



## PUBLIC HEALTH CONNECTIONS

November- 2015 Volume 15, Issue 11

Bureau of Community Health Systems

Susan Mosier, Secretary

Sam Brownback, Governor

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### #loveKS on National Rural Health Day - November 19



In celebration of the 5<sup>th</sup> annual National Rural Health Day, [Rural Health Education and Services](#) invites you to show and share why you love to live, work and play in rural Kansas. Upload a photo and caption from your social media sites and use #loveKS in your post. Winners will be announced on National Rural Health Day- November 19. [Click here for more information on #loveKS](#). Events recognizing National Rural Health Day are being

planned throughout the nation to bring to light the unique healthcare challenges that rural citizens face – and showcase the efforts of rural healthcare providers and other rural stakeholders to address those challenges. Additional information and ideas on how to celebrate can be found on the following website, [www.celebratepowerofrural.org](http://www.celebratepowerofrural.org).

### #loveKS Photo Contest

### Regional Public Health Meetings

by Teri Caudle, Public Health Specialist, Local Public Health Program  
Bureau of Community Health Systems, KDHE



Don't miss the opportunity to attend one of the upcoming regional public health meetings aimed to connect local health departments (LHD) with programs and best practices that will benefit the work you do within your communities. These meetings are designed for the LHD administrator; however, any staff person interested in a particular topic is welcome to attend. Register on KS-TRAIN <http://ks.train.org>, Course ID: 1059355

The agenda includes the following: Leadership at Regional Training; Sonja Armbruster, Director of Public Health Initiatives and Seth Bate, Director of Leadership Development, Center for Community Support and Research and Kansas Alliance for Wellness-Mobilizing Communities to Support Healthy, Local Food; Missty Lechner, Advocacy Project Director, American Heart/Stroke Association.

The dates and locations are:

- NW Region, Oakley – November 19
- SW Region, Garden City – November 20
- NC Region, Beloit – December 2
- NE Region, Topeka – December 8
- SC Region, Hutchinson – December 10

If you have ideas for regional meeting topics please contact Teri Caudle at [tcaudle@kdheks.gov](mailto:tcaudle@kdheks.gov)

### Registration is Open for the Kansas Obesity Summit - November 17



Register to attend the [2015 Governor's Council on Fitness Obesity Summit](#), November 17, in Junction City, to discuss strategies on nutrition, physical activity and obesity. There is no cost to attend the summit, but registration is required.

The Council is excited to bring together national and state leaders to discuss the economic argument for healthy communities, the Healthy Kansas 2020 framework for decreasing obesity and how multiple settings are moving toward healthier food systems. Meet the individual and organization Kansas Health Champions for 2015 and learn how they have gone above and beyond for wellness in their communities.

The summit will feature Terry O'Toole, PhD, MDiv, FASHA, Senior Advisor for the Division of Nutrition, Physical Activity and Obesity at the Centers for Disease Control and Prevention. Plan to arrive early to participate in a walk audit to learn how to improve walkability in Kansas communities while networking with Council members and other community health leaders.

The summit is supported by the Kansas Alliance for Wellness and the Kansas Department of Health and Environment. Click the Obesity Summit logo to find more details and register for the summit.

## In the Spotlight

### Pawnee County Health Department and Partners Awarded Rural Mental Health Improvement Grant

*by the Local Public Health Program,  
Bureau of Community Health Services, KDHE*



The Pawnee County Health Department announced in October that through their partnership with [The Center for Counseling](#) they were awarded a \$110,000 grant to help [improve mental health and substance abuse](#) in the four county area of Barton, Pawnee, Rice and Stafford counties. Pawnee County recently participated in a conference call with [Cenpatico](#) and [Centene Foundation](#) during which they were told that Pawnee County was awarded the grant. The Improving Health in Rural Counties grants will fund programs that identify and promote innovations at the county level that help transform the health of their communities, specifically focusing on impacting social determinants to move the bar and improve health for rural communities. Four grants were selected in the Centene-served states of California, Kansas, Louisiana and Massachusetts.

Robin Rziha, Administrator of the Pawnee County Health Department, states, "I appreciate the Kansas Association of Local Health Departments (KALHD) for sharing this funding opportunity from the Centene Foundation for Quality Healthcare in collaboration with Cenpatico, to address social determinants and improve health for rural communities. This funding offers a means of addressing mental health and substance abuse issues that have been recognized as priorities from the Community Health Needs Assessments in Barton, Pawnee, Rice and Stafford Counties. I believe this project will significantly improve the lives of many people in our central Kansas communities through an innovative implementation plan proposed by The Center for Counseling. It is an honor for public health to work in partnership with The Center for Counseling towards improving mental health and substance abuse in a large rural geographic area and serves as an example of how community engagement can be a foundation for success in mobilizing community partnerships to identify and solve health problems."

The Centene Foundation for Quality Healthcare was formed in 2004 to improve the quality of healthcare for medically underserved individuals and families, and economically distressed areas. The Foundation supports Centene's purpose to transform the health of the community. Over the years, the Foundation's funding projects have included obesity, school-based health clinics, disparities in mental health among black women and education and outreach related to public health programs such as Medicaid.

Congratulations to Pawnee County Health Department and partners. Click the Pawnee County logo to learn more about the Improving Health in Rural Counties RFP.

### Ten Organizations Receive Funding to Promote Policies and Practices Supporting Breastfeeding

*from the KHF website*

With a goal of increasing initiation and duration rates of breastfeeding throughout the state, 10 Kansas organizations and agencies recently received funding totaling approximately \$1 million through the Kansas Breastfeeding Initiative, a partnership of the Kansas Health Foundation (KHF) and the United Methodist Health Ministry Fund (UMHMF).

Organizations receiving funding include:

- Health Partnership Clinic
- Kansas Association of Child Care Resource and Referral Agencies
- Kansas Breastfeeding Coalition
- Kansas Chapter American Academy of Pediatrics
- Neosho County Health Department
- Pawnee County Health Department
- Salina Health Education Foundation
- Stormont-Vail Foundation
- Thomas County Health Department
- Kansas Department of Health and Environment



Breastfeeding provides immediate and lifelong nutrition and health benefits for mother and child, as well as larger economic, environmental and social benefits to families and communities. Research shows breastfed babies are less likely to become obese, and have a lower risk of developing asthma, diabetes and respiratory infections. Yet, Kansas ranks 48th in the nation for rates of mothers who exclusively breastfeed during a child's first six months. "Breastfeeding at the earliest stages of life has been shown to have a lifetime of positive results," said Chan Brown, program officer for the Kansas Health Foundation. "Working with these grantees, we will strive to give all mothers and babies the best chance at breastfeeding success." Funding to these organizations will support the implementation-- in hospitals, workplaces and communities--of strategies recommended by the Centers for Disease Control and Prevention to support mothers in successful breastfeeding. "Increasing breastfeeding rates in our state has to start with changing the culture around how we support, promote and encourage breastfeeding for new mothers," said Katie Ross, program officer for the United Methodist Health Ministry Fund. "From maternity care practices, to employer support, to better and more readily-available education, if we want our state to see the long-term benefits of breastfeeding, we need to work together to reverse the trend of declining breastfeeding rates and duration." All grantees will work to further develop and implement breastfeeding initiatives in coordination with health care systems, health care providers, public health professionals and community efforts. Click the image to learn more about the [Kansas Breastfeeding Initiative](#).

## Prediabetes is an Opportunity for Action

*by the Bureau of Health Promotion*

People with prediabetes — higher-than-normal blood glucose sugar levels — are five to 15 times more likely to develop type 2 diabetes than those with normal blood glucose levels. In fact, many people with prediabetes will develop type 2 diabetes within three years if they do not take steps to prevent it. Minimal weight loss and increased physical activity can reverse prediabetes.



People are more likely to have prediabetes and type 2 diabetes if they:

- Are 45 years old or older;
- Are overweight;
- Have a family history of type 2 diabetes;
- Are physically active fewer than three times per week; or
- Have been diagnosed with gestational diabetes during pregnancy or gave birth to a baby weighing more than 9 pounds.

“About 1 in 3 U.S. adults has prediabetes, so the need for prevention has never been greater,” said Charlene Wallace, Kansas Department of Health and Environment (KDHE) Community-Clinical Linkages Program Manager. “Diagnosing patients with prediabetes is the first step to decreasing their risk for diabetes. Prediabetes should serve as a wake-up call for patients and an opportunity to make lifestyle changes to prevent type 2 diabetes.”

The American Medical Association (AMA) and the Centers for Disease Control and Prevention (CDC) developed a [toolkit](#) to serve as a guide for physicians and other health care providers on the best methods to screen and refer high-risk patients to CDC-recognized diabetes prevention programs (DPP) in their communities. KDHE is providing grant funding to establish or expand DPP in 11 counties. Those counties are Allen, Crawford, Finney, Jewell, Johnson, Lincoln, Mitchell, Republic, Sedgwick, Smith and Wyandotte. Currently, DPP classes are available at the Crawford County Health Department, Greater Wichita YMCA, Prairie Band Potawatomi Health Center and YMCA of Greater Kansas City. To learn more about Kansas lifestyle change programs visit [www.toolsforbetterhealthks.org](http://www.toolsforbetterhealthks.org).

KDHE is also working with the Chronic Disease Alliance of Kansas to educate health care providers on the need to screen for prediabetes and with neighboring states on new programs that will serve residents across state lines.

Additional information on Prevent Diabetes STAT is available online at [www.PreventDiabetesSTAT.org](http://www.PreventDiabetesSTAT.org). There is also an online screening tool for [patients](#) to help them determine their risk for having prediabetes.

Prevent Diabetes STAT is a demonstration of a national, collective effort to prevent new cases of type 2 diabetes and get a handle on this public health epidemic. Everyone can Prevent Diabetes...STAT!

## Bureau of Epidemiology and Public Health Informatics Releases 2014 Statistics

*by Greg Crawford, Director, Vital Statistics Data Analysis  
BEPHI, KDHE*



The 2014 Annual Summary of Vital Statistics is now available. The report contains information on births, deaths, marriages, divorces and more.

Among the highlights for 2014:

- The state's infant mortality rate has decreased from 6.4 deaths per 1,000 live births in 2013 to 6.3 deaths per 1,000 live births in 2014.
  - The rate for Black non-Hispanic mothers was 10.3 deaths per 1,000 live births, a 32.7 percent decrease from the 2013 rate of 15.3.
- Teen pregnancy numbers decreased by 6.5 percent, from 3,335 in 2013 to 2,118 in 2014.
  - The pregnancy rate for mothers under 20 years of age was 16 per 1,000 females. This is the lowest pregnancy rate for this age-group in the past 20 years, down from a peak of 34.5 in 1995.
- Pneumonia and influenza resulted in an age-adjusted mortality rate of 18 deaths per 1,000 population, down from 20 in 2013.
- The number of births to Kansas residents was 39,193, an increase of 1 percent from 2013. The state's birth rate increased to 13.5 per 1,000 population from 13.4 in 2013.
- The state's population increased by 0.3 percent in 2014 to 2,904,021.
  - Geary, Pottawatomie and Riley Counties had the largest relative increases in population from 2010 to 2014 with respective changes of: 7.4 percent, 6.5 percent and 5.7 percent.

You can access the full Annual Report of Vital Statistics on our website here: <http://www.kdheks.gov/hci/annsumm.html>.

## Winter Preparedness

Winter is coming and we know that emergencies and disasters can happen at any time. Now is a good time to review that family emergency plan and update the family emergency kit. If you are just starting your family emergency planning, visit the [Fred the Preparedness Dog](#) webpage for a family emergency plan template and information on building a family emergency kit.



## Bureau of Epidemiology and Public Health Informatics Releases KIC Modifications



The Bureau of Epidemiology and Public Health Informatics staff have updated Kansas Information for Communities (KIC). Concurrent with the update of vital events, birth, death, pregnancy, new methods of selecting geographic areas in KIC have been rolled out for 2014. Several additional regional representations of statistics are now possible. In addition to preparing statistics by public health preparedness region, statistics for Kansas geographic regions, and population peer groups can now be created. Coding has been revised so that the geographic selections will work in all browsers. The change will also enable users who use the back button on their browser to retain most original selections in their query. All a user will need to do is refresh the geographic selection, make a selection of a new geographic region, or make a selection of multiple items within a given category (i.e. counties, state, peer group, geographic area, etc.), allowing for better tabulations for comparison reporting. This new feature eliminates the need for reselection of area(s) when returning to the query for modification of criteria. Upon returning to the query page and wanting to retain the originally selected area(s) the user just needs to click on the radio button to the left of the category that the selected areas are in, reactivating the original selections, and modify other criteria accordingly and press the submit button. Selection of multiple geographic category is now allowed in order to prevent double counting of events. KIC's web URL is <http://kic.kdheks.gov/>. [Click here to join the KIC mailing list.](#)

## Kansas Health Matters Updated Data Indicators



**Kansas Health Matters**

The Kansas Health Matters (KHM) Partners have revised indicators, which were updated during the third quarter of 2015. The indicators were updated with 2014 information coinciding with the release of the Annual Summary of Vital Statistics. The majority of these indicators are within the Mortality category/grouping. Other indicators based on vital events will be updated in the fourth quarter.

Updated indicators are:

- Age-adjusted Alzheimer's Disease Mortality Rate per 100,000 population
- Age-adjusted Cancer Mortality Rate per 100,000 population
- Age-adjusted Cerebrovascular Disease Mortality Rate per 100,000 population
- Age-adjusted Chronic Lower Respiratory Disease Mortality Rate per 100,000 population
- Age-adjusted Diabetes Mortality Rate per 100,000 population
- Age-adjusted Heart Disease Mortality Rate per 100,000 population
- Age-adjusted Homicide Mortality Rate per 100,000 population
- Age-adjusted Mortality Rate per 100,000 population
- Age-adjusted Nephritis, Nephrotic Syndrome, Nephrosis Mortality Rate per 100,000 population
- Age-adjusted Suicide Mortality Rate per 100,000 population
- Age-adjusted Traffic Injury Mortality Rate per 100,000 population
- Age-adjusted Unintentional Injuries Mortality Rate per 100,000 population
- Age-Adjusted Years of Potential Life Lost - Alzheimer's
- Age-Adjusted Years of Potential Life Lost - Cancer
- Age-Adjusted Years of Potential Life Lost - Cerebrovascular Disease
- Age-Adjusted Years of Potential Life Lost - Chronic Lower Respiratory Disease
- Age-Adjusted Years of Potential Life Lost - Diabetes
- Age-Adjusted Years of Potential Life Lost - Heart Disease
- Age-Adjusted Years of Potential Life Lost - Homicide
- Age-Adjusted Years of Potential Life Lost - Nephritis, Nephrotic Syndrome Nephrosis
- Age-Adjusted Years of Potential Life Lost - Suicide
- Age-Adjusted Years of Potential Life Lost - Traffic Injury
- Age-Adjusted Years of Potential Life Lost - Unintentional Injuries
- Ratio of Population to Primary Care Physicians

During September, the KHM website provider Healthy Communities Institute (HCI) released updated indicators that are associated with the U.S. Department of Agriculture – Food Environment Atlas. These are; Fast Food Restaurant Density, Grocery Store Density, and Recreation and Fitness Facilities. Visit KHM at <http://www.kansashealthmatters.org/>

The bureau has also issued the 2014 Infant Mortality Research Brief, providing details on the infant deaths reported that year. The report can be found at: [http://www.kdheks.gov/hci/IMR/2014\\_Infant\\_Mortality\\_Research\\_Brief.pdf](http://www.kdheks.gov/hci/IMR/2014_Infant_Mortality_Research_Brief.pdf).

## Skidmore Named Bureau of Health Promotion Director

*by the Office of Communications, KDHE*



Susan Mosier, MD, Secretary and State Health Officer announced in October the appointment of Brandon Skidmore as the new Director of the Bureau of Health Promotion. Brandon has been with the Kansas Department of Health and Environment and the Bureau of Health Promotion for 12 years. He has served in several roles during that time including the Program Manager for the Kansas Child Health Assessment and Monitoring Project, the Grants Manager for the Bureau and, most recently, and as the Deputy Director for the Bureau. Join us in congratulating Brandon on his new role promoting healthier lives for all Kansans.

## LHD's Implementing Electronic Health Record Systems

by Aaron Davis, Public Health Initiatives Project Manager,  
Center for Community Support and Research, Wichita State University



By November 1, 11 local health departments will have newly implemented Electronic Health Record (EHR) systems as part of a Centers for Disease Control and Prevention (CDC) funded pilot program. The Kansas Department of Health and Environment launched the billing pilot program at the beginning of the year. The Kansas Immunizations Program has supported the implementation of Practice Management Software and/or Electronic Health Records (PMS/EHR) systems in 11 local health departments to monitor their effects on revenues. The local county health departments taking part in the pilot include: Clay, Ellsworth, Franklin, Harvey, Jewell, Marion, Ottawa, Phillips, Rooks, Sheridan and Thomas.

With technical assistance and facilitation support from the Center for Community Support and Research (CCSR), the pilot group went through a five-month period of investigating various systems and options. Dana Rickley, Administrator of the Clay County Health Department noted that, "Doing things as a group gave us an advantage of hearing each other's thoughts, and assisted with the evaluation of pros and cons of each system. CCSR facilitating the process was very beneficial and provided a good base for understanding the complexities."

All 11 departments signed contracts with a total of three different EHR vendors. Most of the departments participating in the pilot were either already live or went live with some aspect of their new systems the first week of October. There is an expectation with new systems that it will take up to six months for efficiencies to be seen with the systems. Department utilization and satisfaction will be monitored for the next year and a full report will be released at the end of 2016.

Contact Aaron Davis with the Center for Community Support and Research for more information at 316-978-5884 or [aaron.davis@wichita.edu](mailto:aaron.davis@wichita.edu).

## ACCREDITATION CORNER

### PHAB Video Illustrates Reaping the Benefits of Accreditation

*from the PHAB website*



The Public Health Accreditation Board's (PHAB) new video, Reaping the Benefits of Accreditation Across America, takes viewers behind the scenes at three health departments: the California Department of Public Health, the Chicago Department of Public Health, and Three Rivers District Health Department in Kentucky. Filmed on location in Sacramento, Calif., Chicago, Ill., and Owenton, Ky., this video drills deep to answer the question: "How has your health department changed as a result of going through the PHAB accreditation process?" This video was produced by the Public Health Accreditation Board (PHAB), supported with a grant from the Robert Wood Johnson Foundation and developed in partnership with Washington, D.C.-based Dahlman-Cook Productions. "The PHAB staff and Board of Directors are deeply grateful to the leadership of the three health departments for opening

their doors to PHAB's camera crew in April and May and generously sharing their time and energy in order to bring the benefits of accreditation into the national spotlight," said PHAB President and CEO Kaye Bender. Click the PHAB logo to access the video.

### CDC Improves Access to Chronic Disease Data

*from CDC*

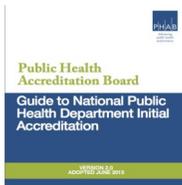


Interested in chronic disease data, risk factors, health indicators, and policy measures? The Centers for Disease Control and Prevention (CDC) is making all these **data and indicators** much easier to access and use. Use the data to describe the burden of chronic disease as well as common risk factors, identify research gaps, monitor population trends, and evaluate programs. Chronic disease data and health indicators are widely used by researchers, scientists, students, health communicators, health educators, policy-makers, epidemiologists, state and local health departments and many more. Since the recent launch of CDC's National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP) new open data portal, there have been

over 1.3 million views to 105 chronic disease data sets totaling over 33 million rows of data. The drive to bring this data together in one place with common tools was to make CDC's chronic disease data easier to access and use by both current and new audiences. In keeping with the [Federal Government's Open Data Initiative](#), this initiative is intended to promote openness, interoperability, and innovation.

## PHAB Announces Changes to the Accreditation Process

from the PHAB website



A new Guide to National Public Health Department Initial Accreditation was adopted by the Board of Directors of the Public Health Accreditation Board (PHAB) this summer. The Guide contains a number of policy and process revisions. Health departments considering or working toward accreditation should carefully review the new Guide to National Public Health Department Initial Accreditation. [A PDF copy of the Guide is available here.](#) Printed copies are available for purchase in PHAB's [online store](#). A table of effective dates of various policy and process changes may be [accessed here](#).

While the overall process for accreditation has not changed, a number of policies have been revised and others newly adopted. The previous Guide was adopted in 2011 and, based on evaluations and learning over the past few years, required revisions. The process for health departments to seek accreditation is significantly improved with the adoption of the new Guide. Implementation of most of the revisions of the process in the Guide require that changes be made in PHAB's information system, e-PHAB. The e-PHAB changes will be complete and ready for implementation on February 1, 2016. Other changes in policy were effective September 1. [See the table](#) for effective dates of the various changes in the accreditation process.

The development of the new and revised policies was steered by PHAB's Accreditation Improvement Committee. The members of this Committee represent state, local, and Tribal public health departments. Proposed revisions were vetted with the public health community and comments were carefully considered by the Committee. Please refer to Appendix 1 and 2 of the Guide for an overview of the revised process. Contact Robin Wilcox, Chief Program Officer, at [wilcox@phaboard.org](mailto:wilcox@phaboard.org) with any questions.

## Funding Opportunities

### RWJF Culture of Health Prize: 2016 Call for Applications - Deadline November 12



Up to 10 winning communities will each receive a \$25,000 cash prize and have their success stories celebrated and shared broadly to inspire locally-driven change across the nation. Applications will be accepted August 10 through November 12 at 2 p.m. by the Robert Wood Johnson Foundation (RWJF). Communities should understand they are applying for a prize and not a grant.

The Prize recognizes work that has already been accomplished. Click the RWJF logo to learn more.

### KDHE Seeking Injury Prevention Mini-Grant Applicants - Deadline - November 13



Kansas Department of Health and Environment is pleased to announce the opportunity for private or public non-profit community-based organizations, or units of local and state government to apply for an Injury Prevention Mini-Grant. This is a competitive grant process and applications are due no later than Friday, November 13, 5 p.m. The purpose of this grant is to develop or enhance unintentional injury prevention interventions in the community. Awards will not exceed \$5,000 per community with all grants pending availability of funding. If you have questions, contact Daina Hodges, Outreach Coordinator, Injury Prevention & Disability Programs, at 785-296-0351 or [dhodges@kdheks.gov](mailto:dhodges@kdheks.gov).

## Training and Conference Announcements

### Registration Closes Soon for the 2015 Oral Health Kansas Conference - November 12 - 14



The 2015 Oral Health Kansas Conference is November 12-14 at the Olathe K-State University campus. The goal of the conference is to engage oral health advocates and practitioners in a thoughtful conversation about what health equity means and how to remove barriers for underserved people. Participants will learn more about the current efforts in Kansas and across the country to build a strong network of individuals and organizations who are catalysts for change and who are ready to improve the oral health of all people. For more information click the Oral Health image.

### Isolation and Quarantine or Rural Communities Training



The Kansas Division of Emergency Management is sponsoring a training, November 12 in Burlington from 8:00 a.m. - 12:30 p.m. MCT - 433 Isolation and Quarantine or Rural Communities Training. This is a management-level, instructor-led course designed to provide small, rural, remote communities with the knowledge, skills, and abilities to effectively plan for and respond to events that require isolation and/or quarantine for their populations in a variety of low and high-impact situations, Course ID #1056560 on [KS-TRAIN](#). In the afternoon the PER-308 - Rural Isolation and Quarantine for Public Health and Healthcare Professionals course will expand on concepts introduced in MCT-433, Course ID# 1056562. Both courses will be conducted by the [Rural Domestic Preparedness Consortium](#).

### Applications Now Being Accepted for the Fourth E-Learning Institute Fellowship - Deadline - November 13



The Centers for Disease Control and Prevention (CDC), in partnership with the Public Health Foundation (PHF), invites distance learning professionals who are responsible for developing online training products to apply to participate in the E-Learning Institute (ELI) Fellowship. The ELI Fellowship empowers education and training professionals from state and local health departments and public health organizations with the knowledge, skills, tools, and resources to create quality e-learning products.

As part of the fellowship program, participants will create an online training product, receive mentoring support from CDC and outside e-learning experts, collaborate with peers, and take part in online learning opportunities. Participants will also travel to the CDC offices in Atlanta, GA to attend an in-person orientation and a final showcase event where they will present their e-learning products and receive constructive feedback from their mentors and peers.

Professionals from state, local, territorial, tribal, and international health departments responsible for developing online training products should apply. University and hospital learning professionals who are involved in public health are also encouraged to apply. Unfortunately, federal employees and contractors are not eligible for this program.

This beginner to intermediate program will be conducted from February 8 - June 10, 2016. Fellows will need to allocate approximately two hours per week during working hours for program activities and may need to commit more time to complete the final project. Fellows will also travel twice to Atlanta, GA for the orientation and final showcase event. Supervisory approval is required for participation in the ELI Fellowship.

The application period for the [E-learning Institute](#) is now open. Space is limited, so apply today to be considered for this exceptional learning opportunity. Applications will be accepted through November 13. Selected applicants will be notified by December 14. [Submit your application](#) today!

### Kansas Obesity Summit - November 17



Register to attend the Obesity Summit, November 17 at the Courtyard by Marriott in Junction City. There is no cost to attend the summit, but registration is required. The keynote speaker will be Terry O'Toole, PhD, MDiv, FASHA, who serves as Senior Advisor with the Division of Nutrition, Physical Activity and Obesity at the Centers for Disease Control and Prevention. Dr. O'Toole provides expertise and technical assistance to state and community-based programs, national partners and health organizations focused on promoting healthy eating, physical activity and obesity prevention. The summit is sponsored by the Kansas Governor's Council on Fitness and supported by the Kansas Alliance for Wellness. Visit the [Obesity Summit](#) website to find more details and to register for the summit.

### Local Public Health Leadership Series - Deadline November 20



*by Sonja Armbruster, Director of Public Health Initiatives, Center for Community Support and Research, Wichita State University*

The Kansas Department of Health and Environment (KDHE) and the Kansas Association of Local Health Departments (KALHD) are offering a leadership development opportunity in 2016 for all local and state public health professionals in Manhattan. Dates for the

2016 Local Public Health Leadership Series are, January 12 - 13, February 16 - 17, March 8 - 9, and April 12 - 13.

The purpose of the Local Public Health Leadership Series is to enhance the ability of local health department administrators and staff to exercise leadership in the delivery of Medicaid services to residents in their communities.

Leadership involves mobilizing others, sometimes without direct authority to do so, in an effort to address difficult community challenges. These difficult, daunting, adaptive challenges don't have a single expert or manager that can fix them. Progress can be made to address adaptive challenges but it will require learning, involvement of stakeholders and persistent efforts. Public health professionals are in key positions to provide this kind of leadership.

The Local Public Health Leadership Series will develop core knowledge and skills related to identifying and responding to adaptive challenges. The focus will be on development of leadership competencies identified by the Kansas Leadership Center: Diagnosing the Situation, Managing Self, Energizing Others and Intervening Skillfully. The Wichita State University Center for Community Support and Research (WSU-CCSR) will serve as faculty and coaches for the series which is modeled after the Kansas Leadership Center's training curriculum and methods. If you want to know more, email Seth Bate at [seth.bate@wichita.edu](mailto:seth.bate@wichita.edu) or Sonja Armbruster at [Sonja.armbruster@wichita.edu](mailto:Sonja.armbruster@wichita.edu).

The application can be accessed by clicking on [WSU logo](#). Send the completed application to [kristina.helmer@wichita.edu](mailto:kristina.helmer@wichita.edu) by November 20.

### New Learning Opportunities Available on KS-TRAIN



[Introduction to Quality Improvement in Public Health](#), Course ID #1059243 is a 30 minute introductory online course to provide public health professionals the basic concepts of quality improvement. Quality Improvement (QI) helps public health effectively and efficiently identify and address problems and improve solutions. It is recommended that learners taking this course have foundational training on what is public health such as the [Fundamentals of Kansas Public Health Module 1: Overview of the Kansas System](#), Course ID #1056214. Upon completion of the Introduction to Quality Improvement in Public Health, you will be able to: Define quality improvement; identify the role quality improvement plays in public health; and explain the Plan-Do-Check-Act (PDCA) cycle.

## Save the Date! Community Health Promotion Summit - January 28 - 29, 2016

by the Bureau of Health Promotion



Mark your calendars for the Chronic Disease Risk Reduction Program annual summit January 28 and 29, 2016, at the Kansas Cosmosphere and Space Center in Hutchinson.

The Bureau of Health Promotion, Kansas Department of Health and Environment is excited to announce Brian King, PhD, MPH as the keynote speaker. As the deputy director for research translation in the Office of Smoking and Health at the Centers for Disease Control and Prevention (CDC), Dr. King was a contributing author of the 50<sup>th</sup> Anniversary U.S. Surgeon General's Report on Smoking and Health. He has authored or co-authored more than 60 peer-reviewed scientific articles about tobacco prevention and control, and was the lead author of CDC's 2014 evidence-based guide, Best Practices for Comprehensive Tobacco Control Programs. Dr. King has worked for 10 years to provide sound scientific evidence to inform tobacco control policy and to effectively communicate this information to key stakeholders, policy-makers, the media and the general public.

A few changes of note about the 2016 event:

- The Chronic Disease Risk Reduction (CDRR) Annual Summit is being retitled the Community Health Promotion Summit.
- The focus will be on building momentum to end the tobacco epidemic in Kansas.
- All organizations submitting applications for SFY 2017 CDRR funding are required to attend – important information about the application will be provided. Applications are due in March 2016.

### Public Health Ethics Training Series Available on TRAIN



A series of modules on Public Health Ethics is posted to KS-TRAIN at <http://ks.train.org>. The series was developed to promote the ethical practice of public health through teaching about the ethical principles of public health and by providing resources for creating an ethical climate in public agencies and institutions. The modules were developed in partnership with the Program in Public Health Ethics at the University of North Carolina Gillings School of Global Public Health with the support of the Southeast Public Health Training Center. Public Health Ethics Modules:

- [Distinguishing Public Health Ethics from Medical Ethics](#), Module 1, Course ID# 1050863
- [Values and Beliefs Inherent to a Public Health Perspective](#), Module 2, Course ID# 1050887
- [The Public Health Code of Ethics](#), Module 3, Course ID# 1050890
- [Law and Ethics in Public Health](#), Module 4, Course ID# 1050892
- [Pandemic Influenza: A Justice Case Study](#), Module 5, Course ID# 1050897
- [Decision-making in Public Health Ethics](#), Module 6, Course ID# 1050901
- [Barriers to the Ethical Practice of Public Health](#), Module 7, Course ID# 1050903
- [Responding to Unethical Events](#), Module 8, Course ID# 1050904

### Building Capacity for Evidence-Informed Public Health



The process of distilling and disseminating the best available evidence from research, context and experience, and using that evidence to inform and improve public health practice and policy is the Evidence-Informed Public Health. The National Collaborating Centre for Methods and Tools (NCCMT) has developed online learning opportunities to support a seven-step process of Evidence-Informed Public Health. Click the logo to view the learning modules.

## News and Resources

### Population Health and Preparedness Statewide Call



The Kansas Department of Health and Environment (KDHE) hosts a Population Health and Preparedness Statewide Call on the fourth Tuesday of every month at 10 a.m. The next call will be November 24. To view minutes from the monthly calls, click the KDHE logo.

### Can You Handle the Truth? Some Ugly Facts in Science and Sensibility



Tracey Brown, Director for [Sense About Science](#) was recently interviewed by the guardian. The following lines are excerpts from that interview. The ugly truth is that all of us – however informed, however good our intentions – end up letting things slide once in a while. We overlook, overstate or understate the evidence behind research, claims, or policies, for a number of reasons. Instead of fearing what people will make of tentative knowledge and uncertainty, our role – our challenge – must be to give them the tools to make sense of it. We have to be honest. There are so many answers that research doesn't have, and even where there is evidence, it often cannot suffice. Some decisions will have to be taken on the basis of uncertain, incomplete and conflicting evidence. That's the ugly truth. We can't just correct misinformation. We need to engage the public in asking tough questions, calling for evidence, and understanding it, in particular the role and nature of uncertainty.

### Everyone Needs a Flu Vaccine – Every Flu Season

**HAVE YOU GOTTEN YOUR FLU VACCINE?**  
GET VACCINATED NOW!  
IT'S NOT TOO LATE!

Flu viruses are constantly changing, and different flu viruses can circulate and cause illness each season. Flu vaccines are made each year to protect against the flu [viruses](#) that research indicates will be most common. Also, immunity from vaccination declines after a year. This is why everyone needs a flu vaccine every season. While everyone six months and older should get a flu vaccine this season with rare exception, it's especially important for some people to get vaccinated. Watch this [fun video](#) on YouTube to learn why each person should get vaccinated. Check out the Centers for Disease Control and Prevention Influenza vaccination resources [here](#).

### Are You a Trivia Buff – Check out Challenge Your Health IQ



Do you know the minimum SPF needed to protect yourself from the sun's harmful rays, or how many seconds you should wash your hands to kill germs. Let the Health IQ game show scientist lead you through an exciting selection of trivia questions and word scrambles. Choose from three levels of difficulty, easy, medium, and hard, or be surprised by selecting a random mix. Race against the clock to earn more points or use hints when you are stumped. Each quiz delivers a mix of ten questions. Answer as many of the ten questions correctly and as quickly as possible with the hopes of earning bonuses like A+ Student, Public Health Nerd, and Einstein or score poorly, and earn the Hot Mess achievement. Select the Health IQ logo to learn more and download the App.

### Children are Vulnerable to Environmental Exposures



Children's rapid development during the fetal period through early childhood makes them more vulnerable to environmental exposure. Children are especially vulnerable to environmental contaminants due to their rapid development during the fetal period through early childhood, and age-appropriate behavior also exposes them to hazards. They crawl and play on the floor or in the yard where they can come into contact with harmful substances—and they put everything in their mouths. Just their physical size puts children at greater risk of exposure. From birth, children breathe more air, drink more water, and eat more food per pound of body weight than adults. An infant's breathing rate is more than twice an adult's. Children continue to be vulnerable as they go through the developmental changes of puberty. In 2008, the U.S. economic cost for children's environmental exposures was estimated at \$76.6 billion. The Centers for Disease Control and Prevention (CDC) have resources for clinicians as well as parents on [environmental exposure risks for children](#) and taking an environmental history. Also, the health care community and families can contact the nearest [Pediatric Environmental Health Specialty Unit](#) to learn how to protect a child from exposure to health hazards in the environment. Click the image to access CDC's resources. To access Kansas environmental health data click the Kansas Environmental Public Health Tracking logo.



### How to Talk to a Child about a Suicide Attempt in Their Family



This [online resource](#) from the U.S. Department of Veteran's Affairs (VA) provides age-specific information for talking with children and adolescents about a family member's suicide attempt. Learn why talking about a suicide attempt is important, when to talk about an attempt, how much information to share, ways to support children and adolescents and examples on what to say and how to say it. Click the image to learn more.

### Toolkits Now Available on Plan4Health Website



The American Public Health Association and the American Planning Association, with the expertise of partners and members from across the country, have built a library of resources. The new toolkits, [available online](#), include a variety of materials and cover the following topics: Comprehensive Plans and Health; Healthy Community Design; Safe Routes to Parks; Transportation and Health; Health Equity; and Health in All Policies. Plan4Health is supported by the Centers for Disease Control and Prevention.

### Mandatory Flu Immunization of Health Care Workers Ethical, Necessary



The American Academy of Pediatrics has reaffirmed its support for a [mandatory influenza immunization policy](#) for all health care personnel (HCP) nationwide. Many individuals at high risk of influenza and its associated complications are in frequent, close contact with HCP because of their need to seek medical services. Therefore, immunization of HCP is a crucial step in efforts to protect those at risk of health care-associated influenza, according to the AAP policy statement. The Academy joins other organizations that have called for mandatory annual influenza immunization for HCP, including the Centers for Disease Control and Prevention, American Academy of Family Physicians, American Hospital Association, Society for Healthcare Epidemiology of America, Infectious Diseases Society of America, Pediatric Infectious Diseases Society, Association for Professionals in Infection Control and Epidemiology Inc., and the American Public Health Association.

### Yes, Soda Taxes Seem to Cut Soda Drinking



For about a decade now, policy makers and the soda industry have been fighting about the idea of a big soda tax. Proponents say it would fight obesity by reducing consumption of sugary drinks. A leading objection by the industry is that the tax simply would not work. Those discussions were largely theoretical, because no big city, state or country had passed the [kind of tax](#) that advocates wanted. That recently changed. In 2013, [Mexico passed a tax](#) right out of the public health literature. And now the theoretical debate is becoming more real. Preliminary data from the Mexican government and public health researchers in the United States finds that the tax prompted a substantial increase in prices and a resulting drop in the sales of drinks sweetened with sugar, particularly among the country's poorest consumers. The long-term effects of the policy remain uncertain, but the tax is being heralded by advocates, who say it could translate to the United States. Click the [New York Times](#) logo to read more.

### Preparing for the Next Outbreak



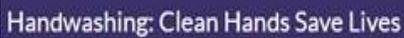
The "Next Outbreak" is a multimedia collaboration of The GroundTruth Project and NOVA Next in association with WGBH Boston. The project is part of the GroundTruth's global health reporting, made in partnership with the Kaiser Family Foundation. In the series, journalists are reporting on-the-ground in Asia, Africa, and North America, asking how doctors, epidemiologists, and public officials responded to the last pandemic and what it will take to be prepared for future outbreaks. They're looking for places where our response fell short, but they're also documenting the bright spots, instances where our ability to prevent, predict, and respond to infectious diseases are gaining momentum.

### New Study Shows - More People Die from Air Pollution than Malaria and HIV/Aids



The new work, published in the journal Nature, is the first study to single out different outdoor air pollution sources and estimate the number of premature deaths they each cause, considering road traffic, fossil fuel power stations and other sources. The researchers used a detailed computer model of the global atmosphere to assess the impact of air pollution on different populations, including new information on how pollution affects people in China and India. Click the logo to learn more.

### Hand Hygiene Key to Reducing Absenteeism Among School Children



School children are at a higher risk for infection because of their immature immune systems and more frequent social mixing. Gastrointestinal and respiratory infections are the most commonly occurring illnesses among schoolchildren because of their poor hand hygiene. The [American Journal of Infection Control published a study](#) that indicates it is very important in the public health agenda to standardize a hand washing program for school teachers and school nurses to teach vulnerable high-risk groups about hand washing procedures and ultimately to prevent the spread of germs in the school community. There are numerous. Check out [Youtube](#) for educational videos on handwashing for children or the [posters](#) for schools from the Centers for Disease Control and Prevention.

### Programs Work to Keep Seniors Healthy



It can start with forgetting things such as names and addresses or with trouble concentrating. It can affect decision-making and rob independence. The "it" is cognitive impairment. And because a growing U.S. senior population means more cases of cognitive decline down the road, it signals an even greater task for health workers who must intervene through prevention, treatment and research to keep senior brains healthy. One in eight adults ages 60 and older in the past year dealt with memory loss and confusion that became worse after a year, according to the The Healthy Brain Initiative: The Public Health Road Map for State and National Partnerships, 2013 - 2018, a 2013 report from the Centers for Disease Control and Prevention and the Alzheimer's Association. Only 19.3 percent of those adults told a health care provider about those issues, the report said. More than five million Americans in 2015 are estimated to have Alzheimer's disease, a specific type of dementia, according to the Alzheimer's Association. Click the logo to learn more.

### CDC Clear Communication Index Assists in Assessing Public Communications Materials



The Centers for Disease Control and Prevention Clear Communication Index (Index) is a research-based tool to help you develop and assess public communication materials. The Index has four introductory questions and 20 scored items drawn from scientific literature in communication and related disciplines. The items represent the most important characteristics that enhance and aid people's understanding of information. Click the image to learn more.

### Check the CDC Influenza app



The Centers for Disease Control and Prevention (CDC) Influenza app makes it easier than ever for health professionals to find CDC's latest recommendations and updates on national flu activity, vaccination recommendations, diagnosis and treatment and laboratory testing. Users can order official CDC-designed print products for posting in the workplace or distributing to patients.

### Job Postings

Applications are being accepted for the positions listed below.

#### Douglas County

- [Public Health Nurse](#)

#### Franklin County Health Department

- [Registered Nurse \(PT\) \(20 Hrs. week\)](#)

#### Garden City

- [Nursing Instructor](#)

#### Geary County

- [Nurse Practitioner \(APRN\)](#)

#### Kansas State University

- [MPH Director](#)

#### Konza Prairie Community Health and Dental Center

- [Clinical Psychologist or LCSW](#)

#### Reno County Health Department

- [Public Health Nurse Stand by \(PRN\)](#)

#### Riley County Health Department

- [Advance Practice Registered Nurse \(APRN\)](#)
- [Health Department Administrator](#)

#### Shawnee County Health Agency

- [RN MCH Outreach \(Health Agency\)](#)

#### Sedgwick County

- [Health - Public Health Specialist](#)
- [Health - Registered Dietician](#)
- [Health - Behavioral Intervention Specialist](#)
- [Health - Senior Social Worker](#)
- [Health - EMSS Clinical Practice Manager](#)

#### Wyandotte County

- [Nurse Practitioner](#)



Career opportunities at the Kansas Department of Health and Environment can be found [here](#).

#### Kansas Department of Health and Environment Program Newsletters

[Epi Updates Newsletter](#)

[Green Guide](#)

[Health Homes Herald](#)

[KanCare Advisor](#)

[Kansas Environmental News](#)

[Kansas Health Statistics Report](#)

[Kansas Statewide Farmworker Health Program](#)

[Newborn Screening Newsletter](#)

[Nutrition and WIC Update](#)

[Oral Health Newsletter](#)

[What's Happening Wednesday \(Immunization\)](#)

[ZIPS Newsletter - Bureau of Family Health/Children and Families](#)

#### Public Health Connections Information

To receive the monthly E-Newsletter, e-mail [bchs@kdheks.gov](mailto:bchs@kdheks.gov).

Previous issues of Public Health Connections may be found at

[http://www.kdheks.gov/olrh/public\\_health\\_connections.htm](http://www.kdheks.gov/olrh/public_health_connections.htm)

Send your public health news to

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