



## PUBLIC HEALTH CONNECTIONS

February – 2012 Volume 12, Issue 2

Bureau of Community Health Systems

Robert Moser, Secretary

Sam Brownback, Governor

### WHAT'S INSIDE

My First Year as the State Health Officer .....	2
In the Spotlight – Seward County Health Department .....	3
Aid to Local Grants Now “Live”! .....	3
Kansas Public Health Leadership Institute and Core Public Health .....	4
Calling One and All - Join the Monthly Public Health Conference Call .....	5
Immunization Billing Survey – Local Health Department Participation Needed! .....	5
Revised Kansas Planning Standards .....	6
KU Public Health Nursing Graduate Student Joins KDHE for Leadership Practicum .....	6
Hospital Lures Rural Doctors with Unusual Offer .....	8
Bureau of Community Health Systems - Kansas Rural Health Information System .....	8
Tools for Conducting a Community Health Assessment and Engaging Your Local Community .....	8
Community Health Assessment, An Excellent Investment .....	9
Recession Takes Bite Out of Nation's Public Health Nursing Infrastructure .....	9
Training Announcements .....	10
Pharmacology Education Series .....	10
Homeland Security Exercise and Evaluation Program (HSEEP) Training Available in 2012 .....	10
Performance Improvement Technical Assistance Teleconference Call .....	11
Kansas Optimizing Health Program Training .....	11
Epidemiology Training for Local Health Departments, Module 2, Online Course .....	11
Bridging the Gap™ in Kansas, 2012 – Bilingual Interpreter Training .....	12
Accreditation Corner .....	12
Collaborating through Community Health Assessment to Improve the Public's Health .....	12
Structured Evidence Queries (SEQs) for the Healthy People 2020 Leading Health Indicators .....	12
Accreditation Preparation & Quality Improvement .....	13
Funding Opportunities .....	13
Voices for Health Equity Project – Deadline March 1 .....	13
APHA Get Ready Scholarship - Deadline March 26 .....	13
Future of Public Health Award – Deadline March 16 .....	13
News and Resources .....	14
Serving Limited English Proficient Individuals: Title VI of the Civil Rights Act of 1964 .....	14
Impact of the Recession on Local Health Departments .....	14
CALPACT Webinar Series: New Media Tools for Strategic Communication .....	14
TRAIN Accreditation Webinar Series .....	14
HealthLandscape .....	14
Ground both Gained and Lost in the Battle Against Tobacco Use .....	14
Dental Apps for iPhones and iPads .....	15
Institute of Medicine (IOM) and Partners Develop a New National Initiative .....	15
No Change in Obesity for Adults or Children in 2009-2010 .....	15
New Apps for Preparedness .....	15
Job Openings .....	15
Lyon County Health Department .....	15
Reno County Health Department .....	15
Riley County Health Department .....	15
Sedgwick County Health Department .....	16
Shawnee County Health Department .....	16
Public Health Connections Information .....	16

## A Message From the Secretary My First Year as the State Health Officer

*by Robert Moser, MD, Secretary and State Health Officer  
Kansas Department of Health and Environment*

I'm excited that the 2012 Legislative Session has started, though I recognize how full our plate is for this year as well as our regular duties and activities. I have just completed my first full year as Secretary and State Health Officer and want to say what an honor it is to work alongside the dedicated and innovative folks at the Kansas Department of Health and Environment (KDHE) and those partners that make up our external stakeholder groups. It is a pleasure to serve.



This spring we will have another annual Governor's Conference on Public Health, The Challenge of Change: Developing an Equitable Public Health System, April 24-25, with a pre-conference April 23, in Wichita. This will be the first time that we will be specifically targeting local health officers to participate.

When I was first informed that I was named as the Greeley County Health Officer, my first thought was "what does that mean and what do I have to do?" There are great resources and associations available to assist in learning those duties and responsibilities, but I would like to make it a little more organized as well as standardized. Statutes tend to help with the standardization part but how you develop the processes in carrying out those duties is another story, and I think helping our local/county health officers, particularly those that are newly appointed, is an important service KDHE and I, as the State Health Officer, can perform.

We will have a great deal of activity going on within our Division of Health Care Finance as we remodel Kansas Medicaid into KanCare, an integrated, person-centered health care delivery system that focuses on improving health care outcomes rather than reducing costs by cutting provider rates and reducing eligibility. Kansas is in the lead developing this model and, as with any change, we have to deal with the anxiety that comes with this process and prevent the resistance that occurs only from misunderstanding the goals and processes we propose putting forward to develop this model. Staff is currently busy with the KanCare request for proposal process, testimony before legislative committees and in continuing with our ongoing dialogue with advocates, clients and providers.

The Division of Environment (DOE) is also very busy with storm water run-off construction permits, concentrated animal feeding operations issues and all the other regulatory activities. We are also developing the right model for Kansas that will deal with new issues such as the waste from horizontal drilling that is increasing in south-central Kansas. Additionally, DOE staff remain, very busy across the state functioning in their usual regulatory capacity. I'm very pleased to continue to hear from Kansans about their positive interactions with KDHE staff.

The Division of Public Health is dealing with grant applications for our various federally directed programs as well as putting out the Aid-to-Local grants for our local partners. We remain busy with the licensing, surveying and regulatory processes KDHE is responsible for across our state, and many of these operations are conducted in partnership with local agencies. I'm very pleased to see how well this collaboration serves our local communities and business.

We have many programs going on every week across KDHE and I'm glad I've had an opportunity to be able to stop by and visit with a few of these and look forward to continuing to do this.

Please feel free to contact my office if you have any questions, concerns or ideas you would like to promote.

**Congratulations Thomas County Health Department!**  
**Receives National Health Community Grant**  
 (click the Thomas County logo to read the complete article)



## In the Spotlight – Seward County Health Department

by *Martha Brown, Administrator  
Seward County Health Department*

Each year in Oct., Seward County Health Department (SCHD) participates in the “Breast Cancer Awareness,” contest sponsored by the Southwest Medical Center. Participants decorate their offices and clinics in a designated theme. The 2011 theme was, “Building Towards A Cure.” The SCHD building was decorated with a construction site theme. There was, “Caution Women At Work” signs, caution tape and caution cones throughout the building. Staff wore breast cancer awareness shirts and pink hard hats. All of the doors were covered in pink paper with educational and inspirational words. Staff also had a drawing to give away a free mammogram screening certificate. The money to purchase the certificate was donated from the Needles and Friends Quilt Guild.



Although the SCHD clinic didn't win a prize this year, much love went into our efforts. Most of us have been affected by breast cancer in some way, having a friend or loved one diagnosed. Some of those have lost their battle but many, many more have survived. Being affected has taken on a whole new meaning for those of us at Seward County Health Department in the past two years. Standing in the picture with the SCHD, “Steps To A Cure” ladder, are two very special ladies.

Marsha Moore found a lump in her breast while in the shower one morning in June of 2010. Having one of our own affected certainly had an impact on all of us. Then soon after Marsha completed treatment, Chris Hammond found herself walking down a similar path.

Marsha and Chris have both worked at the health department for many years. Chris started in 1994 and Marsha in 1996. They've seen many changes in Public Health over the years, and have seen employees come and go. Although no one is indispensable, we could never imagine SCHD without either of them.

Marsha completed treatment on Jan. 25, 2011, and Chris finished hers in Dec. 2011. Although their journeys were different, their bravery and faith have inspired all of us. Knowing and loving them has been an honor. So we continue to teach Self Breast Exams, hand out pamphlets, and refer women for mammograms all with a new resolve to do our part, and we do it in honor of Marsha and Chris.

## Aid to Local Grants Now “Live”!

by *Jane Shirley, Director Local Health Program  
Bureau of Community Health Systems, KDHE*



Each year the Kansas Department of Health and Environment (KDHE) makes federal and state funds available to local units of government and other eligible agencies to support public health services in local communities. The goal is to support services which maintains and improve the health of Kansas residents. The links for all documents and instructions for funding programs within the “Aid to Local” (ATL) grant package have been updated and were released Jan. 13. Submission deadline is March 15, 2012. Some

changes have been made to grant documents and instructions. For all ATL document and process questions, contact Pat Behnke at [pbehnke@kdheks.gov](mailto:pbehnke@kdheks.gov). Submit program-specific questions to the program contact person listed in each “Categorical Grant Fund” document. For complete information, visit the website by clicking the image of Kansas above.

## In the Spotlight

### Kansas Public Health Leadership Institute and Core Public Health

by Suzanne R. Hawley, PhD, MPH, Chair and Professor  
Department of Public Health Science, Wichita State University



I hope your new year is off to a great beginning! At the turn of the year, it's natural to reflect on accomplishments and form resolutions. At this time I want to thank you all for your contributions to the Kansas Public Health Leadership Institute (KPHLI) and the Kansas Core Public Health Program (CPH). You have all shown great dedication to, and support of, public health workforce development in Kansas.

CPH has provided an essential foundation in core public health skills--skills which are key to the current national accreditation movement. (1 year program)

#### Impact of CPH:

- 64 counties represented with participant in program
- 34 participants in current 2011 class
- 41 group and individual final projects from 2009-2010 covering all 10 essential services

Since its formation in 2003, KPHLI has positively impacted the public health system in Kansas, offering a significant return on the financial investment of its funders. For example:

- 178 graduates and current scholars in 8 training cycles as of June 2011
- 144 individual and team capstone projects as of July 2011
- Scholar projects have resulted in regional and national recognition and awards
- Additional funding from scholar projects ranging from \$1,000's to \$1,000,000 to support Kansas Public Health efforts
- 20 national, regional, and local presentations based on program data
- 14 national or international peer-reviewed publications
- Over \$50,000 in in-kind time donated by KPHLI mentors each year
- Significant increases ( $p < .001$ ) in all public health leadership domains and national public health core competency domains following KPHLI training
- Scholars from 45 of 105 counties



We feel very fortunate to have formed so many partnerships around the state, and we congratulate you for the local, state and national recognition you've earned for your work. CPH and KPHLI have significantly impacted the Kansas public health system. Your capstones have both supported the core functions of public health and helped agencies collaborate and prepare for accreditation.

We have received many inquiries about when the next KPHLI and CPH cycles might open for applications. Currently, the plan is for both programs to go on hiatus after the current cycles end in April 2012. Recruitment for new training classes will be postponed until base funding is secured for the programs to continue.

The KPHLI and CPH faculty and staff welcome any suggestions you may have for sustainability! Of course, we will update you when we have further news about potential avenues of support.

For more information on how you can support KPHLI and CPH contact Suzanne Hawley at 316-978-6516 or [suzanne.hawley@wichita.edu](mailto:suzanne.hawley@wichita.edu); or Linda Frazee at 785-296-3641 or [lfraze@kdheks.gov](mailto:lfraze@kdheks.gov). Click the image of Dr. Hawley to read the complete article.

Stay tuned for more information on a March event for KPHLI Scholars, CPH graduates and friends to celebrate the past and plan for the future!



**REGISTRATION COMING SOON!  
GOVERNOR'S PUBLIC HEALTH  
CONFERENCE  
CHALLENGE OF CHANGE:  
DEVELOPING AN EQUITABLE PUBLIC  
HEALTH SYSTEM  
APRIL 24-25, 2012  
PUBLIC HEALTH - MCH PRE-  
CONFERENCE APRIL 23, 2012**

## Calling One and All - Join the Monthly Public Health Conference Call

*by Jane Shirley, Director Local Health Program  
Bureau of Community Health Systems, KDHE*



**Public Health**  
Prevent. Promote. Protect.

Kansas Department of Health and Environment (KDHE) invites all local public health agencies, interested hospitals and public health regional coordinators to participate every fourth Tue. of each month at 10:00 a.m. in a statewide public health conference call. Dr. Moser will lead off these conversations with an update on news from KDHE and other timely statewide public health developments. In addition, staff from the Disease Surveillance and Local Public Health sections will participate in each call. Other "briefings" will be delivered by a variety of KDHE programs and sections when they have news or recent developments to share.

To join: call 866-620-7326/Conference Code: 5381244974. During each call, questions may be forwarded to [msteele@kdheks.gov](mailto:msteele@kdheks.gov). Every attempt will be made to answer all questions during the call; or follow-up provided as needed. Notes will be taken and posted following the calls on the KDHE, BCHS website. Click the Public Health logo above to link to the future call notes page.

## Immunization Billing Survey – Local Health Department Participation Needed!

*by Stephanie Lambert, Project Manager  
Kansas Foundation for Medical Care*



The Kansas Department of Health and Environment (KDHE) Immunization Program was recently awarded Prevention and Public Health capacity building grant funds for an immunization billing project. KDHE has contracted with the Kansas Foundation for Medical Care, Inc. (KFMC) to conduct the activities associated with the development of a statewide strategic plan to support local health department billing of immunization services for privately insured clients.

KFMC is currently conducting a survey of all Kansas local health departments to better understand the billing capabilities, activities and barriers of each local health department. The survey was distributed by email to the Administrator at each health department on Jan. 18, 2012. By responding to the survey, each health department will ensure the strategic planning process considers the needs and interests of all Kansas communities.

The survey response deadline is Feb. 20. Please contact Stephanie Lambert-Barth, Project Manager, at [slambert@kfmc.org](mailto:slambert@kfmc.org) or 785-271-4137 if you have questions about the project or the survey.

## K-SERV Accepting Volunteers and Local System Administrators

*by Emily Nickel, Planning and Volunteer Coordinator  
BCHS, KDHE*



K-SERV, a secure registration system and database for volunteers willing to respond to public health emergencies, has registered over 2,000 interested volunteers throughout Kansas since going live in 2007. K-SERV, which stands for the Kansas System for the Early Registration of Volunteers, is part of a national program, called ESAR-VHP, which encourages the pre-registration and pre-credentialing of volunteer health professionals. The aim is to have a list of pre-identified volunteers whose health-care credentials have been verified and are available for ready deployment in case of a disaster or incident. The K-SERV system also allows for the registration of non-healthcare volunteers in addition to volunteer health professionals.

The database is maintained by the Kansas Department of Health and Environment. System administrators, however, will be located throughout the state. If an event requiring volunteer assistance occurs, appropriate local public health officials will use K-SERV to generate a list of potential volunteers based on information provided during registration, minimizing the role of the state in local incidents. Volunteer data entered onto the system is considered highly confidential and is protected by federal, state and local laws governing security and confidentiality.

Health and medical entities have the opportunity to become Local K-SERV Administrators. If you are interested in becoming an administrator, please contact Emily Nickel at [enickel@kdheks.gov](mailto:enickel@kdheks.gov) or 785-296-5201.

If you are interested in volunteering to help Kansans, register today by clicking on the K-SERV logo. Follow K-SERV on [Facebook!](#)

## Revised Kansas Planning Standards

*Michael McNulty, Director of Homeland Security Operations  
BCHS, Kansas Department of Health and Environment*



The Revised Kansas Planning Standards (KPS) are complete and have been approved by the Kansas Planning Standards Revision Committee. They can be found on the Kansas Division of Emergency Management (KDEM) website (click logo).

As of Jan. 5, 2012, KDEM will review and approve County Emergency Operation Plans (CEOPs) based on the 2012 KPS. All counties will be required to use the 2012 KPS when reviewing and updating their respective CEOPs. CEOPs currently in the "approved status" will remain in such status until their five year review date. You may view the CEOP status map indicating your approval date on KsMAP (Kansas map on a secure web-based decision support tool for use in emergencies through the Kansas Division of Emergency Management).

One goal of the Kansas Division of Emergency Management (KDEM) is to develop, in partnership with county and local governments, an Integrated Emergency Management System (IEMS) that is responsive, risk-based and all hazards in approach. Vital to this system are CEOPs that document policies for accessing and allocating resources to supplement operational needs at the local and state level.

The KPS are intended to be an all-encompassing guide to develop and review CEOPs. This standard clarifies the mitigation, preparedness, response and recovery planning elements that warrant inclusion in CEOPs. The KPS are only a part of an integrated planning process that requires determining best judgment and implementing policies in all phases of a disaster or event.

The KPS encourages Local Emergency Planning Committees (LEPCs) to address all hazardous material issues that threaten their jurisdiction in a single CEOP instead of relying on separate plans. The coordination of all local planning efforts is key in eliminating duplication and conflict between plans. This partnership contributes to the creation of a strong local planning structure which includes governmental agencies, volunteers and the private sector.

The web-based software system - Integrated Super System: Bold Planning Solutions was developed by KDEM is encouraged to be used for plan development and required for plan storage and review. Training on the "Integrated Super System" will be conducted by KDEM and Bold Planning Solutions beginning in May 2012 and is expected to be complete by Dec. 2012.

If access to the system is required before this date, please coordinate with Nancy Lamb, KDEM Planner for assistance. Once CEOPs are initially approved by KDEM using the Super System, reviews and recommendations will be made at the request of the County.

Pursuant to [KSA 48-928\(d\)](#) and [KSA 48-929\(d\)](#), KDEM has set approval requirements for the Basic Plan and all ESFs to be reviewed and reapproved every five years by KDEM. In compliance with the [Emergency Planning and Community Right-to-Know Act](#) (EPCRA) and Public Law 99-499 Section 303 [42 U.S.C. 11003], ESF #10 is required to be reviewed annually by the local LEPC, County Emergency Management, and KDEM.

If you have any questions or concerns about CEOPs, the 2012 KPS, or the "Integrated Super System" please contact Nancy Lamb, KDEM Planner at 785-274-1981 or [nancy.j.lamb@us.army.mil](mailto:nancy.j.lamb@us.army.mil).

## KU Public Health Nursing Graduate Student Joins KDHE for Leadership Practicum

*by Brenda Nickel, Director  
Center for Performance Management, KDHE*



Silvera "Sylvia" Ford a graduate nursing student with the University of Kansas School of Nursing, has joined the Kansas Department of Health and Environment (KDHE) for her final semester to complete an intensive practicum in a community/public health setting. She is currently pursuing her Master's degree in Public Health Nursing, and plans to graduate in the spring of 2012.

Brenda Nickel, Director for the Center for Performance Management, is serving as Ms. Ford's clinical preceptor for the semester. As part of her leadership practicum, Ms. Ford is interested in working on a project that incorporates the Public Health Accreditation Board (PHAB) Standards and Measures and public health nursing competencies and will be developing a special project incorporating these two interests. The leadership practicum is individually planned and arranged to build on the student's course of study and experience in accordance with the type of leadership/advanced practice role the student wishes to pursue (manager, planner, consultant, educator and clinical specialist). The practicum will include a focused project such as development of a program, program evaluation and/or program marketing (KU,

2010, no page number). In addition, she'll be co-presenting with her preceptor at the Governor's Public Health Conference to be held at the Wichita Marriott, April 2012.

Ford is a Board Certified Infection Preventionist at the University of Kansas Hospital. In this role she collaborates across disciplines to ensure patients are cared for in a manner that prevents the spread of infection. Some of her responsibilities include identifying hospital acquired infections, trending and analyzing data and implementing evidence based practice. She graduated from St. Luke's School of Nursing in 1997, and started working at the University of Kansas Hospital that same year. She has been a nurse for 15 years, working in Neurology, Kidney/Liver transplant, Orthopedic and Gastroenterology. For the last ten years, she has been an Infection Preventionist during which time she has been an active member in the local Greater Kansas City Association of Professionals in Infection Control (APIC). Ms. Ford also has experience in presenting to diverse audiences at the local and national level. In March 2011 she presented at the Biannual APIC educational seminar on, "Emerging Pathogens and Isolation." In June 2011, at the National APIC conference, she presented a poster entitled, "Reducing VRE bacteremia in a Hematology/Oncology unit." She has held terms of service with the Greater Kansas City APIC chapter, and is a current member of the Kansas Public Health Association. Ford received a certificate of recognition for exceptional personal and professional commitment in nursing from the Greater Kansas City Black Nurses Association in 2008.

The collaboration between KDHE and the KU School of Nursing provides an opportunity for both the nursing student and the staff at the state health department to develop learning objectives that supports the student's learning through a clinical practicum consisting of a minimum of 192 hours and providing an opportunity for the KDHE to serve as an "academic health department".

### Medical Reserve Corps Celebrates 10 Year Anniversary

*by Emily Nickel, Planning and Volunteer Coordinator  
BCHS, KDHE*



This year marks the 10th anniversary of the creation of the Medical Reserve Corps (MRC), which was announced during President George W. Bush's, 2002 State of the Union address, and officially launched as a demonstration project in July of 2002. Over these past 10 years, the program has grown to over 200,000 volunteers in almost 1,000 units across the country. In Kansas, two units, the Greater Kansas

City MRC and Shawnee County MRC, were the first two units established in 2002. Since then, the Kansas MRC Program has expanded to over 1,800 volunteers in 17 units, including a state-wide Veterinary MRC unit.

The Greater Kansas City MRC (MRCKC) is a bi-state unit - Kansas and Missouri - that serves an area of 11 health departments, nine counties and 120 cities. Currently, the unit has over 700 volunteers. When asked how the MRCKC has contributed to the Kansas City Metro communities, several MRCKC volunteers felt that increasing health and preparedness awareness was the biggest contribution.

"...providing opportunities for community education in the area of disaster management and personal and family preparedness..." said Harriet Pintenich, seven years of MRC volunteer service.

"...raising awareness of supportive services available during times of disaster..." said Nola Bienhoff, three years of MRC volunteer service.

Looking back at the past 10 years, the Shawnee County MRC is most proud of their growth in developing community partnerships, said Jennifer Zeller, Shawnee County MRC Unit Coordinator.

"The Shawnee County MRC has a strong relationship with local schools. Each of the five districts as well as the college, have nursing and other staff as MRC members. This increases communication between the Health Agency, the schools and school families, which improve community health education and disease reporting," said Zeller.

If you would like more information about joining an MRC unit or starting one in your community, visit the Kansas MRC website by clicking on the MRC logo above or contact Emily Nickel, Planning and Volunteer Coordinator at [enickel@kdheks.gov](mailto:enickel@kdheks.gov) or 785-296-5201. In addition, the Kansas MRC program is now on [Facebook](#), make sure to "Like" us!



## Hospital Lures Rural Doctors with Unusual Offer



by Roxana Hegeman  
The Associated Press

Ashland Health Center had lost the last doctor in a succession of those who came to the remote Kansas town and left again. A sole physician assistant kept watch over the 24-bed facility and its adjacent nursing home. It was on the verge of closing. Then officials at the hospital, seeking to reverse the drain of talent symptomatic of what happens across rural America, embraced an unorthodox approach to bring doctors back. Click the hospital image to read about Ashland Health Center's unique recruitment approach.

## Bureau of Community Health Systems - Kansas Rural Health Information System

by Sara Roberts, Director Rural Health Program  
BCHS, KDHE

**Join  
Today!**

The Kansas Rural Health Information System (KRHIS) is an electronic resource tool open to the public and is free to use. The service allows users to register on-line to receive email notices of a broad range of health issues and offers the ability to search an on-line database of health information.

KRHIS is designed to provide a variety of useful information based on users unique interests. Information areas include:

- Grants, Funding and Federal Updates
- Policy, Regulation and Reimbursement
- Education and Training
- and much more (information is not limited to rural topics and issues)

To receive notices, click the KRHIS logo to register and select categories. KRHIS notices can be viewed at the website without registering. Registration information is only used internally at KDHE for system operations.

If you are interested in sending announcements through KRHIS, contact Allen Sester, Rural Health Consultant, at [asester@kdheks.gov](mailto:asester@kdheks.gov).



## Tools for Conducting a Community Health Assessment and Engaging Your Local Community



by Sara Roberts, Director, Rural Health Program  
Bureau of Community Health Systems, KDHE

The Bureau of Community Health Systems is pleased to announce three new KS-TRAIN on-line courses that offer an introductory look into conducting community health assessments, engaging your local community and public health data. These trainings are available at no cost to you, and can be accessed by clicking the KS-TRAIN logo.

"Community Tool Box Module 1: Conducting Community Health Assessments and Community Health Improvement Curriculum," Course #1030284, by the University of Kansas Work Group for Community Health and Development, outlines steps for assessing community health, including how to engage community members, assure ownership, identify community assets and set priorities for improvement. This module is intended for staff from state and local health departments (including those seeking accreditation), hospital staff (considering new federal requirements for non-profit hospitals) and those in community benefit programs, non-profit organizations and community leaders/members.

"Community Facilitator 101 Training," Course #1030875, from the Rural Health Program, Bureau of Community Health Systems, Kansas Department of Health and Environment, is designed to discuss the process of facilitating a group including selecting a community facilitator, building the group of individuals to serve on the community group, some organizational basics for success and tips on managing the discussion. This course includes interviews with three people who were facilitators for their community's health needs assessment projects, through an approach called Kansas Rural Health Works. These facilitators discuss their experiences, from worst fears and challenges to successful strategies and advice.

"Kansas Health Matters," Course #1031471, is the archived webinar conducted by the Kansas Hospital Association and partners to introduce a website developed for hospitals, health departments, policy makers, community planners and community members to learn about health issues, identify improvements and collaborate for positive change. This resource is specifically designed to assist hospitals and health departments in conducting community health needs assessments and developing community health improvement plans.

## Community Health Assessment, An Excellent Investment

*By Michael Bilton, VP of Education  
Health Research and Educational Trust*

*A community health assessment yields valuable market information and builds relationships*



A community health assessment can pay off in a number of ways for hospitals. While some states and locales require hospitals to produce an assessment of local health needs every few years, doing so is an excellent investment in information and relationships regardless of your particular environment.

At its core, community health assessment is about collecting information on the health status of the population you serve, and using that information to inform decisions about hospital service lines and health promotion and prevention programs.

This simple statement belies a multifaceted undertaking that requires careful planning, specific skills, funding, collaboration, data collection, priority-setting, communication and action planning to meet observed needs. The mechanics of community health assessment can be acquired and understood easily through a variety of resources, including the Association for Community Health Improvement's Community [Health Assessment Toolkit](#) and the National Association of County & City Health Officials' "[MAPP](#)" process used by many local health departments to assess needs in conjunction with hospitals.

But what are the benefits of initiating an assessment, and how can hospital executives use the results? A community assessment that provides a comprehensive picture of your community's health status and unmet needs and not only its health care needs can serve several strategic functions.

First, the information gleaned from assessments can help to target your community health programs. Like all hospital resources, community outreach and wellness dollars need to be spent wisely and for specific results. Understanding the prevalence of chronic health conditions, access to care barriers and other health issues and specifically whether they are more severe in particular neighborhoods or among certain age, racial or ethnic groups can help direct resources where they will have the biggest impact.

Second, assessments present an excellent opportunity to connect with your local community and to strengthen partnerships with your public health department, schools, YMCA, United Way, community agencies and other hospitals. Collaborating with these mission-focused community stakeholders to collect data and set health priorities can build trust and a foundation for shared responsibility and commitment to tackle community health needs. The assessment process also can be a venue to tell your hospital's story of community service to influential advocates for health care.

And for nonprofit hospitals, there is a new spotlight on community health assessment with the release of the Internal Revenue Service's updated Form 990 and new Schedule H. In addition to asking hospitals to report on their "community health improvement services," Schedule H specifically inquires "how the organization assesses the health care needs of the communities it serves."

Community health assessment can be a window to unmet needs, a guide to targeting limited resources, a vehicle for strengthening important relationships, and an invaluable tool for keeping your community healthy.

## Recession Takes Bite Out of Nation's Public Health Nursing Infrastructure

*by BCHS, KDHE*



The Robert Wood Johnson Foundation (RWJF) recently published in the "Human Capital" an article on how the recession has taken a bite out of the nation's public health nursing infrastructure. Budget cuts are the latest challenge to public health nurses at a time when the sick, the poor, the elderly and the underserved are relying on their services.

State and local legislators around the nation have cut funding for local health departments, where many public health nurses work. In July of 2011, 45 percent of the nation's local health departments reported reduced operating budgets compared to the previous year, and more than half expected cuts in the next fiscal year, according to the National Association of County and City Health Officials (NACCHO).

Rebuilding the public health nursing infrastructure may not happen even when the economy fully recovers, warns Joy Reed, EdD, RN, FAAN, a RWJF Executive Nurse Fellow alumna (1998-2000) who is head of public health nursing for the North Carolina Division of Public Health. Policy-makers do not have a firm understanding of the essential services provided by public health nurses, she said. "It's really time to get this message out. If we don't...the number of public health nurses will continue to decline."

The news isn't all bad, however. The health reform law passed in 2010 included provisions that emphasized prevention and health promotion, which is largely the work of public health nurses. The law is expected to draw attention to the work done by public health nurses and create demand for their services.

Also in 2010, the Institute of Medicine (IOM) released [a report on the future of nursing](#) that included recommendations in the areas of nurse education, nurse leadership and scope of practice that public health nurse leaders say would aid the field. The IOM report says that allowing nurses to practice to the full extent of their abilities and education will enable nurses to be more effective and in greater demand at public health agencies. Better educated nurses will be able to provide better care. And public health nurses in positions of leadership will have a greater influence on policies that affect population health and may be able to fend off deeper cuts to state and local health departments and to public health nursing positions in particular. Click the RWJF logo to read the complete the article.

## Training Announcements

Submitted by the Bureau of Community Health Systems

### Pharmacology Education Series

by Sherry Pryor, Senior Coordinator  
KUMC-AHEC



Kansas University Medical Center (KUMC) Area Health Education Centers (AHEC) is pleased to announce a Pharmacology Series of one hour training via ITV or Codian (webcast) to be held at noon on Thurs. in Feb. Sign up for the whole series or only for those that interest you. Click the KUMC-AHEC logo for further details.

Topics and Objectives are as follows:

- Feb. 2 - Type 2 Diabetes; Speaker: Shirley Dinkel, PhD, ARNP, ANP-C, FNP-C, CNS, Associate Professor, Washburn University School of Nursing
- Feb. 9 - What You Need to Know About Lipids in One Hour; Speaker: Jim Backes, PharmD, Associate Professor, Schools of Pharmacy and Medicine, Assistant Director, Atherosclerosis and LDL-Apheresis Center, The University of Kansas Medical Center
- Feb. 16 - Polypharmacy; Lisa Wells, PharmD, Medicine Shoppe
- Feb. 23 - Medication Tips & Health Literacy; Linda Radke, PharmD, BCPS, Salina Regional Health Center Pharmacy Clinical Coordinator

If you have questions about the course contact Sherry Pryor at 620-235-4040.

### Homeland Security Exercise and Evaluation Program (HSEEP) Training Available in 2012

by Cait Purinton, MEP, Exercise & Training Coordinator  
Bureau of Community Health Systems, KDHE

The 2012 dates for the Homeland Security Exercise and Evaluation Program (HSEEP) Training Course have been posted in KS-TRAIN at <http://ks.train.org>, Course #1030674. Dates are:

- Feb. 7-9, Pittsburg
- April 17-19, Hays
- July 24-26, Lindsborg/Crisis City
- Tentative Dates: November 13-15, Garden City (These dates and location have not been posted in TRAIN yet.)



Homeland  
Security

The course number for the 2012 HSEEP course has been updated from the original course number listed on the preparedness grant work plans. Look for course #1030674.

This live training will fulfill local health department [work plan](#) task #3 and regional work plan task #5. The deadline for completing the public health work plan deliverables is Aug. 9, 2012. The Hospital Preparedness Program (HPP) [guidance](#) also identifies federal requirements to follow HSEEP guidance for all exercises funded by HPP. The deadline for the HPP grant deliverables is June 30, 2012.

Please let Cait Purinton, [cpurinton@kdheks.gov](mailto:cpurinton@kdheks.gov) or Michael Paz-Torres, Kansas Division of Emergency Management, [michael.paz@us.army.mil](mailto:michael.paz@us.army.mil) if you have any questions about the HSEEP Training Course. Click the Homeland Security logo to read a complete listing of HSEEP, Exercise Design for Discussion-Based Exercises and Exercise Design for Operations-Based Exercises training.

## Performance Improvement Technical Assistance Teleconference Call

*by National Association of County and City Health Officials*



Mobilizing for Action through Planning and Partnerships (MAPP) has invited you to the, "February Performance Improvement Technical Assistance Teleconference Call." The teleconference call will be held on Feb. 9, from 1-2 P.M. Topics may include:

- How can I begin a community health improvement planning process to develop two of the Public Health Accreditation Board prerequisites community health assessment (CHA) and community health improvement plan (CHIP)?
- What framework or model should I use for completing a CHA and CHIP?
- How can we structure our partnerships/coalitions to lead CHA and CHIP initiatives?
- What are common data sources we can use for our CHA?
- How can we align our CHA work with the assessment work of hospitals, United Way, and other local, state, and national initiatives?
- Is MAPP right for my community?
- What resources are available to help me prepare for accreditation?

For more information or to register for the teleconference click the MAPP logo above.

## Kansans Optimizing Health Program Training

*by Lisa Williams, Program Manager  
Bureau of Health Promotion, KDHE*



Kansas Department of Health and Environment (KDHE) and Kansas Department on Aging (KDOA) are pleased to offer the upcoming leader trainings in the [KOHP](#) (Kansans Optimizing Health Program) for the first half of 2012. Organizations and/or individuals interested in offering this 6-week program are invited to apply to send teams of two to the 4-day training. Applications must be received by the registration deadline associated with the training you are applying for. Applicants will be notified by e-mail when their application has been received by KDHE. Applicants accepted into the training will be screened and notified by e-mail near the registration deadline date. Hotel information and program location will be provided in the acceptance notification.

Upcoming sessions are:

- Feb. 16, 17, 23 and 24 in Wichita
- April 12, 13, 19 and 20 in Dodge City
- April 12, 13, 19 and 20 in Kansas City
- April 25 and 26, May 2 and 3 in Salina

Please click the KOHP logo for registration information about the Chronic Disease Self-Management Program.

## Epidemiology Training for Local Health Departments, Module 2, Online Course

*by the KALHD and the BCHS, KDHE*



The Kansas Association of Local Health Departments (KALHD) and the Kansas Department of Health and Environment (KDHE) have re-tooled the content from the Nov. 16, 2011, live event "KALHD-KDHE: Epidemiology Training for Local Health Departments, Module 2," into an online course for KS-TRAIN found at <http://ks.train.org>, Course ID 1031581. The three hour course includes: video, activities and a post assessment.

The Epidemiology committee (KALHD and KDHE) has determined that there is more value in making Module 2 a shorter online course that can be completed from your workplace, in order that the local public health workforce can focus time and resources in attending the, "KDHE-BEPHI: Epi-Trax Powered by TriSano Introductory Training," Course ID 1030847. The EpiTRAX training is a live event being conducted across the state to provide instruction for the local public health workforce on the state's new disease surveillance system.

All local public health staff members who require disease investigation, reporting and surveillance education are encouraged to enroll in the courses as part of the Epidemiology Training Plan through KS-TRAIN. The course completion data will be used for course completion tracking purposes through the e-QIPM performance management system. Click the KALHD logo to download the Training Plan enrollment instructions and Epidemiology Training for Local Health Departments Guidance document.

For questions concerning the KALHD Epidemiology in Practice preparedness grant requirements contact Michelle Ponce, Executive Director, KALHD at [mponce@kansascountries.org](mailto:mponce@kansascountries.org) or 785-271-8391.

## Bridging the Gap™ in Kansas, 2012 – Bilingual Interpreter Training

by Cathy Anderson, Manager

Language and Cultural Services, Jewish Vocational Service (JVS)

Bridging the Gap is a forty-hour training program for beginning and intermediate medical/social service bilingual interpreters. The course offers participants a thorough grounding in the Interpreter's Code of Ethics, the roles of interpreting, cultural competency and much more. The course is presented by Jewish Vocational Service (JVS) and taught by Raul O. Guerrero. Participants will take a final exam on the last day of class. A certificate of completion is awarded based on five-day attendance and a passing score on the final exam.

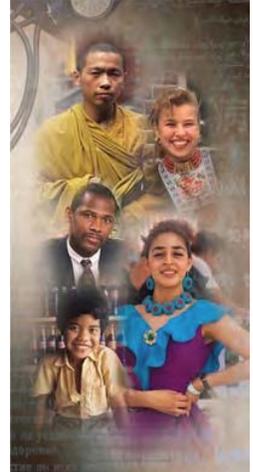
In 2012, this course will be offered in:

- Wichita at Wesley Medical Center, Apr. 9-13 from 8-5 P.M.
- Garden City at the Finnup Center for Conservation and Education, Lee Richardson Zoo, Apr. 23-27 from 8-5 P.M.

The course is sponsored by the Kansas Department of Health and Environment (KDHE) and is offered free of charge.

All participants must submit a JVS application, JVS survey and apply online through <http://ks.train.org> course #1023672. Cathy Anderson, the manager of Language and Cultural Services, will speak with you before you can enter the class. Applicants will be asked to join a list of voluntary interpreters through K-SERV. Volunteer interpreters may be called on to volunteer their services in case of a state emergency, such as a natural disaster or weather emergency. If you have questions about the program, please contact Cathy at 816-471-2808, ext. 1124 or [canders@jvskc.org](mailto:canders@jvskc.org).

Bridging the Gap is an example of a course that fulfills the interpreter training requirement for applying to the Certification Commission for Healthcare Interpreters (CCHI) to become a certified interpreter. In addition to other requirements, an applicant must have forty hours of medical interpreter training to qualify to take the exams to become credentialed through CCHI. For more information on the application process and a description of the two exams required for becoming certified, click the image above. Feel free to contact Cathy Anderson, (contact info above) a commissioner with CCHI, who can answer your questions about applying for the certification tests.



## Accreditation Corner

Submitted by the Bureau of Community Health Systems

### Collaborating through Community Health Assessment to Improve the Public's Health



The National Association of County and City Health Officers (NACCHO) Mobilizing for Action through Planning and Partnerships (MAPP) staff recently published an issue brief on Collaborating through Community Health Assessment to Improve the Public's Health. The document is a four page report describing the current state of community health assessment across the country and encourages continued and expanded collaborative work between local health departments, hospitals, and other partners. The report is divided into three sections: assessment, a systems-collaborative approach, and epidemiologic and community considerations. Resources for additional information are also provided. The issue brief might be relevant to other projects working on assessments and is available on their website by clicking the NACCHO logo above.

If you have questions related to the MAPP project, contact Grace Ibanga at [gibanga@naccho.org](mailto:gibanga@naccho.org).

### Structured Evidence Queries (SEQs) for the Healthy People 2020 Leading Health Indicators



Healthy People 2020 (HP2020) is a ten-year health promotion program for improving the health of all Americans. Led by the U.S. Department of Health and Human Services, HP2020 is organized into 42 subject areas with 600 public health objectives. These objectives, developed and selected through consultation with a broad range of organizations, groups and individuals, provide a framework for monitoring and measuring improvements in health status of the American population over the ten-year period from 2010 to 2020. Click on the Partners logo to use the search strategies and help support best practices for community health improvement.

### Accreditation Preparation & Quality Improvement



NACCHO provides tools, resources and training opportunities to local health departments (LHDs) to assist in their preparation for accreditation and in using quality improvement (QI) processes to improve performance and meet Public Health Accreditation Board (PHAB) standards. Click the PHAB logo for more information.

Sections include:

- Accreditation and QI Webinars
- Accreditation Preparation Toolkit
- Accreditation E-Newsletter
- Performance Improvement Teleconference Series
- QI Toolkit
- Roadmap to a Culture of Quality Improvement

## Funding Opportunities

Submitted by the Bureau of Community Health Systems

### Voices for Health Equity Project – Deadline March 1



The Kansas Department of Health and Environment (KDHE) is issuing a call for entries for the *Voices for Health Equity* project. The Center for Health Equity wants to hear how organizations are working to achieve equity in health among groups of people living in Kansas communities through photo stories. Submissions may come from health departments, federally-qualified health centers, tribal health and Indian Health Service clinics, partnering organizations and community coalitions in Kansas.

The three main objectives for this project are:

- Create awareness of the factors which influence equity and the health of Kansans.
- Engage a diverse mixture of Kansans and provide a platform for their voices to be heard.
- Start a conversation about the ways we can make Kansas a healthier place for everyone.

Deadline for submissions is March 1, 2012. Five winning stories will be made into Digital Stories, presented across the state and online. Winners will receive \$200 each for participating. To learn more click the image above.

### APHA Get Ready Scholarship - Deadline March 26



To raise awareness about emergency preparedness, American Public Health Association (APHA) is offering its fourth annual Get Ready Scholarship. The scholarship is a component of APHA's Get Ready campaign, which works to help Americans prepare themselves, their families and their communities for all disasters and hazards, including pandemic flu, infectious disease, natural disasters and other emergencies.

Six scholarships of \$500 each will be awarded:

- Two scholarships for high school seniors
- Two scholarships for college undergraduates
- Two scholarships for graduate students

Winning students will also receive a free one-year membership in APHA. Click the scholarship logo for more information on the Get Ready Scholarships.

### Future of Public Health Award – Deadline March 16



The Public Health Foundation (PHF) has launched a national award program to promote use of quality improvement (QI) to influence positive outcomes in Winnable Battles.

The Future of Public Health Award (FPHA) is a unique opportunity for state, tribal, local, and territorial health departments to receive onsite technical assistance to build capacity in QI and advance programs to improve outcomes in Winnable Battles.

Award recipients will receive up to three days of on-site technical assistance and training from an expert in QI

tools and methods, resource material on best-practices, and much more. Applications for the 2012 awards are being accepted through Mar. 16. For eligibility requirements and additional information, visit their website by clicking the PHF logo.

## News and Resources

Submitted by the Bureau of Community Health Systems

### Serving Limited English Proficient Individuals: Title VI of the Civil Rights Act of 1964



Health care providers often feel challenged by the diversity of clients, their languages and cultures presenting for services. When must an interpreter be provided? How do I assess language needs? While most health practices and providers are familiar with the legal requirements to provide meaningful access to people of limited English proficiency, new staff may require an easy to access overview. The Office of Refugee Resettlement has made available a training video Title VI of the Civil Rights Act of 1964: Implications for Persons who are Limited English Proficient. To view the video click the Health and Human Services logo.

### Impact of the Recession on Local Health Departments



The Journal of Public Health Management and Practice (JPHMP) will be publishing a special March/April issue on the impact of the recession on local health departments and, "how the nation's economic recession has substantially weakened the capacity of local health departments to protect the health of their communities." Click the JPHMP logo to view the lead article or to view other research articles on this topic.

### CALPACT Webinar Series: New Media Tools for Strategic Communication



The California Pacific Public Health Training Center (CALPACT) will be presenting four webinars Jan. 19 (archived), Feb. 16, Mar. 15 and April 19. This series will provide opportunities for participants to learn how to strategically use new media and social media tools like Facebook, Twitter, and YouTube in their organization to communicate with stakeholders and target audiences; enhance community organizing efforts; raise awareness about public education campaigns; and to communicate with and influence policymakers on a topic area/issue their organization cares about.

### TRAIN Accreditation Webinar Series



The Public Health Foundation (PHF) is providing a three part series on public health accreditation that focuses on topics such as the core competencies for public health professionals and tools to develop, run and analyze self-assessments and training plans in order to meet nationally-recognized standards. Click the PHF logo to learn more.

### HealthLandscape



HealthLandscape is an interactive web-based mapping tool that allows health professionals, policy makers, academic researchers, and planners to combine, analyze and display information in ways that promote better understanding of health and the forces that affect it. The tool can be used to create maps from publicly available data sets including regional criminal justice, education, healthcare, and demographic data, allowing users to discover community characteristics and share information with health professionals, policy makers and legislators. To learn more click the HealthLandscape logo.

### Ground both Gained and Lost in the Battle Against Tobacco Use



The American Lung Association's [State of Tobacco Control 2012](#) report finds that over the past year, most states' efforts to protect children and curb tobacco-related disease failed to make progress. In contrast to most states, the federal government earned high marks for its steps to implement strong and effective action to protect people from tobacco. To learn more about this report click the Kansas Smoke-Free logo above.

## Dental Apps for iPhones and iPads

by Marcia Manter, Community Development Specialist  
Oral Health Kansas



In celebration of Feb.'s Children's Dental Health Month, Oral Health Kansas (OHK) is featuring one of the newest communication and educational tools. Dental apps for smart phones are tools families and educators can use to communicate with young people about good oral health practices. Here are four of our favorite for iPhones and iPads that teach children about dental care, answer parents' questions, and in one case, focus on tools for people with autism.

A favorite is [Pediatric Dental Expert](#). This free app provides reliable, useful and fun information for families and kids.



The app, [My Healthy Smile](#), was developed with funding from Delta Dental of Minnesota. OHK is promoting this as a useful tool, not making a recommendation to purchase it without the buyer studying it more closely at this website. Click the logo to learn more.

Thanks to Deann Mason, RDH, who conducted the original research as a student at Wichita State University and to Blake Bryant, OHK's Communication Intern from Washburn University, for his recommendations.

For more information, contact Marcia Manter, [mmanter@oralhealthkansas.org](mailto:mmanter@oralhealthkansas.org).

## Institute of Medicine (IOM) and Partners Develop a New National Initiative



As obesity continues to diminish the quality of people's lives and raise health care costs, the Institute of Medicine has joined HBO, the Centers for Disease Control and Prevention (CDC), the National Institutes of Health (NIH), the Michael & Susan Dell Foundation, and Kaiser Permanente in developing "The Weight of the Nation," a new national campaign tackling the obesity crisis. To learn more about this special four series documentary, click the IOM Logo above.

## No Change in Obesity for Adults or Children in 2009-2010



Obesity increases the risk of a number of health conditions including hypertension, adverse lipid concentrations, and type 2 diabetes. The prevalence of obesity in the United States increased during the last decades of the 20th century. More recently there appears to have been a slowing of the rate of increase or even a leveling off.

Given the health risks of obesity and its high prevalence, it is important to continue to track the prevalence of obesity among U.S. adults and children. This report presents the most recent national estimates of obesity in the United States based on measured weight and height. To read more about this report click the logo above.

## New Apps for Preparedness



Looking for new applications to add to your Smart Phone? Check out the new Disaster Apps from the National Library of Medicine and the Disaster Information Management Research Center. The tools are designed to provide mobile device users access to Web-based content. They are developed to run on specific mobile platforms, such as iOS (iPhone), Android or Blackberry. Click the Smart phone to learn more.

## Job Openings

### Lyon County Health Department

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

- [Dental Hygienist](#)
- [LPN](#)



### Reno County Health Department

The Reno County Health Department is taking applications for the following position:

- [Director](#)



### Riley County Health Department

The Riley County Health Department is taking applications for the following position:

- [Public Health ARNP](#)



---

### Sedgwick County Health Department

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

- [Registered Dietitian](#)



### Shawnee County Health Department

The Shawnee County Health Agency is taking applications for the following positions:

- [Physician](#)
- [Registered Nurse \(MCH-Outreach\)](#)



#### Public Health Connections Information

To receive the monthly E-Newsletter

Email Pat Behnke at [pbehnke@kdheks.gov](mailto:pbehnke@kdheks.gov)

Previous issues of Public Health Connections maybe found at

[www.kdheks.gov/olrh/publications.htm](http://www.kdheks.gov/olrh/publications.htm)

Send your public health news to

Pat Behnke at [pbehnke@kdheks.gov](mailto:pbehnke@kdheks.gov) or

Debbie Nickels at [dnickels@kdheks.gov](mailto:dnickels@kdheks.gov)