han 65 and get little o	r no exercise in a typic	al day?		5	0
Are you between 45 and 64 years of age?			5	0		
Are you 65 years of age or older?			9	0		
0-8 low risk 9+	high risk you qualify	for NDPP		Add your Score:		





Tobacco-Free in the Panhandle

Tobacco use remains the single largest preventable cause of disease and premature death in the US, yet over 10,000 Panhandle residents still smoke cigarettes. As of 2013, 21.1% of males in the Panhandle, twice as many as the state average, use smokeless tobacco — another dangerous and addictive form of tobacco.

There is no risk-free level of exposure to secondhand smoke.

Secondhand smoke can cause numerous health problems in infants and children, including:

- more frequent and severe asthma attacks
- · respiratory infections
- · ear infections, and
- sudden infant death syndrome (SIDS).

Health conditions caused by secondhand smoke in adults include:

- · coronary heart disease
- stroke, and
- lung cancer.

Smoking during pregnancy results in more than 1,000 infant deaths annually.

Most American adults who smoke wish they could quit, and more than half have tried within the past year.

"Quitting is hard, but research shows that smokers who have support are more likely to quit for good. Nebraska has a number of excellent resources to help people quit, including the free and confidential Nebraska Tobacco Quitline at 1-800-QUIT-NOW."

Research shows that when communities consistently conduct compliance checks and keep failure rates below 10%, children in those communities are less likely to use tobacco products. Compliance checks happen twice a year in partnership with the Nebraska State Patrol, Scottsbluff Police Departments and Scotts Bluff County Sheriff's Office. Compliance rates have been above 90% since 2011.



Tabi ProchazkaTobacco-Free in the Panhandle
Coordinator

Tobacco-Free in the Panhandle, a partner in the Panhandle Prevention Coalition, promotes tobacco-free and smoke-free polices to make the Panhandle healthier. Reducing tobacco use is a winnable battle.

Outdoor Venues County Fairs Outdoor Recreational Facilities Pools and Parks

These policies give adults the chance to be tobaccofree role models for youth. While these policies are established to enhance the public's health, they also decrease litter in the parks and lower the risk of fire caused by discarded cigarette butts.

Multi-Unit Housing

Smoke-Free housing list:

http://www.pphd.org/tfnHousingAptList.html

Landlords are quick to know the benefits of having a smoke-free property. Apartments are more easily rented, fire hazards are reduced, and the costs of cleaning an apartment are less than for one rented to a smoker.

Schools

86% of Panhandle schools have a tobacco-free policy including school parking lots and sports fields.
95% of the schools have a policy prohibiting tobacco use on school grounds.

Schools have been smoke-free for years. Many are now extending the effort to include tobacco-free policies campus-wide, including e-cigarettes.





Make your life smoke-free

Tobacco Quitline

1-800-QUIT-NOW

Businesses

- Tobacco-free campus policies
- 15' from the entryway policies
- · Tobacco-free childcare facility policies
- · Tobacco-free worksite policies
- Smoke-free campus policies

We know that only smoke-free air laws provide effective protection from secondhand smoke.

Technical assistance is available to anyone wanting to pass a policy. Posting a sign prohibiting tobacco use raises awareness and is a vital part of enforcement.

Contact Tabi Prochazka for technical assistance and signage.



www.pphd.org/tfn.html

BENEFITS OF QUITTING . . .

20 minutes after quitting

Your heart rate and blood pressure drop.

12 hours after quitting

The carbon monoxide level in your blood drops to normal.

2 weeks to 3 months after quitting

Your circulation improves and your lung function increases.

1 to 9 months after quitting

Coughing and shortness of breath decrease; cilia (tiny hair-like structures that move mucus out of the lungs) start to regain normal function in the lungs, increasing the ability to handle mucus, clean the lungs, and reduce the risk of infection.

1 year after quitting

The excess risk of coronary heart disease is half that of a continuing smoker's.

5 years after quitting

Risk of cancer of the mouth, throat, esophagus, and bladder are cut in half. Cervical cancer risk falls to that of a non-smoker. Stroke risk can fall to that of a non-smoker after 2-5 years.

10 years after quitting

The risk of dying from lung cancer is about half that of a person who is still smoking. The risk of cancer of the larynx (voice box) and pancreas decreases.

15 years after quitting

The risk of coronary heart disease is the same as a non-smoker.

These are just a few of the benefits of quitting smoking for good. Quitting smoking lowers the risk of diabetes, lets blood vessels work better, and helps the heart and lungs. Quitting while you are younger will reduce your health risks more, but quitting at any age can give back years of life that would be lost by continuing to smoke.

BREATHE IT LOVE IT | LIVE IT





Cancer Prevention



Becky Corman, RN *Public Health Nurse*

Colorectal cancer in Nebraska ranks among the top in the nation for its high incidence and death rate. Did you know that you can stop colorectal cancer before it starts? Take the time to get screened for colon cancer today.

Having regular screening tests beginning at age 50 could save your life. Colon cancer almost always develops from precancerous polyps in the colon or rectum. Screening tests find these abnormal growths early, when treatment works best, and the chance for a full recovery is very high.

PPHD is working with partners in the Panhandle Cancer Coalition and the Nebraska Colon Cancer Screening Program to raise awareness about screening for colon cancer by giving out FREE fecal occult blood test (FOBT) kits to Panhandle residents age 50 and older.

"We want to make a difference in the lives of our community members, their families, and friends," said Becky Corman, Registered Nurse with PPHD and coordinator of the Panhandle Cancer Coalition. An FOBT kit is free and simple and can be completed in the privacy of your own home.

7 Steps to Lowering Your Risk of Colon Cancer

- 1. Get regular colon cancer screening tests beginning at age 50.
- 2. Eat a diet rich in fruits and vegetables and whole grains from breads, cereals, nuts, and beans.
- 3. Eat a low-fat diet.
- 4. Eat foods with folate such as leafy green vegetables.
- 5. If you use alcohol, drink only in moderation.
- 6. If you use tobacco, quit. If you don't use tobacco, don't start.
- 7. Exercise for at least 30 minutes three to four days each week. Moderate exercise such as walking, gardening, or climbing steps may help reduce your risk.



New Tanning bed legislation will protect youth from the dangers of ultraviolet light exposure. On March 28, 2014, the Governor signed LB132 into law. This bill set an age limitation to indoor tanning bed use. No one younger than 16 is allowed to use an indoor tanning bed without a signed statement or accompanied by a parent or legal guardian.

Melanoma, the deadliest form of skin cancer, is the most common cancer of young women and the second most common cancer in high school students. There is no such thing as a safe tan. Any color the skin develops is a direct result of DNA damage which increases the risk of skin cancer.

Janelle Hansen, Health Educator with PPHD, urges ladies to embrace their natural skin tone and to use a sunless tanner to produce an even "tan" look without causing skin damage.

Hansen noted, "We realize many proms and graduations are happening around the area, but urge youth to consider indoor tanning just as dangerous as smoking."



Panhandle Prevention Coalition

The Panhandle Prevention Coalition is a part of the Panhandle Partnership for Health and Human Services, united together by passion and dedication to healthy and safe people across the lifespan.

Efforts include, but are not limited to, reducing underage drinking, binge drinking, drinking and driving, tobacco prevention, and prescription drug abuse in the Panhandle.

The PPC raises awareness of current social norms and trends while seeking to change social context and individual behaviors around substance use and abuse. The PPC works collaboratively with many partners to open discussions, educate, initiate policy change, and mobilize resources for to change community norms.

Here's what you can do:

- Talk early and often to your kids about not using tobacco, alcohol, and other drugs. Create clear expectations.
- Always enforce the minimum drinking age of 21.
- Call law enforcement if you suspect underage parties or drinking and driving at any age at 1-888-MUST-BE-21.
- Thank law enforcement for providing compliance checks and responsible alcohol and tobacco training.
- Involve youth in planning and implementing healthy activities.

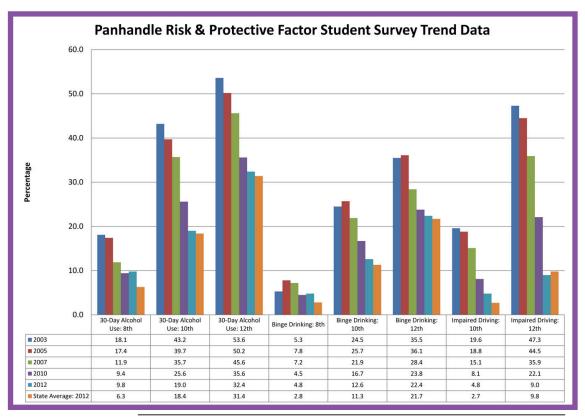
"Prevention is an active process of creating conditions and fostering personal attributes that promote the well-being of people." William Lofquist

Data trends are moving in the right direction. Since 2003, the Panhandle has significantly narrowed the gap between Panhandle rates and state rates.

30-day alcohol use among 10th graders has fallen by more than half from 43.2% to 19.0%. Use rates for 12th graders has significantly decreased from 53.6% in 2003 to 32.4% in 2012.

Binge drinking among 10th graders has fallen by almost half from 24.5% to 12.6%. Binge drinking for 12th graders has significantly decreased from 35.5% in 2003 to 22.4% in 2012

Impaired driving among 10th graders has reduced dramatically from 19.6% to 4.8%. Impaired driving for 12th graders has also fallen dramatically from 47.3% in 2003 to 9.0% in 2012.



Healthy Families America



Healthy Families America Nebraska Panhandle (HFA-NP) is very honored and excited to announce it became a Nationally Accredited Organization 2014. The HFA accreditation is public recognition by Prevent Child Abuse America that a home visitation program is following best practice standards as established by over 20 years of research into what really

works in intensive home visitation. It represents a strong commitment to delivering the highest quality services possible to families and children. This is a high honor and an achievement that truly recognizes our entire staff for the incredible work put forth within our communities. Congratulations Healthy Families America Nebraska Panhandle!



"My Parenting Coach is awesome! She is teaching me how to have a great relationship with my children as well as how to help them stay on track developmentally, socially and emotionally."

"My Coach is like part of the family. She helps me get connected to community resources and answers every question I have about raising my child."



For more information contact
Melissa Galles
mgalles@pphd.org
www.pphd.org/hfa.html
308-633-2866 | 877-218-2490





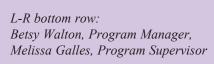






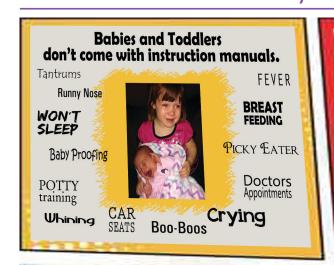


Parenting Coach/Intake Specialists (l-r top row): Linda Ainslie, Sandra Babin, Jennifer Eversull, Myrna Hernandez, Bernadette Sanchez





Healthy Families America: "The Instruction Manual"



WHAT HAPPENS WHEN PARENTS DON'T KNOW:

What to do?

What to ask?

Who to ask?





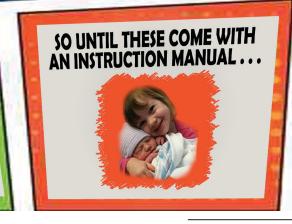
Nebraska Panhandle

"The Instruction Manual"

Last year, over 90 parents and 84 children participated in the Healthy Families America Nebraska Panhandle program in Scotts Bluff, Morrill and Box Butte Counties.

FAMILIES in HFA: • Participate in home visits

- Learn positive parenting skills and gain knowledge of their child's development
 - Attend fun filled, family-focused group activities, gaining positive social connections
- Receive resources to other services within our communities for concrete support in times of need
 - Cultivate and strengthen nurturing parent-child relationships







Life matters: working together to raise suicide awareness

In September people throughout the Panhandle participated in the Out of the Darkness Community Walks in Sidney, Alliance and Scottsbluff. The walk's primary goal is to raise awareness of the devastating effects of suicide and to raise funds for local and national suicide prevention and awareness programs.

Suicide is a public health concern and is plagued by silence and stigma that continue to be barriers for seeking help. These walks help bring suicide out of the darkness and raise money for education, prevention and awareness programs.

One in four people live with a mental health condition. This means that someone you know has, or probably had, thoughts of suicide. We never know what another person is going through. This is a public health issue that does not discriminate by age, gender, ethnicity, or socioeconomic status.

The Suicide Prevention Lifeline is a number you can call if you have a friend, neighbor or co-worker who is struggling and you are wondering how to be supportive. 1-800-273-8255 is the number to call if you are ever in a crisis.

Suicide leaves behind countless family members and friends wondering, "Why did this happen?" "How will I get through it?"



The Panhandle Suicide Prevention Coalition meets to increase awareness of suicide and offer a support system for survivors of suicide. To join the local effort contact Janelle Hansen.



If you or someone you know is considering suicide, contact the National Suicide Prevention Lifeline at 1-800-273-8255 (TALK).

Risk Factors for Suicide

A combination of individual, relational, community, and societal factors contribute to the risk of suicide. Risk factors are those characteristics associated with suicide – they may or may not be direct causes.

- family history of suicide
- family history of child maltreatment
- previous suicide attempt(s)
- history of mental disorders, particularly depression
- history of alcohol and/or substance abuse
- feelings of hopelessness
- impulsive or aggressive tendencies
- cultural and religious beliefs (e.g., belief that suicide is a noble resolution of a personal dilemma)
- local epidemics of suicide
- isolation, a feeling of being cut off from others
- barriers to accessing mental health treatment
- loss (relational, social, work, or financial)
- physical illness
- easy access to lethal methods
- unwillingness to seek help because of the stigma attached to mental health and substance abuse disorders, or to suicidal thoughts





Community Health



2015 Panhandle 5K | Saturday, May 16

Girls on the Run is a physical activity-based positive youth development program for girls in grades 3-8. The program teaches life skills through dynamic, interactive lessons and ends with a celebratory 5k. The overall goal is to build confidence and establish a lifetime appreciation of health and fitness.

Linda Rischling has worked to expand Girls on the Run to interested communities around the Panhandle. She began the program for Chadron area youth in 2013, expanded to Hemingford, Hay Springs, Scottsbluff, Rushville, and Crawford in 2014, and they are working to expand to other communities in 2015.

"There are so many wonderful, positive messages provided during the twice-a-week program sessions. Running is simply the platform for delivering those positive messages to the girls."

PPHD is proud to be the lead sponsor for the 5k held in May in Chadron. More than 500 coaches, participants, run buddies, and area community members participated in 2014.

Sign up for Girls on the Run in your community at gotrnebraska.org. Anyone interested in assisting with the efforts in their community can contact Rischling at 308-430-4122 or linda.rischling@ chadronschools.net. Watch for more information!

The NuVal System was developed by nutrition and medical experts to help consumers see – at a glance – the nutritional value of the food they buy. The system scores food on a scale of 1-100. The higher the NuVal Score, the better the nutrition. It's that simple. The following Panhandle grocers offer this helpful system:

Alliance Grocery Kart

 \bigoplus

- Bridgeport Sonny's Super Foods
- Chappell Super Foods
- Gering Fresh Foods
- Gordon Super Foods
- Hay Springs J & L Grocery
- Hemingford Raben's Market

- Kimball Main Street Market
- Morrill DL Foods
- Oshkosh Superette
- Rushville Ideal Market
- Scottsbluff Main Street Market
- Sidney Sonny's Super Foods







The NuVal System does the nutritional heavy lifting so you don't have to.

www.pphd.org

Children's Health



Janelle Hansen Health Educator

Dental Day was held in June for the eleventh consecutive year. Students from the University of Nebraska Medical Center (UNMC) College of Dentistry headed west to be a part of Dental Day. A total of 231 children without dental insurance were treated in Sidney, Alliance, Gordon, and Chadron.

UNMC Participation: 44 students studying dentistry and dental hygiene, 7 dental residents, and 9 faculty members. Panhandle Sites: Gordon Memorial Hospital, Box Butte General Hospital, CAP-WN Dental Clinic in Chadron, Dr. Maxwell and Dr. Wilcox in Alliance, Life Smiles-Dr. Hlavinka and Summit Dental-Dr. Neal in Sidney.

Recruiting appropriate kids and scheduling pre-screening appointments are essential to the success of this event. School nurses and dental office staff play a key role in completing these processes. Other dentists participating in the pre-screenings include: Dr. Jacoby in Bridgeport and Hemingford, Dr. Jensen in Oshkosh, Dr. Giles and Dr. Christensen in Alliance, and Horizon West Dental Clinics in Crawford, Alliance, and Rushville.

Kids Fitness and Nutrition Day was held in Alliance, Sidney, and Chadron for third graders for the eighth consecutive year. Almost 500 third graders attended the event from ten counties in the Panhandle.

Kids Fitness and Nutrition Day consists of 13 stations for students to visit: six stations are nutrition based, and seven are non-competitive physical activity stations. This event is sponsored by the Nebraska Beef Council, University of Nebraska at Kearney, and PPHD.

Scrub Club is aimed at Pre-K thru 4th graders and teaches healthy habits through good hand washing. Scrub Club has been seen by thousands of youngsters across the Panhandle.

Only one in three adults washes their hands after using a public restroom. Washing your hands, an easy act you learned as a toddler, can stop many sicknesses from the common cold to serious infections. Today's children are learning how through Scrub Club.

Although hand washing is a year-round act, Hansen mainly visits day cares, preschools and elementary schools in the late fall and early winter. This is a great time to teach good hand washing habits as a key step to avoiding illnesses like the cold and flu. The message behind hand washing is the importance of being healthy overall.



"Dental Day was a great success. 231 kids got the necessary care Dental Day provides, plus the UNMC students gained great clinical experience."

www.pphd.org





Preparedness

Communicable Disease	2	
Panhandle Public Health District	2014	2013
Animal Exposure (bite or nonbite)	18	8
Aseptic meningitis	3	0
Campylobacteriosis	8	11
Cryptosporidiosis	4	2
Giardiasis	3	1
Haemophilus influenzae, invasive	1	0
Hepatitis A, acute	0	1
Hepatitis B Virus Infection, chronic	1	1
Hepatitis C Virus Infection, chronic or resolved	24	26
Influenza, human isolates	0	1
Legionellosis	1	0
Lyme Disease	1	0
Pertussis	21	10
Rabies, animal	1	6
Rheumatic fever (Acute)	0	1
Salmonellosis	5	2
Shiga toxin-producing Escherichia coli (STEC)	5	3
Shigellosis	3	0
Spotted Fever Rickettsiosis	0	1
West Nile Fever	4	17
West Nile, Encephalitis/meningitis	1	1
Shigellosis	3	0
Spotted Fever Rickettsiosis	0	1
West Nile Fever	4	17
West Nile, Encephalitis/meningitis	1	1
Total confirmed, probable and suspect cases	104	93



Communicable disease surveillance involves early detection, prompt investigation, and monitoring the occurrence and distribution of disease. Timely recognition of a disease within a community coupled with rapid investigation enables the proper implementation of prevention and control activities. These activities can contain the spread of disease within the population, reducing the risk of disease transmission before an illness becomes a major public health crisis.

Communicable disease surveillance includes but is not limited to: foodborne illness, vaccine-preventable diseases, influenza, and vector borne and animal related diseases such as rabies and West Nile virus.

Through communicable disease surveillance, PPHD works to protect individuals and families from disease and control spread throughout our communities.

Effective surveillance systems also play a role in identifying emerging infectious diseases, acts of bioterrorism, and potential influenza pandemics, as well as providing a basis for evaluating the outcome of public health prevention programs.

Pertussis, also known as whooping cough, is a very serious illness that affects the lungs and breathing tubes, causing violent coughing. It is easily spread to other people through the air by coughing and sneezing. It is most harmful for young babies and can be deadly. Vaccines are the best tool for prevention.

What happens at the national level affects us at the local level. Following the introduction of pertussis vaccines in the 1940s when pertussis case counts frequently exceeded 100,000 cases per year, reports declined dramatically to fewer than 10,000 by 1965. During the 1980s pertussis reports began increasing gradually and by 2013 more than 28,000 cases were reported nationwide. In 2014 there were more than 300 cases of pertussis reported in Nebraska. At least 8 (clusters) outbreaks were identified, most of which were school-based. Since widespread vaccine use, this is the highest number of reported cases in Nebraska since 2005 when there were 311 cases reported. At the local level, we have seen an increase in pertussis cases over the past several years. In PPHD's jurisdiction there were 0 cases of pertussis reported in 2012, 10 in 2013 and 21 cases in 2014. The majority of these cases occurred in school- aged children.

"An ounce of prevention is worth a pound of cure" —Benjamin Franklin



Panhandle Region Medical Response System



Melody Leisy, RN
PRMRS Coordinator

'Safety and Security' is priority for our Panhandle hospitals in 2014. Work teams from each of the hospitals that make up the Panhandle Region Medical Response System released standardized Emergency Code Recommendations. The Panhandle Regional Medical Response System is the first region in the state to release the recommendations.

The committee's mission was to address the lack of uniformity among emergency code systems utilized at different healthcare facilities. The committee utilized best practice recommendations moving from color coded systems to plain language announcements, bringing benefit for emergency response. Adopting code uniformity enables the numerous individuals who work across multiple facilities to respond

appropriately to specific emergencies, enhancing their own safety, as well as the safety of patients and visitors. To facilitate code uniformity, the committee developed a standardized set of uniform codes and guidelines that can be adopted by all health care facilities. These guidelines offer a flexible plan that is customized to the specific facility to assist in responding to emergencies and the development of their own specific policies and procedures.

Employee training, staff education, and competency assessments are in different stages at each of the hospitals as they make the transition. Public visiting the facility will have better understanding of the emergency taking place and any immediate directions to help protect themselves in the event of an active shooter, fire, or other public threats.

"In one instance at a local hospital, a missing child was located quickly by using the announcement overhead, 'Missing Child + Description + last known location'. This allowed staff and public to quickly keep their eye out and assist the child with reunification with their family."

Before the change in practice, a "color" code would have been announced, "Code Pink" which would leave the response only to those trained and maintained competency among the facility staff. The updated guide ensures compliance and conformity to the National Incident Management System (NIMS), Hospital Incident Command System (HICSi), The Joint Commission and other regulatory and accrediting agencies.

Panhandle Region Medical Response System (PRMRS) partners include, Box Butte General Hospital, Chadron Community Hospital, Regional West Garden County, Gordon Memorial Hospital, Kimball Health Services, Morrill County Community Hospital, Region West Medical Center, Sidney Regional Medical Center, Panhandle Public Health District, Scotts Bluff County Health Department, Region I Behavioral Health, Community Action Partnership of Western Nebraska, and local EMS and Emergency Management.



Emergency Code Recommendations

Event FIRE ALARM

Recommended Plain Language FIRE ALARM + LOCATION

> Color Code CODE RED

EVENTMEDICAL EMERGENCY

Recommended Plain Language CARDIAC ARREST +

CARDIAC ARREST + LOCATION

> Color Code CODE BLUE

These are just a few samples

www.pphd.org/prmrs.html





Take these steps today

- Call a family meeting and review/make a plan
- Determine an out of town family contact
- Text, Don't talk!
- Check your preparedness kit for expired items?
- Develop a communications plan: www.pphd.corg/PersonalPrepardness.
 html

Emergency Kit Contents:

- Water, one gallon of water per person per day, for drinking and sanitation
- A three-day supply of non-perishable food
- Battery-powered radio and a NOAA Weather Radio with tone alert, and extra batteries for both
- Flashlight and extra batteries
- · First Aid kit
- · Whistle to signal for help
- Infant formula and diapers, if you have an infant
- Moist towelettes, garbage bags and plastic ties for personal sanitation
- Dust mask or cotton t-shirt, to help filter the air
- Plastic sheeting and duct tape to shelter-in-place
- · Wrench or pliers to turn off utilities
- Can opener for food (if kit contains canned food)

Are you prepared?

Make a plan for what to do in the case of an emergency. Your family may not be together when a disaster strikes. It is important to plan in advance: how you will get to a safe place, how you will contact one another, how you will get back together, and, what you will do in different situations.

Emergencies can happen any time.
Being prepared can make a difference and save lives!

Are you a Preparedness superhero?

Do all family members know their address and phone number?
Do all family members know when and how to call 911?
Does your family have a meeting spot outside the home?
Does your family know who to contact to check in? One in
state contact and one-out-of-state contact.
Do all family members have the numbers memorized?
Are emergency numbers posted and easily accessible?
Have you checked your smoke detector and carbon monoxide detector in the last 6 months?
Do you have a fire extinguisher? Do all family members know where it is and how to use it?
Is your water heater set at or below 120 degrees F?
Do you have enough supplies to survive a few days if stores shut down? (food, water, diapers)
Do you have an Emergency Kit prepared? Do you have one in your car?
Do you have flashlights and extra batteries?
Do you have an emergency plan? Have you practiced it?
Do you know where to go in the case of a tornado?
Do you have a family communications plan?

14-15 checked Preparedness "Gung-Ho SUPERHERO"!
10-13 checked Preparedness "Quicksilver Dazzler"
5-9 checked Preparedness "Bullseye Rumbler"
1-4 checked Preparedness "Doomsday Frenzy"
O checked Preparedness "Longshot Misfit"



Environmental Health

Radon is a preventable cause of death, though you cannot see, smell, or taste it. Testing is the only way to know if a home has radon, a naturally occurring gas that is harmless in outdoor air, but can be dangerous when trapped in your home.

Most people know that smoking is the leading cause of cancer. What they may not know is radon is the second leading cause of lung cancer in smokers, and the leading cause of lung cancer in non-smokers.

The Environmental Protection Agency estimates about 21,000 lung cancer deaths per year are due to coming in contact with radon.

Half of the homes in Nebraska have high radon levels. The only way to know is to test.

Free Lifesaving Radon Test Kit

Get your free radon test kit from PPHD by emailing mcervantes@pphd.org, mailing this coupon to Panhandle Public Health District, PO Box 337, Hemingford NE 69348, or calling (866)701-7173.

Be sure to tell us you received this coupon in the annual report!

Name:	and the same of th
Physical Address:	The second
Mailing Address:	_ 220
City:	Zip:
Phone Number:	

By requesting a free kit,
I give my permission for results to be reported to myself and PPHD.

*Must reside within the Nebraska Panhandle to receive free kit.

Houses next to each other can have very different radon levels. Radon is found in all types of homes: new and old, well-sealed and drafty, with or without basements, and with any kind of heat source. Luckily, there are easy ways to lower levels of radon in homes through mitigation.

PPHD recommends Radon Resistant New Construction (RRNC) when building a new home. In most cases a basic radon reduction system lowers radon levels to below the recommended action level of 4 pCi/L. The cost of RRNC is much lower than the cost to fix a pre-existing home with raised levels of radon.

RRNC techniques also keep moisture and other soil gases from coming in the home.

is National Radon Januarv Action Month to raise awareness of the health risks posed by radon. PPHD offers free test kits to Panhandle residents. Many communities make a proclamation and the Panhandle Worksite Wellness Council promotes testing for radon.



Protect your family.

- Use a mosquito repellent that contains DEET.
- Wear long-sleeved shirts, long pants, shoes, and socks.
- Take extra precautions at dawn and dusk.
- Get rid of standing water.
- Add larvicides to animal drinking troughs, water gardens, ornamental fountains, ditches and ponds.
- Keep window screens in good repair.

With the arrival of sun, summer, barbecues, and evening walks, came the return of mosquitoes and West Nile Virus surveillance activities.

PPHD 2014 surveillance activities detected:

- 17 cases of West Nile Fever and 1 case of West Nile Encephalitis/meningitis
- 1 positive mosquito pool in Dawes County, 5 in Sheridan County and 3 in Garden County

Request a free radon test kit, or if you still have a kit you requested earlier, test your home, and send the kit in. To request a kit email mcervantes@pphd.org.



The Panhandle Partnership for Health and Human Services is non-profit and membership based. PPHHS strives for collective impact for thriving and equitable communities.

The Training Academy, is a collaboration between the Panhandle Partnership, Western Nebraska Community College, and PPHD. The mission of the Training Academy is to build an upwardly mobile workforce with local talent by providing credible, meaningful, consistent and affordable training that results in an extraordinary service system.

Plans are already underway for courses in 2015. They include Coming Together: Innovations for Economic and Social Change, Advanced School Resource Officer, Youth Mental Health First Aid, Bridge Out of Poverty, Excellence in Early Childhood, Responsible Beverage Server Training, and Training for International Procedures.

Some examples of courses offered in 2014 to Partnership members are Circle of Security, Motivational Interviewing, Youth Leadership,

Mental Health First Aid, Childcare Provider Early Learning Guidelines, Social Entrepreneurship Concepts and Application, People are People, Darkness to Light - Stewards of Children, Impact of Toxic Stress on the Developing Child, School Resource Officer, and Responsible Beverage Server Training.



Brook Raschke 2014 Training Academy Coordinator

Panhandle Partnership for Health and Human Services

Circle of Security is an internationally - acclaimed parenting program. Join parents, just like you, who are interested in a straight-forward way to strengthen the parent-child



relationship. Circle of Security is backed by 50 years of research in attachment theory.

The more secure a child is, the more he or she is able to:

- Obtain higher self-esteem
- Be happy
- Create strong relationships with parents, friends and siblings
- Trust the people they know and love
- Be kind to others
- Solve problems with friends
- Feel less anger toward their parents
- Solve problems on their own
- Feel confident that there is always a solution

You will learn:

- The importance of the parent-child relationship and how to keep it strong
- How to be the best parent you can be, how to manage your child's emotions and your own response to them
- Step-by-step ways to develop secure attachments with your child that will last a lifetime
- How to "be present" with your child during the best and toughest of times.

Circle of Security® interactive parent sessions are offered in your Nebraska community.

- Don't wait! Seating is limited and classes are in high demand.
- New or veteran parents welcome.
- Strengthen your relationship with your child without ignoring his or her struggles.

To register visit: panhandlepartnership.com/circle-of-security.html.



Financial Statement

Balance Sheet as of June 30, 2014

Assets

Cash and equivalents	\$218,876
Accounts receivable	\$279,338
Inventory	\$19,421
Certificate of deposit	\$225,402
Property and equipment,	
net of depreciation	\$83,881
Total Assets	\$826,918

Liabilities

Accounts payable	\$40,365
Accrued payroll liabilities	\$65,107
Total Liabilities	\$105,472

Net Position

Invested in capital assets	\$83,881
Unrestricted	<u>\$637,565</u>

Total Net Position \$721,446

Total Operating Revenues \$1,511,286 Total Operating Expenses \$1,523,462

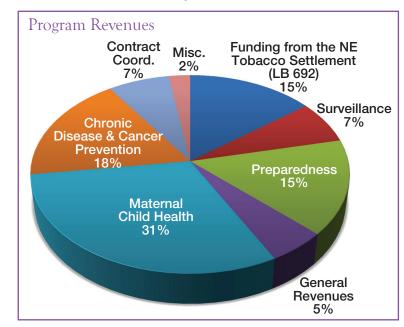


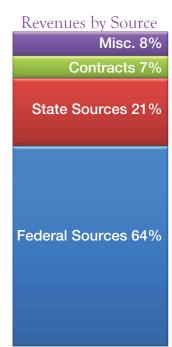
Sara Hoover CFO, Accreditation Coordinator



Erin Sorensen
Office Manager,
HR Coordinator

Where does the money come from . . .



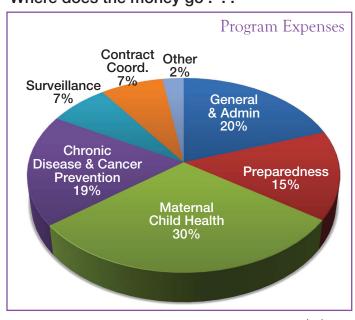


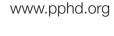
Expenses by Source



Employee Expenses 51%

Where does the money go . . .







Accreditation

Health departments across the nation are working toward a new goal – national accreditation. Joining the ranks of hospitals, schools, law enforcement and other professional agencies, public health now has an accreditation board.

Accreditation through the Public Health Accreditation Board, known as PHAB, became available in late 2011. As of December 2014, 60 departments in the United States have become accredited. The accreditation status is in place for 5 years, after which departments will complete the application process again.

What is accreditation?

Accreditation standards set the guideline for optimum performance by an agency. Public health accreditation is measured by 12 domains, comprised of the 10 Essential Services of Public Health and two additional domains on administration and management and department governance. Quality improvement is a key component of public health accreditation.

Why is accreditation important?

Public health accreditation is intended to assure that health departments are assessing and identifying the needs of the jurisdiction, providing optimum public health, and identifying areas to apply quality improvement methods. Achieving an accredited status assures that the public health department is providing the

best public health possible. The health department receives feedback on areas of strength and utilizes quality improvement tools to make improvements where needed.

Where is PPHD at in the accreditation process?

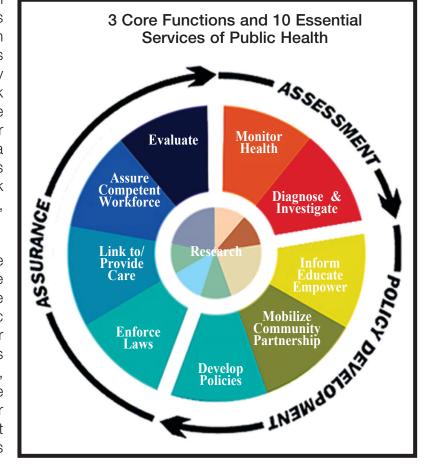
Throughout this report you've likely seen many references to the Community Health Improvement Plan (CHIP). The CHIP is

a plan not just for the health department, but all partners involved in the public health system. These priority areas were based on the Community Health Assessment that took place in 2011. The entire system was brought together to look at the health data for the Panhandle. This included survey feedback from residents, focus groups, and large group discussions.

The priority areas are incorporated into the PPHD Strategic Plan. The components of our strategic plan are the goals we strive for as an agency. This includes linking our work to the CHIP, assuring the most capable staff possible through our Workforce Development Plan, and holding ourselves

accountable for our progress through Quality Improvement and a Performance Management System.

PPHD is currently collecting documentation for submission to PHAB. The next step will be to prepare for the site visit from a PHAB team. Our goal is better public health for everyone – in the Panhandle, in Nebraska, and across the nation!





We are a healthier and safer Panhandle community.

Staff and Board of Directors

Kim Engel, Director

Main Office:

P.O. Box 337 | 808 Box Butte Avenue | Hemingford, NE 69348 Phone 308-487-3600 | Toll Free 866-701-7173 | Fax 308-487-3682 Melissa Cervantes, Worksite Wellness Administrative Assistant Jessica Davies, Worksite Wellness Coordinator Jennifer Eversull, Parenting Coach and Intake Specialist Melissa Galles, Healthy Families America Supervisor Janelle Hansen, Community Organizer, Health Educator Sara Hoover, CFO, Accreditation Coordinator Tabi Prochazka, TFN, NDPP, Preparedness Coordinator Brook Raschke, PPHHS Executive Assistant Erin Sorensen, Office Manager, Human Resource Coordinator

Scottsbluff Office:

1930 East 20th Place | Suite 400 | Scottsbluff, NE 69361 Phone 308-633-2866 | Toll free 877-218-2490 | Fax 308-633-2874 Linda Ainslie, Parenting Coach and Intake Specialist Sandra Babin, Parenting Coach and Intake Specialist Myrna Hernandez, Parenting Coach and Intake Specialist Bernadette Sanchez, Parenting Coach and Intake Specialist Betsy Walton, RN, Healthy Families America Program Coordinator



Bridgeport Office:

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Serving the Nebraska Panhandle counties of:

Banner | Box Butte | Cheyenne | Dawes | Deuel | Garden | Kimball | Morrill | Sheridan | Sioux

2014 Panhandle Public Health District Board of Directors

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At Large

Dr. Timothy Narjes, MD Dr. Brandon Wilcox, DDS Dr. Richard Jaggers, DVM



Our Guiding Principles:

- We make data driven decisions based on community assessments.
- We implement and encourage others to use evidence based practices to assure that the needs of the community are met and done so in a manner that provides proven outcomes.
- We strive for integrity, honesty, and transparency to assure fairness and accountability to those we serve.
- We honor the work of the entire local public health system, as all partners play an important role in improving the quality of life and health status of the Panhandle Community.
- We participate in continuous evaluation and improvement to assure quality in the way we operate and that we are meeting community needs in the best way possible.
- We engage in collaboration, teamwork and partner development with an emphasis on the assets and resources that the collective impact of relationships can bring.
- We are good stewards of public funds to assure that we optimize available funding and meet the greatest need in the most cost-efficient, ethical manner.
- We model the strategies at an organizational level that we encourage others to adopt.
- We work to empower communities and individuals to take charge of their health through policy, system and environmental changes that help them make the healthy choice the easy choice.
- We believe in serving the Panhandle Communities in a nondiscriminatory, culturally competent manner, knowing that everyone has the right to quality of life and receiving information and services in a way that meets their needs.

Message from the Director



Kim Engel Director

Thank you for taking the time to look over the PPHD 2014 Annual report. We take great pleasure in delivering it to you, which builds on our mission of working together to improve the health, safety and quality of life for all who live, learn, work, and play in the Panhandle. Our vision of becoming a healthier and safer Panhandle community is happening because of the collective work that the entire region is doing for community health improvement.

As indicated in the report, Nebraska is ranked in the top 10 of the healthiest states in the nation. Unfortunately though, several counties in the Panhandle are among the bottom ten in the state. Working together, we can improve the health of the Panhandle communities and citizens by continuing to implement evidence base strategies that will make the healthy choice the easy choice.

We invite you to browse through our website to find out more about community health improvement and what you can do to make a difference. On behalf of PPHD's staff, thank you for your ongoing commitment to improve health. As we move forward into 2015 and beyond, we all should feel proud of what has been accomplished by working together in 2014 and excited about the future.

Kim Engel

live, learn, work, and play



For a Healthier Panhandle



