



PUBLIC HEALTH CONNECTIONS

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Bureau of Local and Rural Health



John Mitchell, Acting Secretary

Mark Parkinson, Governor

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ADULTS NEED VACCINES TOO

An Op-Ed Column by Jason Eberhart-Phillips, MD

Kansas State Health Officer, Kansas Department of Health and Environment (KDHE)

If you think vaccines are just for kids, think again. Grown-ups like you and I need to be immunized too. Adults like us need the protection that only vaccines can give to keep us on the go – and out of the hospital – as we enjoy the many blessings of life in the Sunflower State. But results of a large national survey released last month show that most adults aren't getting the vaccines they need. Foregoing the full range of doctor-recommended vaccines, these adults are making themselves – and those around them – vulnerable to serious infections.



Throughout America, we are doing better this year than ever before in seeing that young children receive all the vaccines they should. More than 90 percent of preschool children now receive most of the vaccines that pediatricians recommend, and many of the leading infectious killers of children have virtually disappeared as a result. But the picture is not so rosy for adults.

Nowadays, more than 95 percent of the 50,000 Americans who die each year from vaccine-preventable diseases are over 18 years of age. Hundreds of thousands of other adults are hospitalized because of these infections every year, at a cost well over \$10 billion, not including the value of time lost from work. What a terrible waste!

Influenza, which can be prevented with an annual dose of vaccine, causes the single largest burden – more than 200,000 hospitalizations in a moderately severe season. Uptake of influenza vaccine is improving, but routine flu immunization still isn't happening for a third of persons over 65 years of age or nearly two-thirds of high-risk, younger adults who have underlying chronic diseases.

Adults today need more vaccines than a yearly flu shot. Consider these sobering facts:

- Unimmunized adults now account for nearly half of the million-plus whooping cough cases occurring each year in the United States. Whooping cough, also known as pertussis, has become epidemic in many states and threatens to erupt in Kansas this winter. While adults rarely die from whooping cough, they are often responsible for exposing babies to pertussis bacteria. Infants too young to be fully immunized themselves are at high risk of death from exposure to pertussis, as was the case for a two-month-old Kansas child who died from the disease last year.
- About 41,000 adults suffer each year from invasive pneumococcal disease, the leading cause of community-acquired pneumonia. Nearly one in eight of these adults will die from the disease, but only about two-thirds of adults over 65 years of age have gotten themselves protected by receiving a single, one-time dose of pneumococcal vaccine.
- More than 6 million women are infected each year with human papillomavirus (HPV), the major cause of cervical cancer. Approximately 70 percent of these cancers are preventable with the HPV vaccine, given in three doses to women under age 26 years. But fewer than one in five such women have gotten the shots.
- More than 1 million older Americans suffer each year from shingles, a painful rash that results from the reactivation of the chickenpox virus acquired earlier in life. Often a case of shingles will trigger a post-herpetic neuralgia, a debilitating pain syndrome that lasts for months or years. The vaccine against shingles is recommended for persons over 60 years of age, but barely half of adults know about the vaccine, and just 10 percent of eligible Americans have received it.

What can be done to improve vaccination rates among adults? Clearly, doctors and other health care providers need to play an active role in promoting adult immunization, committing whenever possible to make vaccines easily available for their adult patients. One recent survey found that 87 percent of adults would accept vaccination if their doctor recommended it, while only 41 percent said they would ask to get a vaccine if their doctor did not mention it.

Another need is for greater public awareness. Fully 40 percent of adults in another recent survey believed that because they had received vaccines during childhood they did not need them again. A third of the respondents said they weren't too concerned about catching the diseases that vaccines prevent, and an almost equal number said they had read or heard that adult vaccines are not safe.

Make no mistake about it: Immunization is an important part of a healthy adult lifestyle. The diseases that vaccines prevent in adults are serious and sometimes deadly. And the vaccines approved for use in adults have all been proven to be safe and effective for the whole population, excluding those few with valid medical contraindications.

Is today the day you will see your health care provider to get the vaccines you need?

CHANGES IN THE BUREAU OF LOCAL AND RURAL HEALTH

by the Bureau of Local and Rural Health, KDHE



Dr. Jason Eberhart-Phillips, Kansas State Health Officer, assumed the duties as Acting Director for Local and Rural Health.

Shirley Orr, Director of Local Health in the KDHE Bureau of Local and Rural Health, has accepted a new position and will be leaving KDHE. This month she will assume new responsibilities as Director of Health Protection and Promotion for the Sedgwick County Health Department.

Shirley began her work at KDHE as a Public Health Nurse Specialist in 1991. In 2000, she assumed her current role as Director of Local Health.

Cyndi Treaster, Director of Farmworker, Immigrant and Refugee Health in the Bureau of Local and Rural Health, will serve as Acting Director of Local Health, beginning in January.

PROJECT LAUNCH

by Cristi Cain, Project Coordinator

Institute for Educational Research and Public Service, University of Kansas

Kansas Project LAUNCH (Linking Actions for Unmet Needs in Children's Health) and the American Academy of Pediatrics—Kansas Chapter (AAP) are seeking Kansas communities interested in a **free** training opportunity targeted at health care providers. The training, provided by AAP, will focus on utilization of the Ages and Stages Questionnaire (ASQ) developmental screening tool and the ASQ: Social-Emotional (SE). All participants will be trained to administer the ASQ and



ASQ:SE, and a limited number of training participants will also receive free ASQ tool kits.

Developmental screening training will be made available to one community in 2011. Interested communities should complete and submit a brief application by Feb. 1, 2011. Click the Project Launch logo for more information, or contact Cristi Cain at (785) 864-9639 or ccain@ku.edu with questions.

KAN BE HEALTHY PROVIDERS – DISCONTINUATION OF KBH CERTIFICATION REQUIREMENT

by Brenda Kuder, Kansas Health Policy Authority

Effective Jan. 1, 2011, the certification requirement for conducting KAN Be Healthy (KBH) health screens will be discontinued. Registered nurses (RNs) completing KBH screens will no longer be required to:

- Complete an online orientation training program
- Gain KBH certification through completion of a written examination

RNs can continue providing KBH screens within the scope of their licensure. Certification as a prerequisite to conducting the screens will no longer be required. For more information click the Kansas Health Policy Authority (KPHA) logo above.



KANSAS ENVIRONMENTAL PUBLIC HEALTH TRACKING

*by Angela German, Public Health Educator
Bureau of Environmental Health, KDHE*



Kansas is one of several states that have been funded by the Centers for Disease Control and Prevention (CDC) to develop plans for the creation of an electronic computerized tracking network that will bring together health and environmental information. Kansas Environmental Public Health Tracking (EPHT) program is housed within the Bureau of Environmental Health at KDHE.

Since Aug. 2009, the primary efforts of the Kansas EPHT program have focused on the development of the backbone of the Kansas Tracking Network, the kinds of data that will be contained within the network, and user needs. The first data elements of the network will address blood level, and house hold lead and exposure. The Kansas EPHT program partnered with the Healthy Homes Lead Hazard and Prevention Program and was able to submit the lead data to the CDC two years ahead of schedule. The program looks forward to future partnering opportunities as well the implementation of the Kansas EPHT Network. For more information on the Kansas EPHT program, click the logo above.

EPHT 101 is an online independent study course that can be viewed free of charge for informational purposes or purchased at a discounted rate for continuing education credits. The course gives an overview of the major components of EPHT and is divided into 12 modules. Users can save their progress in the course and complete it at their convenience.

To register:

1. Go to <http://ks.train.org>
2. Log in or create a new account
3. Search for EPHT 101 or course (#1019856)
4. Follow registration information

EPHT Resources:

- EPHT marketing packets are available to anyone by request. This packet contains both national and state EPHT publications. To request a packet, email: Angela German at: agerman@kdheks.gov
- Watch for our newly designed Web site coming soon. This Web site contains more EPHT resources, links and information. Also, it will be a portal link for the state and national portals once launched.

KS-TRAIN NEWS

by *Debbie Nickels, KS-TRAIN Administrator,
BLRH, KDHE*



Looking for a place to store your old course certificates? You can now upload your scanned certificates to completed courses and save them to your Transcript on KS-TRAIN. Click the KS-TRAIN logo for instructions on page 21 of the TRAIN User Handbook to add certificates.

The Kansas Department of Health and Environment and Kansas Hospital Association hosted live seminars for local Alternate Care Site (ACS) planning, May-June of this year. From the webinar and tools provided during the live training an online course, [KDHE-BPHP: Alternate Care Site Seminar, Course # 1024456](#) was developed for those persons who were unable to attend one of the live events.

An ACS is a community-based off-site location that can provide a minimum specific level of care in response to a mass casualty incident creating a large number of people seeking medical assistance. The mission of the online course is to provide tools to increase local response capabilities for ACSs through interagency coordination and planning. Participants will be introduced to planning tools for development of ACS plans for off-site primary triage and/or basic patient care during an emergency.

OBJECTIVES: At the conclusion of the Seminar, participants will be able to:

1. Identify the necessary plans (ACS), personnel, equipment and resources to support and sustain incident management.
2. Evaluate the necessary plans (ACS) to support and sustain incident management through exercise, training and real world events. The Heartland Centers Public Health Administrator's modules listed below are a series of programs intended for public health administrators, and nurse administrators, who are relatively new in their positions (three years or less), and who seek to enhance the knowledge, skills, and abilities they need to succeed.

[Heartland Centers Public Health Admin. Series: Contracts - Module 1 - 1023143](#) discusses the major elements of a contract, the major guidelines for writing an effective contracts, and & at least two examples of actual contracts used by a local public health.

[Heartland Centers Public Health Admin. Series: Grant Writing - Module 2 - 1023071](#) discusses locating grant awarding organizations, describes steps involved in preparing a grant application, describes the resources needed in preparing a grant application, the reporting obligations once a grant is awarded, the implications of grant awards to agency budgets, and identifies additional resources for grant writers.

[Heartland Centers Public Health Admin. Series: Critical Thinking for Public Health Practice - Module 3 - 1024690](#) The purpose of this course is for the public health preparation for the critical thinking process during public health emergency incidents.

[Heartland Centers Public Health Admin. Series: Planning to improve quality of life - Module 4 -1024702](#) discusses the role of Public Health in community planning, healthy planning concepts in relationship to community health planning, and identifies planning models.

[Heartland Centers Public Health Admin. Series: Overall Aspects of Managing an Agency - Module 5 -1024705](#) describes the roles and issues that occur in the management of a local public health agency, how to balance public health functions within a multi-focused agency, the identification of training needs within an agency and how to address these needs, & environmental health enforcement issues that may occur when contracting with local boards of health.

[Medications and Oral Health in Children and Youth with Special Healthcare Needs \(1025094\)](#) The Bureau of Oral Health, KDHE thanks, Jim Backes, Pharm.D., Associate Professor with the University of Kansas School of Pharmacy for his development of a medications and oral health course for KS-TRAIN. Dr. Backes has practiced in many settings throughout his career including retail and hospital pharmacy, and as a clinical pharmacist in Lipid, Diabetes, Epilepsy and Family Medicine Clinics. His current focus is teaching and research involving cholesterol and cholesterol medications at the Kansas University Medical Center. This online module will:

1. Discuss the various common side effects of medications on oral health.
2. Provide information on specific medications and their associated adverse effects.
3. Describe strategies for minimizing or avoiding the negative oral health effects of medications.

All courses and events are available on KS-TRAIN. To register for the courses click the KS-TRAIN logo and login to your TRAIN account, select a course link, or add the course # to the Search by Course ID field. Forgot your login ID and password? Contact the helpdesk at (785) 296-5655.

KANSAS PUBLIC HEALTH GRAND ROUNDS – SPRING 2011

*by Mary Beth Warren, MS, RN, Statewide Director,
University of Kansas Medical Center, Area Health Education Centers*

The Kansas Association for Local Health Departments, Kansas Department of Health and Environment and KU Medical Center's Department of Preventive Medicine and Area Health Education Centers are once again collaborating to make available the Kansas Public Health Grand Rounds series. The Spring 2011 series will occur live on Wed. from 12:00 – 1:00 via the internet utilizing the Elluminate web conferencing system.



Based upon feedback from participants in previous series, as well as current issues in public health, topics identified for the Spring 2011 series include: blue green algae policy; lead poisoning in children; financial impact of “a la carte” in Kansas public schools; septic systems; tobacco cessation efforts in the military; health literacy and public health; communicating food safety and hand washing messages; SafeKids; and disaster preparedness. The fee for the entire fall series (a total of 14 sessions) will be \$100 per organization and will include continuing education credit for physicians and nurses **employed by your organization and attending at your location.**

Enrollment for the spring 2011 series is now open. Your organization may enroll by e-mailing our office at ksphgr@kumc.edu or calling us at (620) 235-4040. If you have questions, please feel free to contact John Neuberger at (913) 588-2745 or Mary Beth Warren at (620) 235-4040.

SAYING GOODBYE

by the Bureau of Local and Rural Health

On Dec. 10, friends, family, co-workers and community partners celebrated Richard (Dick) Morrissey's service to the state and exemplary public health career. The following excerpt from Dr Jason Eberhart-Phillips' nomination of Dick for the Kansas Public Health Association's Samuel Crumbine Award testifies to the measure of the man.

Richard Morrissey is a Kansas treasure. No one alive has greater insight, knowledge and experience about the workings of the public health system in this state, and no one – living or dead – has ever served the people of Kansas as a public health leader with more grace, good humor, integrity and heartfelt

commitment than Dick has for more than 35 years. Dick is a man of his word. He sets high expectations for himself, and he meets them again and again. He gives his all in every endeavor to improve the health of the people he serves, and he gives it gladly. We who have the good fortune of working beside Dick know that he will never let us down. He brings wisdom, compassion and sound judgment to every new challenge, every point of decision, and every potential crisis. His is the steady hand that has time and again helped to keep KDHE and the whole public health system of Kansas heading in the right direction. Wherever Dick goes, his salutary presence reflects well on Kansas, and by extension on all of us, his colleagues throughout the state.

Good luck Dick. Thank you again for your leadership, integrity and passion for improving the public's health.



Dick Morrissey receiving Certificate of Appreciation for 35 years of service to the people of Kansas from Dr. Jason Eberhart-Phillips, Kansas State Health Officer.



Dick's children Jane and Ryan giving their father a congratulatory hug.

KANSAS MEDICAL RESERVE CORPS LEADERSHIP AND TRAINING SUMMIT

*by Emily C. Nickel, Planning and Outreach Specialist
Bureau of Public Health Preparedness, KDHE*

The State of Kansas Medical Reserve Corps (MRC) will host a statewide leadership and training summit for Kansas MRC volunteers. The summit will be a two-day event, Apr. 8 and 9, at the Kansas Highway Patrol Training Academy in Salina. The event will focus on how volunteers assist in preparedness, response, and recovery to work together to support the State of Kansas.

Kansas MRC volunteers will have the opportunity to take place in informational sessions,



build partnerships, continue to establish sustainable teams, and much more! The Kansas Medical Reserve Corps program has applied for Continuing Nursing Education (CNE) credit.

A special rate of \$69 per night is available at the Ramada Inn in Salina until Mar. 7. Contact the hotel at (785) 823-1739 and advise them you are with the "Kansas Medical Reserve Corps Training Summit." Registration will be through KS-TRAIN. For more information contact Emily Nickel at (785) 296-5201 or enickel@kdheks.gov.

6 FACTS ABOUT WARMING UP YOUR CAR IN WINTER

*by Megan MacPherson, Program Consultant
Bureau of Waste Management, KDHE*



Old habits die hard, and one of the oldest – still rigorously enforced by many drivers – is that "warming up" the car for a few minutes is necessary to avoid some kind of unspecified damage. But idling is totally unnecessary, which is why many communities have enacted ordinances against the practice. Here are some quick facts and tips that should put the idling question to rest:

1. **Driving Warms the Car Faster than Idling** If your concern is not the health of the car, but simply your own creature comforts, idling is not actually an effective way to warm up a car — it warms up faster if you just drive it. The coming electric cars, such as the Nissan Leaf, will incorporate a wonderful feature that allows the owner to use a cell phone to tell the car (which is plugged into the grid) to pre-warm or pre-cool the interior. No idling necessary.
2. **Ten Seconds Is All You Need** Turn off your ignition if you are sitting stopped for more than 10 seconds. After about ten seconds, you waste more money running the engine than restarting it. Switch the car off at the curb and you'll be leaving money in your wallet and protecting the air in your community.
3. **Idling Hurts the Car** Idling forces an engine to operate in a very inefficient and gasoline-rich mode that, over time, can degrade the engine's performance and reduce mileage.
4. **Idling Costs Money** Over a year of five minutes of daily idling (which causes incomplete combustion of fuel), the operator of a V-8-engined car will waste 20 gallons of gasoline, which not only produces undesirable air pollutants but costs close to \$60.
5. **Block Heaters Beat Remote Starters** Remote starters can too easily cause people to warm up their cars for five to 15 minutes, which is generally unnecessary. A block heater, which is designed to heat the engine and can cost under \$30, on a timer set to start one to two hours before driving does the trick in very cold climates.
6. **Quick Errands Aren't Quick Enough** Quick errand idling is another way to waste gas and pollute both your town and the planet. Leaving your engine running is hard on your pocketbook, pollutes the air and is an invitation to car thieves.



News and Updates

Submitted by the Local Health Section, BLRH

Hospital Preparedness Exercises Resources



The Agency for Healthcare Research and Quality (AHRQ) provides resources that can help hospital preparedness exercise coordinators plan for, design and develop, conduct, evaluate, and improve hospital preparedness exercises. Click on the AHRQ logo for more information.

AHRQ Health Care Innovations Exchange - Dental Health Care

The U.S. AHRQ's Health Care Innovations Exchange is a comprehensive program designed to accelerate the development and adoption of innovations in health care delivery. This program supports the Agency's mission to improve the safety, effec-



tiveness, patient-centeredness, timeliness, efficiency, and equity of care—with a particular emphasis on reducing disparities in health care and health among racial, ethnic, and socioeconomic groups.

Click on the AHRQ Health Care logo above to view innovations and quality tools to develop oral health education, prevention, and treatment programs.

Ready or Not? 2010



The eighth annual *Ready or Not? Protecting the Public from Diseases, Disasters, and Bioterrorism* report was released by the Robert Wood Johnson Foundation (RWJF) and Trust for America's Health (TFAH). The report notes that the almost decade of gains is in real jeopardy due to severe budget cuts by federal, state, and local governments. This report finds states achieve their highest ever scores for health emergency preparedness. To view this report, click the RWJF logo above.

Diabetes Training Opportunity



With support from the CDC's Division of Diabetes Translation, the National Association of County and City Health Officials (NACCHO) has released a "Request for Applications" that will provide local health departments with the opportunity to participate in the Diabetes Today training program. Applications are now being accepted until Jan. 20, 2011. To view more information about this training and how to apply, click the NACCHO logo above.

JOB OPENINGS

Sedgwick County Health Department

The Sedgwick County Health Department is taking applications for the following positions:

- Preventive Health PA/ARNP - [20002324122310](#)
- WIC Office Specialist - [20006456120810](#)
- WIC Registered Dietician - [20003751070710](#)



Click on a job number to view details. For more information, click the Sedgwick County Seal or contact Jeff Goetzinger, Human Resource Assistant, Sedgwick County Health Department, at (316) 660-7333.

Sheridan County Health Department

The Sheridan County Commissioners are accepting applications for the position of Public Health Nurse/Health Department Administrator. Salary based on qualifications. Contact the county clerk's office at (785) 675-3361 for a copy of job description and application.

**LOCAL HEALTH SECTION
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