



PUBLIC HEALTH CONNECTIONS

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Bureau of Community Health Systems

Robert Moser, Secretary

Sam Brownback, Governor

What's Inside

ERO 41 and KDHE Reorganization..... 2

In the Spotlight - Disaster at Salina-Salina County Health Department – A Moving Story! 3

In the Spotlight – Changes in Health Homes and Lead Poisoning Prevention Program 4

Griffin Receives National Honor from NTCA 4

Voices for Health Equity Contest Project 4

Pertussis Cases on the Rise This Year 5

Public Health: A Best Buy for America 5

KDHE Partnering in Fuel Up to Play 60 6

KDHE Plans Quality Improvement Work Sessions with Public Health Foundation 6

Numana Gardens Feeds the Hungry in El Dorado..... 7

KDHE Staff Attends KAFP Annual Conference..... 8

KDHE Offers Instructional Design Training to Staff and Community Partners 8

Accreditation Corner 9

 PHAB Accreditation Defined..... 9

 Community Health Assessment/Improvement 9

Funding Opportunities.....10

 Mini-Grant Opportunities for Youth-Led Tobacco-Use Prevention Projects – Deadline Sept. 310

 Kansas Health Foundation Healthy Communities Initiative Round 210

Training Announcements.....11

 Kansas Evidence-Based Public Health: A Course for Local and State Practitioners11

 Kansas Public Health Grand Rounds.....11

 KDA and KDHE Conducting Zoonotic Disease Workshops11

 HSEEP Training12

 Community Toolbox Online Modules, Retooled12

 What's New on the CDC Learning Connection Website12

News and Resources.....13

 Weight of the Nation13

 The Prevention and Public Health Fund.....13

 State of the Air.....14

 EthnoMed14

 Graphic Cigarette Pack Labels Make Smokers Think, Study Finds.....14

 CDC Releases Older Adult Preparedness Portal.....14

 Highest-Value Preventive Services Save Billions if Applied to 90 Percent of U.S. Population.....14

 Journals Call For Integrating Primary Care and Public Health.....14

 PHF and IHI Update Resources for Public Health Quality Improvement.....14

 WHO Classifies Diesel Exhaust as Carcinogenic.....14

Job Openings15

 Finney County Health Department15

 Franklin County Health Department15

 Johnson County Health Department.....15

 Sedgwick County Health Department15

 Shawnee County Health Department15

 Wyandotte County Health Department.....15

Public Health Connections Information15

ERO 41 and KDHE Reorganization

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

As we continue to strengthen the public health system in Kansas, Kansas Department of Health and Environment (KDHE) is committed to administering value-added programs that, over time, will help us realize the results we all want to see in our communities. Through careful adjustments in the way we deliver those services, KDHE is in a much better position to support our stakeholders. Last year we aligned ourselves with the state's Medicaid agency to achieve better health outcomes for the more than 350,000 Kansans who benefit from these services. And this year we've continued that commitment by now carrying out an additional agency reorganization, one that's parallel to Executive Reorganization Order (ERO) 41, which will take effect July 1.



As part of ERO 41, the Health Occupations Credentialing (HOC) Program within KDHE's Bureau of Child Care and Health Facilities is moving to the newly created Kansas Department for Aging and Disability Services (KDADS). KDADS replaces the Department on Aging by merging with the disability services programs from Social and Rehabilitation Services (SRS). SRS is being renamed the Department for Children and Families (DCF).

Through the course of this health and human services reorganization, the core public health functions will remain at KDHE within our Division of Health. And, our Division of Environment will continue its mission to protect the public's health and the environment. The only program at KDHE impacted by ERO 41 is the HOC Program, which includes the licensure and certification of long term care personnel and the criminal record check program.

However, with the reassignment of the HOC Program to KDADS, some internal reorganization within KDHE is also needed. ERO 41 gave us an opportunity to discuss whether our public health programs are aligned properly, especially when we look at the remaining regulatory programs within the Bureau of Child Care and Health Facilities (BCCHF). The decision was made to pair those remaining child care and health facilities programs with like services in other bureaus.

We've conducted an internal reorganization within KDHE's Division of Health, and those changes are described here:

- Programming within the Bureau of Child Care and Health Facilities has merged with two other bureaus at KDHE.
- Health Facilities Program from BCCHF has joined the Bureau of Community Health Systems, which is led by Mindee Reece.
- Child Care and Foster Care Programs from BCCHF have joined the Bureau of Family Health. Rachel Berroth will serve as Director of the Bureau of Family Health (BFH). Mary Murphy will serve as Acting Director of the Child Care Program while the search for a permanent director continues.
- David Thomason, who had recently taken on the role of interim director for BFH, will continue to serve as the Kansas WIC Program Director and will play a key leadership role in the transition process as BFH's Deputy Director of Programs.

This internal reorganization will align the Health Facilities Program with other programs within BCHS that perform similar functions: Trauma, Rural Health and Hospital Preparedness. Additionally, Child Care and Foster Care align quite well with the other Family Health programs, which are largely child centered.

Local health departments, hospitals and other health care organizations can also benefit from this state-level realignment in their ongoing community health assessments, as support for data collection and other technical assistance will be strengthened with the Bureau of Community Health Systems having the hospital regulatory function alongside our local and rural health programs. These changes fit well with the Governor's Road Map for Kansas and Governor Brownback's goals that lead to protecting the wellbeing of Kansas families. Please do not hesitate to contact KDHE if you have any questions or concerns about this reorganization at 785-296-1500.

In the Spotlight - Disaster at Salina-Saline County Health Department – A Moving Story!



*by Yvonne Gibbons, Administrator, and Del Myers, Health Education Supervisor
Salina-Saline County Health Department*

*with Linda Frazee, Public Health Workforce Specialist
Bureau of Community Health Systems, KDHE*

Six weeks ago Yvonne Gibbons, Administrator of the Salina-Saline County Health Department (SSCHD) was told that the attic in the health department had structural problems. The building itself was built in the early 1900's and has three barrel roofs. Originally it was thought that work could take place to shore up a section of the attic without much disturbance to health department work at the end of the summer. Then - as more inspections took place, it began to sound like employees needed to be completely moved out of the building by the end of June.

After a structural engineer and city and county staff took a better look - it was decided the risk was too great and they needed to get out within two weeks. Staff didn't know if they were going to be able to move back in.

Health Department employees immediately (after panicking and throwing up their hands) began to pack. Ms Gibbons contacted the hospital to ask about a couple of empty buildings they had and after a few days they were working on leases in order to move the health department. Because they are a city/county health department, the city and county commissioners and the health department board had to meet in special sessions to sign the leases.

The Incident Command System was activated within the health department after the decision was made to move. Yvonne met with the section chiefs each morning and afternoon and sometimes all the staff to keep everyone informed. Some services were put on hold when the public was no longer allowed in the building. Home health, child care licensing, maternal and child health and environmental health services were able to continue after leaving the building, since they were able to be provided outside the office.

Del Myers serves as the Saline County Health Department Public Information Officer (PIO) she was lucky enough to grab her computer when they left the building. She still can't directly access the server network to update their web page. She reported it was a challenge to carry out PIO duties as well as relocate, pack, unpack and etc. She really needed someone to monitor the media, since there was a lot of chatter about the situation. Printing and faxing was not readily available, so staff relied on blast e-mail and Facebook postings.

Ms Myers advises, "Having your contacts up-to-date, especially for the media, makes it easier. However, media staff does turn over and you have to sometimes hunt them down. She had to use her g-mail for a while, until their Outlook email was back up, so keeping an alternate contacts list at home is also important. It is more time-consuming than you would think to reconstruct all of the e-mail addresses. Ms Myers stated, "We've learned a lot, and our preparedness planning sure did help".

Messages to physicians were forwarded through the hospital as the hospital keeps the medical staff list updated. Something else that really worked well was using their ADT call system for notifying staff by cell, home phone and text. They used it several times to tell staff where and when to meet to make plans for the day.

Neither of the buildings offered by the hospital are large enough to accommodate all of the staff. One of the buildings was an office space that could be (and had been) a medical clinic at one time. So, WIC, Nursing Clinic, Family Planning and the HIV Case Manager moved into that space. The rest of the staff moved into a 90 year old three story building that was once a nurse's dormitory on the same block as St. John's Hospital (which has been closed for a number of years). Both buildings are sufficient - for now, but have needed some TLC and all new wiring for phones and computers. As of June 21, SSCHD staff are still waiting for phones and some computer hook-ups.

Ms Gibbons described the last few weeks, "It was the most hectic time in our lives, by far. Because we were pushed to move out, we did little organizing for the move. So, we are still trying to find boxes, phones and other supplies. However, we are trying to take a breath and do our work. We are operational and staff are doing their jobs. If I make this sound like an easy transition, don't be fooled. It was hectic, hot, frustrating and sad. We had no time to grieve the loss of our building. However, the staff was amazing through all of this".

At this time, no one is sure if the old building is going to be remodeled or torn down. As it was, everyone was crowded, so rebuilding in the same space may not be the answer. SSCHD is keeping their eyes open for any possible space solutions that may work for them. They are going about doing business as usual, while planning for the future.



In the Spotlight – Changes in Health Homes and Lead Poisoning Prevention Program

*by Tom Langer, Director
Bureau of Environmental Health, KDHE*

This year the US Congress eliminated funding to the Centers of Disease Control and Prevention (CDC) for lead poisoning prevention which has in turn dealt Kansas a serious public health challenge.

Historically the Kansas Department of Health and Environment (KDHE) has partnered with local health departments to perform or provide funding for environmental investigations at the homes of lead poisoned children. Beginning this summer that service will no longer be available. What this means in essence is that KDHE will still be able to identify children who are poisoned through screening and testing methods but we will not be able to assist the families or local health departments in the unsafe situation. Physicians who will be working with the children and families will no longer have access to the identification of the source of the poisoning and no solutions or environmental instruction will be available from KDHE.

While KDHE has worked diligently for more than a decade to build relationships and infrastructure it is not yet clear, if or how local health departments will be able to respond to these environmental health challenges. KDHE will continue to maintain a regulatory program that administers the rules and regulations connected to lead-based paint in housing in Kansas, but the majority of the public health outreach and service will cease.

KDHE staff will be able to serve as a resource to health department staff on a telephone or email basis and will soon make available guidelines for dealing with lead poisoning in Kansas. Recently KDHE sponsored fully paid training events so local health department staff members could gain knowledge and expertise in dealing with home based environmental health hazards including responding to lead poisoning. A few local health departments have taken advantage of this opportunity. It is planned that if some sort of future funding is returned for lead poisoning prevention activities that the health departments with demonstrated capacity will be the first in line for funding to be passed through to them through an application process. It is not anticipated that KDHE will reestablish staffing in the near future even if funding would be fully restored.

While this news is far from happy or encouraging it is the current reality. KDHE will continue to do everything we can to fulfill our core mission of protecting the health and environment. If you would like more information about how these recent changes may affect you at your local level contact Tom Langer at tlanger@kdheks.gov.

Griffin Receives National Honor from NTCA

by the Office of Communications, KDHE



The Director of the Kansas Tuberculosis Control Program Phil Griffin was named 2012 Controller of the Year by the National Tuberculosis Controllers Association (NTCA). This award is NTCA's highest award and is given for meritorious service and achievement at the state, regional or national level recognizing outstanding efforts related to the improvement of tuberculosis control and prevention leading toward elimination.

The Kansas Tuberculosis Program now provides medications for all of Kansas cases, regardless of health insurance status. The incidence rate for tuberculosis in Kansas for 2011 was 1.26 cases per 100,000 persons - about one third the U.S. rate of 3.37 per 100,000. In 2011, Kansas reported the lowest case count in the history of reporting TB with a total of 36 cases of active tuberculosis.

Voices for Health Equity Contest Project

*By Barbara Hersh, Public Health Information Officer
The Office of Communications, KDHE*



The *Voices for Health Equity* contest is a series of "storytelling" events that will help the Center for Health Equity (CHE) showcase how communities identify health disparities and describe what is being done to promote equity in health. In February, a call for en-

tries went out for the *Voices for Health Equity* contest with a deadline of March 31. In April, CHE announced the winners of the contest.

The five winners from the first contest are:

- Heartland Community Health
- SIDS Network
- Research and Training Center for Independent Living
- Rosedale Development Association
- FreeWheels for Kids

"Center for Health Equity has collected stories about what Kansas communities are doing to promote health equity because stories help us weave together cultures, generations and time," said Aiko Allen, Director of the Center for Health Equity. "The act of preserving and sharing stories helps us to be stronger individuals, families and communities because they are real reminders of the joys and hardships and how we attain healing and balance in the midst of it all."

Each winning organization listed above will become digital stories featured on the Center for Health Equity website throughout the summer. The two winning videos are now featured on the CHE website: 1) Heartland Community Health Center - diabetes as a health disparity and 2) the SIDS Network of Kansas-infant mortality and efforts to address this statewide disparity through Community Baby Showers. Videos can be seen on the CHE website by clicking on the CHE logo.

Pertussis Cases on the Rise This Year

by Bureau of Epidemiology and Public Health Informatics, KDHE



Kansas this year has joined several states in identifying an increase of pertussis cases, also known as whooping cough. As of June 19, 66 confirmed cases have been reported to the Kansas Department of Health and Environment (KDHE). In 2011, just 52 confirmed cases were reported for the entire year.

During 2011 and 2012, KDHE and local health departments have investigated eight outbreaks, including the ongoing outbreak in Johnson County.

Vaccination is an effective way to prevent the spread of pertussis. Pertussis vaccines are recommended for all children and adults. The pertussis vaccine is given in combination with diphtheria and tetanus vaccines, called DTaP, and is recommended for children age two months through six years old. A pertussis vaccine for adolescents and adults, called Tdap, is recommended as a one-time booster.

KDHE encourages everyone to check with their health care provider on their vaccination status and to get vaccinated if they are not currently vaccinated against pertussis. It is especially important for anyone who has close contact with babies younger than 12 months to get a dose of Tdap to help protect the baby from whooping cough. This includes parents, siblings, grandparents, health care providers and childcare providers. If someone does experience pertussis after immunization, his or her case is usually milder.

Whooping cough is a highly contagious bacterial respiratory illness spread by coughing and sneezing. It affects people of all ages but is most serious for infants, especially those too young to be vaccinated or who are not fully protected. It causes cold-like symptoms followed by a long, severe cough that can last for weeks. Adolescents and adults often have a milder disease but it can still spread it.

Individuals with symptoms should contact their healthcare provider about antibiotic treatment that can shorten the time when they are contagious. Those with pertussis should be isolated from school, work or other activities until completing at least the first five days of the recommended antibiotic therapy.

Public Health: A Best Buy for America



*By Rein, Andrew S. MS; Ogden, Lydia L. PhD, MPP
Journal of Public Health Management and Practice*

The following paragraphs are excerpts from the July/Aug. issue of the *Journal of Public Health Management and Practice*. To read the complete article, click the Journal logo.

Public health has considerable capacity to reduce the drag of health spending on our nation by preventing the leading causes of disease, death and disability with cost-efficient, population-based interventions and innovative, boundary-spanning approaches that link clinical care and community prevention. Public health is uniquely able to identify the burdens of disease and analyze the best strategies for addressing them.

A three-pronged strategy can help assure the value needed from our public health investments. First, we must center our efforts on prevention. Second, we must optimize our public health investments to achieve the greatest value for our investment. Third, public health must collaborate with traditional and new partners on initiatives and in funding. How we finance public health is critical to maximizing public health's benefits and requires thoughtful analysis of how federal funding affects state and local health agencies' programming and how allocation drives choices and design, among other topics, as discussed in this special issue of the journal.

KDHE Partnering in Fuel Up to Play 60

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



The Kansas Department of Health and Environment (KDHE) is now a partner in, *Fuel Up to Play 60*, an in-school nutrition and physical activity program launched by National Dairy Council (NDC) and the National Football League (NFL), in collaboration with the United States Department of Agriculture (USDA), to combat childhood obesity.

Fuel Up to Play 60, helps students make positive changes in their schools by improving opportunities to consume nutrient-rich foods and get at least 60 minutes of physical activity every day. The ultimate goal is to ensure changes made at school are sustainable and complements, not competes, with an academics-focused environment. Families, communities and local governments all have a role in helping today's children learn about the importance of proper nutrition and physical activity so we can reverse the childhood obesity trend. It's time for us all to pull together and help Kansas children make good choices and practice good habits to ensure a healthy future.

Any Kansas school who enrolls in the free program is eligible to apply for funds to help increase awareness of, and access to, nutrient-rich foods and physical activity opportunities for their students. As part of *Fuel Up to Play 60*, schools can also receive a free quick start resources kit with planning tools and in-school collateral materials to help them implement healthy eating and physical fitness plans. For more information on this program contact Jane Shirley at jshirley@kdheks.gov or visit the FuelUpToPlay60 website by clicking the logo above.

KDHE Plans Quality Improvement Work Sessions with Public Health Foundation

*by Brenda Nickel, M.S., R.N., Director
Center for Performance Management, KDHE*



The Kansas Department of Health and Environment (KDHE) will be receiving technical assistance (TA) for Quality Improvement (QI) Culture Planning with Jack Moran, Public Health Foundation (PHF). The TA is available through the National Public Health Improvement Initiative (NPHII) grant. Jane Shirley, Director, Local Public Health Program, and Brenda Nickel, CPM Director and Accreditation Coordinator, met with representatives of the PHF and the Centers for Disease Control and Prevention May 9, while attending the NPHII grantee meeting in Atlanta to identify training needs for the KDHE. The TA will provide workshops for agency leadership and management, followed by workshops for agency staff.

The initial, "executive team," workshop scheduled for Aug. 28, will provide the framework for development and implementation of an organizational quality improvement plan (QI), referred to as "Big QI". The workshop will assist in development of a plan to:

- Make organization-wide improvements with a system focus tied to the goals of the KDHE strategic plan;
- Identify QI planning improves processes that cut across all programs and activities impacting the entire organization;
- Develop a strategy for evaluating quality on the agency's responsiveness to community needs.

Staff workshops will be scheduled later in the fall providing an opportunity for teams to bring specific problems or processes needing improved in individual programs or division sections. The workshops will be designed to provide two days of intensive training, following by an implementation period for teams, and then a two day follow up training after QI has been implemented. These trainings are designed to address, "Small qi," through:

- Identifying a specific project focus to improve quality at the program or unit level;
- QI project planning and process that impacts the delivery of program or unit-level services;
- Develop an evaluation of the QI project based on performance of a process capability over a period of time.

Quality improvement, "helps to bring forth solutions to problems experienced by



both public health providers and people needing their services," (Riley, et al., 2010) and focuses on specific processes or projects. When there are efforts to improve at individual and program level through an agency's many departments ("Small qi"), more people become competent at making improvements which eventually, can infuse QI throughout the organization. Staff is essential in improving services at the ground-level and to help ensure a QI culture is created, management supports staff and commits to QI being incorporated organization-wide ("Big QI"). Both, "small qi" and, "Big QI" can improve the efficiency and effectiveness of individual and core programs, as well the overall health department management system.

Reference:

Riley, W.J., Moran, J.W., Corso, L.C., Beitsch, L.M., Bialek, R., & Cofsky, A. (2010). Defining quality improvement in public health. *J Public Health Management Practice*, 16(1), 5-7.

http://journals.lww.com/jphmp/Fulltext/2010/01000/Defining_Quality_Improvement_in_Public_Health.3.aspx

This newsletter article was supported by the CD10-1011 Award #CD0011282-02 by the Centers for Disease Control and Prevention (CDC). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the CDC policies of the Department of Health and Human Services, nor does the mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.

Numana Gardens Feeds the Hungry in El Dorado

*by Sarah Johnston, MD
El Dorado, Kansas*



Numana, Inc. is a public charity formed in 2008 as an international hunger relief organization. Numana's core activity is facilitating food packaging events where hundreds of volunteers work on assembly lines packing nutritionally complete meals. The cost of each meal is 30 cents. To date, 135,000 volunteers have participated in packaging events and 25 million meals have been sent to needy people in multiple countries in Africa, Central America and South America.

In 2012, the Numana Inc. decided to also feed hungry people at home. Numana Gardens in El Dorado opened in the spring of this year. These community and personal gardens are located on 2.4 acres of land donated by the city. The water is also provided by the city. Garden tools have been donated by the community. Prospect school raised the seedlings for the community garden from seed. Individuals or groups may rent a 25 foot by 25 foot plot for \$40 for the season, receiving \$15 back at the end of the season providing they clean up their plot. Two thirds of the produce in the community garden is given to local food banks. The remaining one third of produce is being sold at the El Dorado Farmer's Market, so that the garden will be financially sustainable from year to year.

In collaboration with Numana, USD 490, Julie Jensen, Director of Curriculum and Sue Givens, Superintendent and Sarah Johnston, an El Dorado physician currently working on her MPH degree through KU School of Medicine - Wichita, decided to assess hunger and risk factors for childhood obesity in El Dorado sixth graders. This was also Dr. Johnston's Kansas Public Health Leadership capstone project. One hundred twelve, of 153 sixth grade students responded to the survey. Significant food insecurity was shown by the responses to four of the survey questions. 56 percent ate fewer than three meals a day on school days. When asked how often the student skipped meals because there was no food available, only 49 percent responded, "never." Thirty-seven percent responded, "sometimes but not often," 12 percent responded, "at least once a month," and three percent responded, "every day." Unhealthy coping mechanisms for hunger were demonstrated by the responses to two questions. Twenty-six percent of students reported that they would overeat at mealtimes so as not to get hungry later on. 21 percent responded that they will eat anything if they were hungry. The national recommendations for fruit and vegetable intake for children and adolescents is five servings a day. Only 15 percent of El Dorado sixth graders reported eating five or more servings a day.



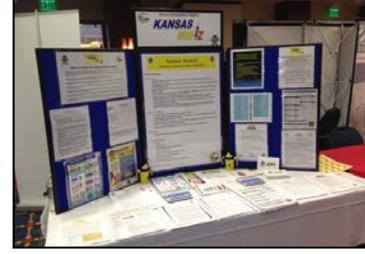
Dr. Johnston was able to share her survey results about the Numana Garden project recently, as she delivered the guest sermon at her church. She pointed out the several parallels between the miracle of the loaves and fishes and the reality and possibilities of the Numana Gardens. "First, although it's hard for many to believe, there are hungry people including children, right in El Dorado. At the Numana Gardens, which only a few weeks ago was barren ground, there is an abundant harvest already, with more surely to come."

KDHE Staff Attends KAFP Annual Conference

*by Gilbert Tabares, etc
Bureau of Community Health Services, KDHE*

The Bureau of Community Health System's (BCHS) Preparedness Program staff, along with Bureau of Family Health (BFH), Bureau of Disease Control and Prevention (BDCP) and the Bureau of Environment Health (BEH) attended the Kansas State University's College of Veterinary Medicine's, 74th Annual Conference for Veterinarians, and the Kansas Academy of Family Physicians, *Caring for Kansas*, 2012 Annual Conference the week of June 4-9.

Veterinarians and physicians were informed of the benefits and capabilities of the Kansas Health Alert Network (KS-HAN). KS-HAN is a secure, web-based electronic communication system that enables local and state health and safety entities to rapidly share public and environmental health information. At this conference, BCHS enrolled an additional 14 veterinarians and 20 physicians in KS-HAN.



Left: Heather Smith, BFH, talking with conference attendees about the KDHE Resource Guide. Middle: KS-HAN booth at conference. Gilbert Tabares, BCHS (photographer), and Karen Moser, Veterinarian Intern, BEH, helped promote KS-HAN and handed out survey's to physicians. Right: Staff from the BDCP provided information on the KDHE immunization program.

KDHE Offers Instructional Design Training to Staff and Community Partners

*by Debbie Nickels, KS-TRAIN Administrator
Local Health Program, Bureau of Community Health Systems, KDHE*

The KS-TRAIN team from the Bureau of Community Health Systems, Kansas Department of Health and Environment (KDHE), with support provided by the Center for Performance Management and the Center for Health Equity recently sponsored, "Incorporating Instructional Design and Adult Learning into Training; Improving Your Performance."

The goal of the training was to provide instructional information and tools for educators/trainers, who develop learning events (live/online) and support the maintenance of a trained and competent public health and environment workforce. Post the first day of training, Isabelle Busenitz, Bureau of Environmental Health stated, "I picked up at least six new tools that I will use when I work with adult learners. Thanks to you and your staff for bringing such a high quality training to the State and partner training workforce. I am sure that it will improve our outcomes at future trainings, whether live or on-line."



Course content and activities included the theory and application of instructional design into training/education offerings; principles of adult learning; rules for writing outcome and performance objectives; the learning triad; levels of evaluation; how to tailor live training for online course modules and well as public health language elements of Essential Services, and Core Competencies and Accreditation Standards.

M. Paula Daoust, Ph. D. CPT, Director of Workforce and Leadership Development for BlueCross and BlueShield of Kansas lead the two sessions of two day training for KDHE trainers/educators and community partners. The two sessions were so successful that other programs are offering to sponsor a session later this year and another in 2013.

If you have questions about the training contact Debbie Nickels, KS-TRAIN Administrator, at 785-291-3457 or dnickels@kdheks.gov.

Accreditation Corner

Submitted by the Bureau of Community Health Systems

PHAB Accreditation Defined



Public health department accreditation is defined as the development of a set of standards, a process to measure health department performance against those standards, and reward or give recognition to those health departments who meet the standards.

The following materials are posted on the Public Health Accreditation Board (PHAB) website:

- [Guide to National Public Health Department Accreditation Version 1.0](#)
- [PHAB Standards and Measures Version 1.0](#)
- [PHAB Accreditation Fee Schedule 2011-2012](#)
- [PHAB Educational Services](#)

PHAB offers an array of materials that supplement the Guide to National Public Health Department Accreditation Version 1.0 and the Standards and Measures Version 1.0 that assist health departments throughout the accreditation process. Click the image on the right to view the following materials:

- PHAB Generic Presentation for Local Health Departments
- Acronyms and Glossary of Terms Version 1.0
- Accreditation Readiness Checklists
- e-PHAB Statement of Intent Information
- e-PHAB Application Information
- Documentation Guidance
- PHAB Standards and Measures Documentation Selection Spreadsheet Version 1.0
- Considerations for Assigning an Accreditation Coordinator Tip Sheet
- Accreditation Coordinator Handbook Version 1.0



Community Health Assessment/Improvement

[Healthy People 2020 MAP-IT](#) has tools you can use for whatever framework you are using for your Community Health Assessment and Improvement process:

- Tool # 1 - [Organizing a Coalition](#)
 - Healthy People 2020 provides a list of important questions to consider before organizing a coalition, in a printable format that allows you to fill out answers to the questions and/or distribute them to a planning group.

A checklist from Healthy People that will help you think of all possibilities for potential partners for your effort.

- Tool # 2 - [Brainstorm: Potential Partners](#)
- Tool # 3 - [Prioritizing Issues](#)
 - Healthy People provides an exercise that will assist you in determining which issues it is most important for your effort to undertake.
- Tool # 4 - [Brainstorm: Community Assets](#)
 - A checklist from Healthy People to assist you in determining community assets that are available.
- Tool # 5 - [Setting Targets for Objectives](#)
 - Healthy People provides national and state standards and other helpful guidelines to assist you in setting reasonable goals for your initiative.
- Tool # 6 - [Defining Terms](#)
 - This page from Healthy People provides clear definitions of many of the terms - vision, baseline data, etc. - you might use in discussing your plan.
- Tool # 7 - [Potential Health Measures](#)
 - Healthy People provides a list of some possible indicators to consider measuring to track your initiative's progress.
- Tool # 8 - [Coalition Self-Assessment](#)



- This anonymous coalition self-assessment from Healthy People allows members to rate the group and its staff, leaders and members on a variety of factors important to the effective functioning of a coalition
- Tool # 9 - [Communication Plan Template](#)
 - A template from Healthy People to assist you in creating an effective communication plan for your effort.
- Tool # 10 - [Measuring Progress](#)
 - Healthy People provides helpful formulas for quantitatively measuring your progress.

Funding Opportunities

Submitted by the Bureau of Community Health Systems

Mini-Grant Opportunities for Youth-Led Tobacco-Use Prevention Projects – Deadline Sept. 3

by Erica Anderson

Tobacco Free Kansas Coalition



Tobacco Free Kansas Coalition (TFKC) is providing approximately 15 competitive grant awards of up to \$1000 this upcoming fall 2012 to assist in engaging youth groups in tobacco prevention and education. The grant project is part of TFKC's continuing support for a statewide youth movement to reduce youth use of tobacco products in communities across Kansas.

"Empowering youth to develop their own tobacco prevention systems is a proven way to reduce initiation and use of cigarettes and tobacco products," says Mary Jayne Hellebust, Executive Director of TFKC. She noted that Kansas high school smoking rates have declined from 26 percent in 2000 to 17.1 percent in 2010 but that the latest Youth Tobacco Survey statistics show that 4.1 percent of middle school boys and 15.5 percent of high school boys now report using smokeless tobacco. "These competitive mini grants help youth groups design their own projects to reveal the truth about tobacco use and the misconceptions and marketing tools that still result in almost 3,000 Kansas youth beginning to smoke each year."

Tobacco use, which still remains a leading cause of death and disease in Kansas, usually begins before the age of 18. With funding from the Kansas Health Foundation, TFKC's mini grant program offers funding of up to \$1000 for youth-led tobacco prevention projects that impact other teens at the community level. Youth from 12-17 within school, prevention, church and social groups, youth coalitions, youth sports and afterschool programs may apply for the funding by completing a short application.

The grant application can be obtained on the TFKC website by clicking on their logo above or by contacting Erica Anderson at eanderson@tobaccofreekansas.org. The deadline for this round of applications is Sept. 3, with award announcement made by Sept. 21.

Kansas Health Foundation Healthy Communities Initiative Round 2

by Steve Coen, President and CEO

Kansas Health Foundation



The Kansas Health Foundation (KHF) continually looks for creative and strategic ways in which grant making can move the organization towards its mission to improve the health of all Kansans. Time and time again, KHF has seen that one major way to accomplish this work is to partner directly with communities throughout the state in areas where Foundation goals and community goals meet.

The KHF is excited to announce a new, expanded Healthy Communities Initiative, request for proposals (RFP) that seeks to directly address specific strategies for ensuring proper nutrition, increasing physical activity and reducing use of or exposure to tobacco products and pro-tobacco marketing. Ultimately, through this work, the Kansas Health Foundation is striving to develop local infrastructure to support comprehensive community approaches to healthy behaviors.

Grants and technical assistance will help support a collaborative process that builds on existing community assets, cultivates local leadership and results in a community-supported plan for facilitating policies, practices and environmental changes.

Additionally, the Foundation invites you and up to three leadership team members to attend the Healthy Communities Initiative RFP Conference, scheduled for Oct. 3rd and 4th, at the Wichita Marriott Hotel. The con-

ference will provide more information about the RFP to help you decide if your community would like to submit a proposal.

Interested persons can access the RFP information through the Healthy Communities Initiative by clicking on the KHf logo.

If you have any questions about the RFP or the initiative as a whole, please contact Jeff Usher, program officer, at 316-262-7676 or jusher@khf.org.

Training Announcements

Submitted by the Bureau of Community Health Systems

Kansas Evidence-Based Public Health: A Course for Local and State Practitioners

by Bureau of Health Promotion



The Kansas Department of Health and Environment's Bureau of Health Promotion presents the, "Kansas Evidence-Based Public Health: A Course for Local and State Practitioners," on July 23-26 at the University of Kansas Medical Center, Dykes Medical Library. This course is ideal for [Public Health Core Competency Tier Two and Tier Three](#) public health professionals.

Applied use of evidence-based interventions at the state and local levels is critical to achieving successful public health outcomes, a skilled and adaptable workforce, and more efficient and effective use of resources. This training is offered by the Bureau of Health Promotion in collaboration with the St. Louis Prevention Research Center and adapted from their highly regarded Evidence-Based Public Health Course. Presented in nine modules, the Kansas course features state specific data, insight from successful Kansas initiatives and guidance from instructors who practice public health in Kansas. As state and local health departments prepare for public health accreditation, the topics, techniques and tools provided through this course will enhance current understanding of principles of health assessment, improvement planning, and evaluation.

Course Themes:

- Selecting Evidence-Based Interventions
- Action Plans for Results
- Quantitative Evaluation
- Using Qualitative Data
- Prioritizing Program & Policy Options
- Economics of Prevention

Developers for this course include an eclectic mix of Kansas public health professionals representing academia, state and local health departments. Click the image above to download the course details and application.

Kansas Public Health Grand Rounds

Are you a lifelong learner? The Spring 2012, Kansas Public Health Grand Rounds' sessions are now available for viewing as archived webcasts through KS-TRAIN at <http://ks.train.org>. [Click HERE](#) to view the library of archived sessions and registration information.

KDA and KDHE Conducting Zoonotic Disease Workshops

*by Ingrid Garrison, State Public Health Veterinarian
Bureau of Epidemiology and Public Health Informatics, KDHE*

The Kansas Department of Agriculture (KDA) and the Kansas Department of Health and Environment (KDHE) are facilitating, "One Health Zoonotic Disease Workshops," for veterinarians, health care professionals and the public health workforce in 2012 and 2013. The day-long workshops will be held Aug. 9, Colby; Oct. 11, Dodge City and Mar. 2, 2013 in Wichita. A workshop for the northeast area is to be announced soon. Registration for the learning events, are through KS-TRAIN at <http://ks.train.org>, Course ID# 1033834.

The objectives of the workshop include:

- Information sharing regarding zoonotic and foreign animal disease preparedness and response measures.
- Discussion of general accepted practices regarding surveillance, disease prevention, routes of transmis-



sion, disease reporting, disease reporting, biosecurity, cleaning and disinfection.

- Overview of specific zoonotic and foreign animal diseases.
- Encouraging networking and communication among the participants.

The workshop will include various presentations and conclude with an informal discussion based exercise. Please direct workshop questions to Dr. Tarrie Crnic, Kansas Department of Agriculture, at 785-296-2326 or tarrie.crnica@kda.ks.gov.

HSEEP Training

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



There are still plenty of open seats for the Homeland Security Exercise and Evaluation Program (HSEEP) class in Salina on July 24-26. Registration deadline is July 13, to assure adequate materials and lunches. Log into KS-TRAIN under course ID# 1030674. The next scheduled HSEEP training is Nov. 13-15 in Garden City. If you have questions, please contact

Cait Purinton at cpurinton@kdheks.gov or 785-296-1984.

Community Toolbox Online Modules, Retooled

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



The original Community Toolbox Online Module 1, on KS-TRAIN, has been re-tooled into three shorter modules to allow you to complete each module at one seating, and to pick and choose what you would

like to complete from the Community Toolbox course library that are posted to TRAIN at <http://ks.train.org>.

The online training provides practical guidance for conducting community health assessments. It is intended for staff from state and local health departments, including those seeking accreditation, hospital staff who are considering new federal requirements for non-profit hospitals, and those in community benefit programs, non-profit organizations and community leaders/members. The first three modules outline steps for assessing community health, including how to engage community members, assure ownership, identify community assets and set priorities for improvement.

This module is the first in a series of modules covering: Conducting Community Health Assessments, Developing a Strategic Plan for Community Health Improvement, Implementing Strategic Plans for Community Health Improvement and Evaluation and Performance Management.

Other modules on the use of the Community Toolbox are under development and will be available this summer. The first six, 30-45 minute modules are:

- Community Toolbox Module 1: Assuring Engagement in Community Health Improvement Efforts, Course ID #1033673
- Community Toolbox Module 2: Identifying Community Health Needs and Assets, Course ID #1033674
- Community Toolbox Module 3: Conducting Community Health Assessments, Course ID #1033675
- Community Toolbox Module 4: Setting Community Priorities Based on Identified Issues, Course ID #1034102
- Community Toolbox Module 5: Developing a Logic Model for Community Health Improvement, Course ID #1034103
- Community Toolbox Module 6: Developing a Strategic Plan for Community Health Improvement, Course ID #1034104

What's New on the CDC Learning Connection Website

*by Mary Bryant-Mason, Health Education Specialist
Educational Design and Accreditation Branch, Centers for Disease Control and Prevention*

The Centers for Disease Control and Prevention (CDC) Learning Connection helps locate products that exemplify educational best practices and links to many CDC-sponsored activities that offer free continuing education. CDC TRAIN, along with KS-TRAIN, is part of a national network to provide access to public health learning and information. Each month, the Learning Connection presents a spotlight on a different public health topic and what CDC programs are posting new courses to TRAIN.

Currently in the spotlight on the [CDC Learning Connection](http://www.cdc.gov/learningconnection/) website is respiratory infections. This spotlight features a variety of learning products, resources and social media tools to assist the public health community in preventing, identifying, reporting and responding to respiratory disease outbreaks. Be sure to check out [Respir-](#)

[atory Infections Resources](#) and [Respiratory Infections Social Media](#). Just a few of the respiratory infections information resources are listed below.

- [How to Investigate Unexplained Respiratory Disease Outbreaks Toolkit \(URDO\)](#)
- [Immunization Courses: Broadcasts, Webcasts and Self Study](#) **CE**
- [Outbreak Simulation - Pharyngitis in Louisiana](#)
- [Pertussis Testing: Specimen Collection Videos](#)
- [Preparedness and Community response to Pandemics](#) **CE**, Course #1010262
- [Reportable Disease Surveillance](#), Course #1030414

Since Jan. the CDC programs have listed 54 courses on TRAIN. Many of these courses offer free continuing education. Some of the newest courses are listed below.

- [CDC Public Health Grand Rounds: Preventing Excessive Alcohol Use](#) **CE**, Course #1032866
- [Emerging Issues in Sexually Transmitted Diseases: 2010 STD Treatment Guidelines](#) **CE**, Course #1033555
- [Good Laboratory Practices for Molecular Genetics Testing](#), Course #1033096
- [TB 101 for Healthcare Workers](#) **CE**, Course #1031697
- [Epidemiology & Prevention of Vaccine-Preventable Diseases 2012](#) **CE**. To find the list of all eleven modules go to Course Search, Browse by Subject and enter the course title to the text field and click Search.

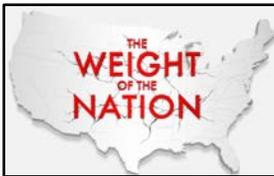
Modules offer continuing education and are available as a webcast series and in DVD format.

For more information on the CDC Learning Connection or this update, contact Molly Kellum at zkc7@cdc.gov or send your suggestions for the Learning Connection to learning@cdc.gov.

News and Resources

Submitted by the Bureau of Community Health Systems

Weight of the Nation



Recently, Home Box Office (HBO) aired a series of pieces on obesity called, "Weight of the Nation." Bringing together the nation's leading research institutions, the, "Weight of the Nation," is a presentation of HBO and the Institute of Medicine (IOM), in association with the Centers for Disease Control and Prevention (CDC), the National Institutes of Health (NIH), with the Michael and Susan Dell Foundation and Kaiser Permanente. To view this documentary, click the Weight of the Nation logo.

The Prevention and Public Health Fund

The American Public Health Association (APHA) Center for Public Health Policy has released a new issue brief, "[The Prevention and Public Health Fund: A Critical Investment in the Nation's Physical and Fiscal Health](#)" (PDF). The APHA brief summarizes the need for and impact of prevention and public health funding, reviews the design and intentions of the Prevention and Public Health Fund and provides an update on how the Fund has been implemented and allocated to date. It also offers information on topics such as Fund allocations to date by agency, state, year and funding category; the recent cut to the Fund and other threats to it, as well as the use of the Fund to supplant existing appropriations; and evidence that public health prevention spending improves health outcomes and reduces healthcare costs.

The National Alliance for Radiation Readiness (NARR) led a review of the U.S. public health and medical response to domestic concerns arising from the 2011 incident at the Japanese Fukushima Daiichi nuclear power plant. Based on the review, NARR agrees on several recommendations, including the need for:

- Strong, visible federal leadership.
- Timely and proactive public information and education.
- A robust, "whole community response," through the leverage of public and private resources.
- Continued investment in public health.
- A full report is [available online](#) (PDF).

State of the Air



The American Lung Association has analyzed data from state air quality monitors to compile the, "State of the Air," report. The more you learn about the air you breathe, the more you can protect your health and take steps to make our air cleaner and healthier. Click on the State of Air logo to view local air quality rankings for cities and counties in the U.S.

EthnoMed



EthnoMed website contains medical and cultural information about immigrant and refugee groups. The objective of the website is to make information about culture, language, health, illness and community resources directly accessible to health care providers who see patients from different ethnic groups. Click the logo to learn more.

Graphic Cigarette Pack Labels Make Smokers Think, Study Finds



Graphic warning labels on cigarette packages boost the likelihood that people will think about the health risks associated with smoking, a new study has found. The study included 200 current smokers who were randomly selected to view either a text-only warning label such as those used in the United States since 1985, or a graphic warning label that included an image of a hospitalized patient on a ventilator and a written warning with larger text. Click the image on the left to view this study.

CDC Releases Older Adult Preparedness Portal



The Centers for Disease Control and Prevention (CDC) has released a cross-sector preparedness guide and web portal designed to help states, communities and partners plan for and protect vulnerable older adults in all hazards emergencies. Older adults are especially vulnerable as they are more likely to have multiple chronic conditions, cognitive and physical disabilities, or limited resources that affect their ability to appropriately prepare for and respond to an emergency. To learn more click the CDC logo

Highest-Value Preventive Services Save Billions if Applied to 90 Percent of U.S. Population



In a report from the Robert Wood Johnson Foundation (RWJF) researchers have found that clinical preventive services including childhood immunizations, tobacco cessation counseling, and discussing daily aspirin use to prevent heart disease, continue to be a good value because of their health impact and cost-effectiveness. To view the complete report, click the RWJF logo.

Journals Call For Integrating Primary Care and Public Health



A first-time joint publication released by the American Journal of Public Health and the American Journal of Preventive Medicine describes how public health and primary medicine must overlap to maximize resources and develop healthier livelihoods. To read more about this publication provided by the American Public Health Association, click the image on the left.

PHF and IHI Update Resources for Public Health Quality Improvement



dated resources.

The Public Health Foundation (PHF) and the Institute for Healthcare Improvement (IHI) collaborated to update IHI's Resources for Public Health Quality Improvement website page with the focus of better serving public health professionals. New resources were added to the website that cover various topics. Click the PHF logo to learn about the updated resources.

WHO Classifies Diesel Exhaust as Carcinogenic



The International Agency for Research on Cancer (IARC), which is part of the World Health Organization (WHO), has classified diesel engine exhaust as carcinogenic to humans, based on sufficient evidence that exposure is associated with an increased risk for lung cancer. To read more about the WHO's statement click the WHO logo.

Job Openings

Finney County Health Department

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

- [Registered Nurse - WIC Program](#)
- [Staff Registered Nurse](#)



Franklin County Health Department

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

- [ARNP \(part-time\)](#)



Johnson County Health Department

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

- [WIC Breastfeeding Peer Counselor](#)



Sedgwick County Health Department

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

- [WIC CHN I or WIC RD I](#)



Shawnee County Health Department

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

- [Child Care Licensing Surveyor-Part Time/Permanent](#)
- [Clinical Provider](#)
- [Licensed Practical Nurse - Primary Care/Women's Health/Float](#)



Wyandotte County Health Department

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

- [Licensed Practical Nurse](#)
- [Nurse Practitioner](#)



Public Health Connections Information

To receive the monthly E-Newsletter

Email Pat Behnke at pbehnke@kdheks.gov

Previous issues of Public Health Connections maybe found at

www.kdheks.gov/olrh/publications.htm

Send your public health news to

Pat Behnke at pbehnke@kdheks.gov or

Debbie Nickels at dnickels@kdheks.gov