

# ZIPS

**Z**ero to age 21: **I**nformation **P**romoting **S**uccess  
for Public Health Professionals working with Kansas Kids



## First Regional Perinatal Conference

### Special Points of Interest:

- Celebrate National Prematurity Awareness Month
- Bright Futures in Kansas: Exploration for Training Continues
- Are You Up On the Slang Used By Kids
- Healthy Start Regional Training: Working with Families in Crisis
- MRSA: Resources to Assist Practitioners in Schools and other Community Settings

### Inside this issue:

Perinatal Health - Conception to Birth	2
Child Health - Birth to Age 9	3
Adolescent Health - Age 10 to 21	4
Public Health	5
School Health	6
Events & Resources	7
The Back Page	8

October 19 and 20 marked the dates of the first Regional Perinatal Conference: *Best Practices and Emerging Trends* sponsored by the University of Kansas Medical Center Continuing Education and the University of Kansas School of Nursing. This conference was held at the Holiday Inn at the Plaza in Kansas City, MO.

The conference opened on Friday with a presentation of perinatal health outcome trends in Kansas and Missouri to help set the stage for the two-day event. After the opening session, participants divided up into prenatal, intrapartum and postpartum, newborn and family care. Within each group session, a variety of breakouts were presented affecting fetal, infant and maternal and family health.

Saturday's sessions began with networking amongst colleagues as well as time for interaction with vendors. Ginger Breedlove, Ph.D., CNM, FACNM, then presented disaster preparedness in obstetrics. Her presentation was followed by a morning of breakout sessions where

participants could choose to be involved with one or more of the various "care" groups. Again, a wide variety of informative topics broken down into the various stages of care were presented followed by a luncheon.

Finally, Carl Weiner, M.D., M.B.A., presented his topic of "Primary Care Fetal Medicine: What You Need To Know." He left the participants with information from his research findings as well of those of others in the perinatal health field relating to the importance of cervical length measurements and the ability to predict preterm birth. His presentation engendered discussion and further study among participants that have extended beyond the conference. In addition, many participants left the conference with great anticipation for next year's event and hope for improvement in the health of all mothers and infants. For a complete list of topics regarding this event go to:



[www.continuinged.ku.edu/kumc/perinatal/agenda.php](http://www.continuinged.ku.edu/kumc/perinatal/agenda.php)



# PERINATAL HEALTH

Joe Kotsch, Perinatal Consultant



## Celebrate National Prematurity Awareness Month



Help celebrate National Prematurity Awareness Month along with others across the U.S. by educating women in your community about the relevance of the increasing numbers of infants who are born too soon. Also, provide education on and encourage women to learn the signs and symptoms of preterm labor, inform your community on current understandings from the world of obstetrical research related to the effect of short cervical length on the incidence of prematurity as well as the importance of complete fetal development in the womb environment.

In Kansas, the rate of preterm birth has risen by 20 percent from 1994 (9.8 percent) to 2004 (11.8 percent). Whereas, the Healthy People 2010 National Goal for preterm birth is 7.6 percent. Consequently, this translates into low birth weight rates of 6.5 percent and 7.3 percent for 1994 and 2004, respectively. Further, prematurity/low birth weight is the leading cause of death in the first month of life and is

a major factor in infant disability and illness. The population groups in which the preterm birth rates were the highest were women older than 40, women younger than 20 and Black infants. Again, why should we be so concerned? It was estimated that the annual societal cost for infants born preterm (including medical, education and lost productivity) in the United States for the year 2005 was 26.2 billion dollars.

So, please support the March of Dimes by doing what you can in terms of getting some of the facts out about the effects of preterm birth on everyone as well as a means of saving more infant lives and helping prevent additional illness and disability. For more information on preterm birth, its effects on infant health and mortality go to:

[www.marchofdimes.com/peristats/](http://www.marchofdimes.com/peristats/)



## A Healthier Pregnancy

Babies begin their developmental journey once sperm and egg unite and become implanted on the uterine wall. The brain is said to rapidly develop throughout pregnancy and until about three-years-old. As you may be able to see from this brief depiction of fetal, infant and early childhood development, there are multiple opportunities for this development to be interrupted. If this developmental process is interrupted, then essential processes involving the basic foundations of how our brain and other body organs develop may not occur creating an environment where illness and disability abound.

One of the best things that a pregnant (or a woman who can become pregnant) can do is to eat a healthier diet and to be sure and take 400 micrograms of folic acid daily both before and during the first few months of pregnancy to reduce the risk of birth defects of the brain and spine. Also,



these women should avoid caffeine, alcohol, tobacco (especially tobacco smoke) and other substances (including items like prescription pain medications, unless followed closely by a health care provider). If the woman is currently a user of alcohol, tobacco or other substances, she should be offered assistance through a local community mental health center or provider of substance abuse treatment. Another good thing that women can do to help ensure a healthier pregnancy is to ask their health care provider about testing for sexually transmitted diseases. In this way, they will be protecting their infants from potential exposures to a variety of infective agents. Getting tested is the only sure way to know whether or not someone has a sexually transmitted disease. For more information on how to achieve a healthier pregnancy go to: [www.cdc.gov/ncbddd/bd/abc.htm](http://www.cdc.gov/ncbddd/bd/abc.htm)



# CHILD HEALTH

Brenda Nickel, Child Health Consultant



## Bright Futures In Kansas: Exploration for Training Continues



Creating a framework that can be integrated in community-wide professional disciplines, as well as other agencies and programs that provide services to families is essential in creating a comprehensive statewide phi-

losophy to improve the health status of the 674,285 children under the age of 18 in Kansas (KIDS COUNT Data Book, 2006). Several states, including Kansas, encouraged existing programs serving children to incorporate and use the *Bright Futures* guidelines, a program developed by Georgetown University and the Health Resources and Services Administration's Maternal Child Health Bureau (MCHB) and endorsed by the American Academy of Pediatrics and the Maternal and Child Health Bureau.

In March 2007, a survey, "*Bright Futures* Training: Interest Survey," was developed and sent out to public health providers to ascertain awareness of the guidelines and materials, and to determine if there was an interest in a statewide training for health professionals and other multidisciplinary professionals that would facilitate the use of the Georgetown University / Maternal Child Health Bureau curriculum / guidelines. There were 123 surveys returned with the final survey results indicating that there is an interest in further training on *Bright Futures*.

*Bright Futures* is an appropriate framework for collaborative health promotion and prevention activities with families and children and is encouraged to be used in programs such as the Title V Maternal Child Health (MCH) Block grant, nu-

trition programs, school programs, and of course, in pediatric practices. On Oct. 31, Brenda Nickel, Child and School Health Consultant with KDHE and Steve Christenberry, Director of Clinical Services at the Family Service and Guidance Center, provided a webcast for the University of Kansas's 2007 Public Health Grand Rounds. In this hour, information about *Bright Futures*, the survey results, and next steps for Kansas was discussed.

Over the next few months, the Maternal and Child Health Program at KDHE will work with partners interested in child health to explore a collaborative project to provide additional training on utilization of the *Bright Futures* to create a framework for child health supervision within communities in Kansas.

To explore *Bright Futures* and the plethora of resources and materials that can assist public and private health practitioners in their work of health promotion and services with children and families, visit the following websites:

- *Bright Futures* [www.brightfutures.org/](http://www.brightfutures.org/)
- Distance learning for *Bright Futures* at Georgetown University  
[www.brightfutures.org/distancelearning.html](http://www.brightfutures.org/distancelearning.html)
- Learn more about *Bright Futures* at the American Academy of Pediatrics site  
<http://brightfutures.aap.org/web/aboutBrightFutures.asp>
- To access the National Process Evaluation of *Bright Futures* conducted by Health Systems Research, Inc., go to the Altarum site  
[www.altarum.org/page\\_search%20results.cfm](http://www.altarum.org/page_search%20results.cfm)



# ADOLESCENT HEALTH

Jane Stueve, Adolescent Health Consultant



## Are You Up On The Slang Used By Kids?



Drugs are illegal in most places in the world today. For this reason talk of it has had to go underground. A very effective way of going underground is the development of a secret language code known and understood only by those who live in that world. In this way people can talk about illicit drug taking right

in front of partners and parents without fear of them catching on. Here is just a small snippet of this language with some descriptive terms where they are applicable:

- SERIAL SPEEDBALLING: Sequencing cocaine, cough syrup and heroin over a one-to-two day period.
- A- BOOT: Under the influence of drugs
- AGONIES: Withdrawal symptoms
- CHALKED UP: Under the influence of cocaine
- CHEESE: Cold medicine mixed with heroin
- HEAVEN AND HELL: PCP
- PHARMING: Consuming mixture of prescription substances
- TARDUST: Cocaine
- TWEAK MISSION: On a mission to find crack
- WAKE UPS: Amphetamines
- SACRAMENT: LSD
- HIGHBEAMS: Wide eyes associated with taking crack
- PAPER BAG: Container for drugs
- TEX-MEX: Marijuana
- SAM: Federal narcotics agent
- CARPET PATROL: Crack smokers searching the floor for crack
- HALF A FOOTBALL FIELD: 50 rocks of crack
- AMPHEAD: LSD user
- AUTHOR: Doctor who writes illegal prescriptions
- ARE YOU ANYWHERE: Do you use marijuana
- CLOSET BASER: User of cocaine that prefers anonymity
- HONEYMOON: Early stages of drug use before addiction
- MISS: To inject a drug
- HYPE STICK: Hypodermic needle
- PIGGYBACKING: Simultaneous injecting of two different drugs
- TOKE: To inhale cocaine or smoke marijuana

## Doctors Can Use Simple Test to Detect Patient Smoking

The use of a pulse cooximeter, commonly used to test for carbon monoxide in firefighters, can also be used to detect smoking among people who may be reluctant to admit their addiction. The pulse cooximeter has been found by the American College of Chest Physicians to be superior to a blood, urine or saliva test because it works much like a pulse oximeter in that you simply clip the device on the patient's fingertip and the device reads the amount of carboxyhemoglobin in the blood.

Tobacco use is associated with alcohol and illicit drug use, and acts as a "gateway drug." Adolescents (12-17-year-olds) who reported having smoked in the past 30 days were three times more likely to use alcohol, eight times more likely to smoke marijuana, and 22 times more likely

to use cocaine, within those past 30 days than those 12-17-year-olds who had not smoked during that time, according to a U.S. Attorney General report.

Kansas 2007 Youth Risk Behavior Survey Results (YRBS) report that 49 percent of students in Kansas high schools that completed the YRBS tried cigarette smoking. Of these students, 14 percent report they smoked a whole cigarette for the first time before age 13. Twenty-five percent of the students report using cigarettes, cigars, chewing tobacco, snuff or dip one or more times in the past 30 days. If you know someone that uses tobacco, help them quit. Give them the number for the Kansas Tobacco Quit Line: 1-866-KAN-STOP (1-866-526-7867). Trained tobacco cessation counselors are available 24-hours-a-day, seven-days-a-week. All counseling is free and confidential.

## Drowsy Driving

Drowsy Driving Prevention Week (DDPW) is Nov. 5-11. Teen drowsy driving is an emerging issue. Consider the following annual facts: drowsiness impairs judgment, vision, hand-eye coordination, and reaction times just like alcohol and other drugs; being awake for 17 hours is equivalent to someone with a blood alcohol concentration of 0.05.

The National Highway Traffic Safety Administration estimates that 100,000 police-reported crashes are caused by fatigued drivers, resulting in more than 1,550 deaths and

71,000 injuries annually.

According to National Sleep Foundation surveys half of Americans consistently report that they have driven drowsy and approximately 20 percent admit that they have fallen asleep at the wheel in the past year.

The campaign is designed to educate young drivers (and everyone on the road!) about the dangers of driving while sleepy. To find more information on drowsy driving go to [www.drowsydriving.org](http://www.drowsydriving.org) for a toolkit on resources to support efforts to prevent drowsy driving.



# PUBLIC HEALTH

Children and Families Section



## Healthy Start Regional Training: Working With Families in Crisis

Healthy Start Home Visitors (HSHV), professional licensed staff, and local health department administrators came together during October in the communities of Wakeeney, Beloit, Oskaloosa, Hugoton, Greensburg, and Sedan. Although local health departments are working hard on emergency preparedness activities for community and regional emergencies, the regional training focused on more personal crisis situations that families may experience and emphasized the need for responders in public health to develop their own family disaster plans so that in the event of a crisis, knowing their own family is provided for, their focus can be on community response.

Topics covered during training included current early childhood initiatives in Kansas, challenges and opportunities in the Maternal Child Health program, fire injury prevention activities, including the *Play Safe! Be Safe!*® curriculum provided through the BIC Corporation and Fireproof Children and Prevention First, resources to assist families with coping with crisis, and family emergency preparedness planning. Participants also worked through a case scenario of an infant death in a family and considerations for families who experience a sudden unexplained infant death, the subsequent death investigation, and resources available for families from SIDS Network of Kansas.

The Center for Public Health Preparedness (CPHP) at KDHE, in partnership with Saint Louis University's Heartland Center for Emergency Preparedness, provided the training participants with Ready Kits® and information sheets on creating an emergency preparedness backpack. Discussion ensued as to possible educational venues, including home visits and local health fairs, where the Ready Kits® could be used as an example of a family emergency preparedness kit. Additionally, *Plan, Prepare, and Protect* booklets from OPHP were distributed to so that participants could begin to work on their family disaster plans.

Each site ended the day with a round table discussion that included local and regional collaborations that have enhanced services for families in crisis. At the Greensburg training, Mizti Hesser, Kiowa County Health Department administrator, took participants on a driving "round table" tour of the community highlighting the devastation the May 2007 tornado caused, but more importantly, the community, regional and state response to the event that is serving to fuel growth. The tour included a visit to Hesser's temporary home, a FEMA trailer, the local school, the temporary hospital, and the opportunity to witness the development of new homes and businesses as the town moves

forward. The web-based resources located on the back page were provided during the regional training. Be sure and visit these sites for information and links to assist public health practitioners with their work with families and communities when faced with a crisis.



*Pictured: Participants, wearing their new Ready Kit® back packs, give a "thumbs up" to celebrate the courage and commitment of the Kiowa County Health Department and the Greensburg community.*



### Ask Ken! ELECTRONIC SUBMISSION OF DATA & CVR'S

**Q.** When completing a Child Health CVR, what if the client is 18-years-old and living at home? Do you report the client's income or the household income?

**A.** An 18-year-old is no longer a minor and could be a household of 1 – still living at home, or the client could be living at home and still a dependent on parent's income tax, so if not confidential (FP) then would report total household income. It depends on the situation.

**Q.** In the M&I program, is the unborn child included or counted in the family household size? WIC and SRS do count the unborn child.

**A.** No, we do not include the unborn child in the family household size.



# SCHOOL HEALTH

Brenda Nickel, Child Health Consultant  
Jane Stueve, Adolescent Health Consultant



## MRSA: Resources to Assist Practitioners in Schools and other Community Settings



In Kansas's communities, the second quarter of the school year has arrived and routines are well established. However, it's important to continue to remind students and staff about the importance of good health habits to

assure continued academic success: good nutrition and proper rest, study routines, and maintenance of health through necessary prevention activities, including hygienic practices that can assist in prevention of infectious diseases.

Public health and school nurses continue to grapple with methicillin-resistant staphylococcus aureus (MRSA) among students in a variety of community settings, including athletic environments. With continued media coverage highlighting team members who have contracted MRSA during athletic competitions, school nurses are seeking out additional resources to proactively intervene in the spread of this communicable bacterial disease that looks much like a spider bite and can be spread by skin-to-skin contact.

Martha Siemsen, ARNP, the medial investigator in the Office of Surveillance and Epidemiology, has been providing resources for school and public health nurses who are seeking out information about MRSA in childcare, clinic, and school settings. Just recently the Centers for Disease Control and Prevention, in response to questions, has provided the following additional resources for practitioners:

➤ MRSA Data and Statistics: [www.cdc.gov/ncidod/dhqp/ar\\_mrsa\\_surveillanceFS.html](http://www.cdc.gov/ncidod/dhqp/ar_mrsa_surveillanceFS.html)

➤ MRSA in the Community (Podcast): [www2a.cdc.gov/podcasts/player.asp?f=6936](http://www2a.cdc.gov/podcasts/player.asp?f=6936)

### MRSA in the Community

- Overview of MRSA in the Community: [www.cdc.gov/ncidod/dhqp/ar\\_mrsa\\_ca.html](http://www.cdc.gov/ncidod/dhqp/ar_mrsa_ca.html)
- Information for the Public: [www.cdc.gov/ncidod/dhqp/ar\\_mrsa\\_ca\\_public.html](http://www.cdc.gov/ncidod/dhqp/ar_mrsa_ca_public.html)
- Information for Healthcare Providers: [www.cdc.gov/ncidod/dhqp/ar\\_mrsa\\_ca\\_clinicians.html](http://www.cdc.gov/ncidod/dhqp/ar_mrsa_ca_clinicians.html)
- Clinical Management Strategies: [www.cdc.gov/ncidod/dhqp/pdf/ar/CAMRSA\\_ExpMtgStrategies.pdf](http://www.cdc.gov/ncidod/dhqp/pdf/ar/CAMRSA_ExpMtgStrategies.pdf)
- Educational Materials (Posters and Information Sheet): [www.cdc.gov/ncidod/dhqp/ar\\_mrsa\\_ca\\_posters.html](http://www.cdc.gov/ncidod/dhqp/ar_mrsa_ca_posters.html)
- MRSA in Schools: [www.cdc.gov/Features/MRSAinSchools/](http://www.cdc.gov/Features/MRSAinSchools/)

### MRSA in Healthcare Settings

- Overview of MRSA in Healthcare Settings: [www.cdc.gov/ncidod/dhqp/ar\\_MRSA\\_spotlight\\_2006.html](http://www.cdc.gov/ncidod/dhqp/ar_MRSA_spotlight_2006.html)
- Fact Sheet for Healthcare Personnel: [www.cdc.gov/ncidod/dhqp/ar\\_mrsa\\_healthcareFS.html](http://www.cdc.gov/ncidod/dhqp/ar_mrsa_healthcareFS.html)
- MRSA Prevention Healthcare Guideline: [www.cdc.gov/ncidod/dhqp/pdf/ar/mdroGuideline2006.pdf](http://www.cdc.gov/ncidod/dhqp/pdf/ar/mdroGuideline2006.pdf)
- Hand Hygiene Healthcare Guideline: [www.cdc.gov/handhygiene/](http://www.cdc.gov/handhygiene/)

## Reminder To Kansas Elementary Schools: Please Don't Forget To Teach Kids How To Stay Healthy During This Flu Season!

The "Keep Our School Healthy" program was created last year as part of the Kansas Department of Health and Environment's (KDHE) *Don't Let Flu Bug U* multimedia campaign. A DVD containing a variety of material in both video and print format was sent to school nurses or principals at all elementary schools in Kansas last year.

There are two entertaining instructional videos on the disk. The first is aimed at kindergartners through third graders using language that younger children will readily understand. The second targets children in the fourth through sixth grade. This video was scripted with older children in mind and includes some of the science of flu viruses. Both videos feature an animated version of Dr. Howard Rodenberg, KDHE Director of Health and Chris Tuck, R.N., Kansas School Nurse of the Year for 2006.

There are also several fact sheets from the Centers for Disease Control and Prevention (CDC) on flu prevention and a School Planning Checklist to assist school administrators in preparing for an influenza pandemic. All material can be printed by the school or sent to a printer. KDHE has also posted the files in PDF on its *Don't Let Flu Bug U* Web site at: [www.kdheks.gov/flu/FluBugU.htm](http://www.kdheks.gov/flu/FluBugU.htm).

KDHE asks that you use these tools to help minimize the impact of seasonal flu in your school. If you did not receive a copy of the "Keep Our School Healthy" DVD last year or have misplaced your copy please send an e-mail to: Mike Cameron, KDHE Risk Communication Specialist at [mcamero1@kdhe.state.ks.us](mailto:mcamero1@kdhe.state.ks.us).

## EVENTS



## RESOURCES

**2007 Children's Book Week - Nov. 12-18**

Since 1919, educators, librarians, booksellers, and families have celebrated Children's Book Week during the week before Thanksgiving. The theme for the 88th annual observance of Children's Book Week is *Rise Up Reading!* Use these materials to decorate your walls, promote your events, and most importantly, encourage kids to read. For more information, visit the following Web site: [www.cbcbooks.org/cbw/promote/2007CBCPressRelease.pdf](http://www.cbcbooks.org/cbw/promote/2007CBCPressRelease.pdf)

**NATIONAL ADOPTION DAY 2007, NOV. 17** is a collective national effort to raise awareness of the 114,000 children in foster care waiting to find permanent, loving families. For the last eight years, National Adoption Day has made the dreams of thousands of children come true by working with courts, judges, attorneys, adoption professionals, child welfare agencies and advocates to finalize adoptions and find permanent, loving homes for children in foster care. It is celebrated every year on the Saturday before Thanksgiving. For the first time in 2006, National Adoption Day was celebrated in all 50 states, the District of Columbia and Puerto Rico. In total, more than 250 events were held throughout the country to finalize the adoptions of more than 3,300 children in foster care, and to celebrate all families who adopt. For more information, visit the following Web site: [www.nationaladoptionday.org/2007/index.asp](http://www.nationaladoptionday.org/2007/index.asp)

**The 2007 Governor's Conference for the Prevention Child Abuse and Neglect** will be held Nov. 6-8 at the Capital Plaza Hotel in Topeka. To register online go to [www.kcsl.org](http://www.kcsl.org) and click on training. For question call Pamela Noble at (316)942-4261 x-1343.

**SAVE THE DATE - 2008 Public Health Conference** will be held at the Airport Hilton in Wichita on Apr. 28 (new MCH staff orientation) and Apr. 29-30. Anyone new to Maternal Child Health is encouraged to attend. Contact Jamie Klenklen at [jklenklen@kdhe.state.ks.us](mailto:jklenklen@kdhe.state.ks.us) or (785)296-1234 for more information.

**The Nineteenth Annual Perinatal Association of Kansas Conference** will be held on Jun. 20, 2008. Watch upcoming ZIPS for additional details as they become available. Also, you may track the changes as they occur by visiting the Perinatal Association of Kansas Web site at: [www.kspak.org](http://www.kspak.org)



**Health Care** - National Course:

[A Health Professional's Guide to Pediatric Oral Health Management](#)

For other trainings offered see <http://ks.train.org>

**"Quarantine and Isolation Regulations Changes"**

Posted on Public Health Information Exchange (PHIX). The regulations on isolation and quarantine for specific diseases, K.A.R. 28-1-5 and 28-1-6 have recently been revised and updated. Changes include removing some disease with no human-to-human transmission from the list; updating procedures and timelines; clarifying language; removing the "no nits" clause from the head lice section of the regulations. The regulations took effect Jul. 16, 2007, and a copy of the final regulations can also be found on the KDHE Web site at: [www.kdheks.gov/epi/regulations.htm](http://www.kdheks.gov/epi/regulations.htm). If you have any questions, contact Dr. Gail Hansen [Ghansen@kdhe.state.ks.us](mailto:Ghansen@kdhe.state.ks.us).

**The "Body Works Toolkit for Healthy Girls and Strong Women"**

consists of nine sessions for parents/caregivers that focus on action steps and provide information on ways to change how the family eats, shops, cooks and moves in an effort to help families improve their lifestyles and prevent over weight and obesity. The kit contains a video on healthy shopping and cooking, a recipe book, weekly meal planner, and food and fitness journals as well as magazine like books. Download at [www.4women.gov/bodyworks/toolkit/toolkit.parents.pdf](http://www.4women.gov/bodyworks/toolkit/toolkit.parents.pdf).

**FLU CLINIC LOCATER** Influenza is much more than a simple cold. Tragically, flu kills about 36,000 people each year and requires more than 226,000 to be hospitalized. Many of these deaths can be prevented by getting an annual flu shot. Vaccination typically begins in October and can continue through March, so it's never too late for you and your family to get the protection you need. The American Lung Association makes getting a flu shot even easier for you with our Flu Clinic Locator. Just enter your zip code at [www.flucliniclocator.org](http://www.flucliniclocator.org) to find public flu clinics conveniently located near your home or office so you won't have to wait for a doctor's appointment.

**The Kansas State Department of Education, Student Support Services Team** has changed it's name to *Special Education Services*. The phone number (785) 296-3869 has been discontinued and is no longer in use. The new main phone numbers for the Special Education Services Team is (785)291-3097 or (800)203-9462.

**Medline Plus** is a Web site that offers information on a wide range of topics in the field of maternal and infant health. In addition, this site offers opportunities for further learning and links to late-breaking news, research and reference materials. Medline Plus is located on the Web at: [www.nlm.nih.gov/medlineplus/infantandnewborncare.html](http://www.nlm.nih.gov/medlineplus/infantandnewborncare.html)

**An idealist  
is a person  
who helps  
other  
people to  
be  
prosperous.**

— Henry Ford



**The State of Kansas  
Department of Health and Environment**

Bureau of Family Health  
Children and Families Section  
1000 SW Jackson, Suite 220  
Topeka, KS 66612-1274  
Phone: 800-332-6262 (Make a Difference)  
785-296-1307 (Administration)

“Providing leadership to enhance the health of Kansas women and children through partnerships with families and communities.”

We hope this newsletter continues to be a useful resource for you. We encourage you to give us your comments, feedback and suggestions. Previous editions of ZIPS can be found at:

[www.kdheks.gov/c-f/zips/](http://www.kdheks.gov/c-f/zips/)

For program information, contact:

**Kobi Gomel** [kgomel@kdhe.state.ks.us](mailto:kgomel@kdhe.state.ks.us)  
Admin Specialist/ZIPS Technical Editor 785-291-3368

**Jamie Klenklen, BPA** [jklenklen@kdhe.state.ks.us](mailto:jklenklen@kdhe.state.ks.us)  
MCH Admin Consultant 785-296-1234

**Joseph Kotsch, RN, BSN, MS** [jkotsch@kdhe.state.ks.us](mailto:jkotsch@kdhe.state.ks.us)  
Perinatal Consultant 785-296-1306

**Ileen Meyer, RN, MS** [imeyer@kdhe.state.ks.us](mailto:imeyer@kdhe.state.ks.us)  
Director, Children & Families 785-296-1303

**Ken Miller** [kmiller@kdhe.state.ks.us](mailto:kmiller@kdhe.state.ks.us)  
Data Specialist 785-296-1305

**Brenda Nickel, RN, BSN** [bnickel@kdhe.state.ks.us](mailto:bnickel@kdhe.state.ks.us)  
Child and School Health Consultant 785-296-7433

**Jane Stueve, RN, BSN** [jstueve@kdhe.state.ks.us](mailto:jstueve@kdhe.state.ks.us)  
Adolescent and School Health Consultant 785-296-1308

Visit our Web site at [www.kdheks.gov/c-f](http://www.kdheks.gov/c-f)

## Web-Based Resources from Healthy Start Regional Training

### Resources for Injury Prevention

- Injury and Disability Prevention Programs [www.kdheks.gov/idp/](http://www.kdheks.gov/idp/)
- Safe Kids Kansas [www.kdheks.gov/safekids/index.html](http://www.kdheks.gov/safekids/index.html)

### Resources for Fire Safety

- Kansas Fire Injury Prevention Program, KDHE [www.kdheks.gov/kfipp/index1.html](http://www.kdheks.gov/kfipp/index1.html)
- Fire Safety for Babies and Toddlers. FEMA [www.usfaparents.gov/](http://www.usfaparents.gov/)
- Fireproof Children, Prevention First [www.fireproofchildren.com/](http://www.fireproofchildren.com/)

### Resources for Emergency Preparedness Planning With Families

- American Academy of Pediatrics (AAP) “Family Readiness Kit” [www.aap.org/family/frk/aapfrkfull.pdf](http://www.aap.org/family/frk/aapfrkfull.pdf)
- Four Steps to Prepare Your Family for Disasters (part of the AAP Family Readiness Kit) [www.aap.org/family/frk/FOurstepsFRK.pdf](http://www.aap.org/family/frk/FOurstepsFRK.pdf)
- Ready.gov ✓. Family Emergency Plan [www.ready.gov/america/downloads/familyemergencyplan.pdf](http://www.ready.gov/america/downloads/familyemergencyplan.pdf)

[www.ready.gov/kids/downloads/familyplan.pdf](http://www.ready.gov/kids/downloads/familyplan.pdf)

- *The Youngest Victims: Disaster Preparedness to Meet Children’s Needs.* AAP. [www.aap.org/terrorism/topics/PhysiciansSheet.pdf](http://www.aap.org/terrorism/topics/PhysiciansSheet.pdf)
- U.S. Department of Health and Human Services, Administration for Children and Families. Child Care Resources for Disasters and Emergencies <http://nccic.acf.hhs.gov/emergency/>
- KDHE *Don’t Let Flu Bug U* educational CD for school aged children [www.kdheks.gov/flu/FluBugU.htm](http://www.kdheks.gov/flu/FluBugU.htm)

### Responding To Behavioral & Emotional Needs of Families

- CDC Emergency Preparedness and Response [www.bt.cdc.gov/preparedness/](http://www.bt.cdc.gov/preparedness/)
- Association of Community Mental Health Centers of Kansas, Inc. [www.acmhck.org/BusinessDirectoryII.asp](http://www.acmhck.org/BusinessDirectoryII.asp)

### Resources for Families Affected by Sudden Infant Death

SIDS Network of Kansas, Inc.  
Christy Schunn, Executive Director  
1148 S Hillside, Suite 10, Wichita, KS 67211  
316-682-1301 Toll Free 1-866-399-7437  
[www.sidsnetworkofkansas.org](http://www.sidsnetworkofkansas.org)