

**KDHE Public Health Call
June 26, 2012**

Miranda Steele, KDHE Communications Director, welcomed attendees and passed along Dr. Moser's regret for not being able to address the callers, as he was in a KanCare meeting with Indian Health Service clinics.

Miranda provided a status update on KanCare. The final Section 1115 demonstration waiver application will be submitted in July, following consultation with tribal health clinics. The State is expected to announcement the KanCare companies soon (Editor's Note: the announcement was, in fact, made the next day - http://www.kdheks.gov/hcf/kancare/download/State_Signs_Three_KanCare_Contracts_release.pdf). While much more info on KanCare is forthcoming, we encourage local health depts. and community hospitals to ask questions and address issues through the Office of Local Health. It's important to prepare for what your county commissioners may be asking about KanCare and how it impacts the health care programs and long-term care services where you live. KALHD has also provided resources for LHDs in their negotiations with KanCare companies as they work to build their provider networks.

On the subject of the Local Environmental Protection Program and the transition away from state funding, Miranda said the majority of counties have been communicating with elected commissioners to request funding for local sanitarians (or funding for staff within a local group) to continue to have personnel enforcing the local county code. It's too early to say how many counties are going to approve such funding requests, and if denied, how each county will handle their local code. Each county has its own environmental protection plan, its own code and process for enforcement. KDHE will provide counties with technical and program assistance as needed.

Miranda announced that in addition to the changes we're expecting under Executive Reorganization Order Agency 41, KDHE will undergo an internal reorganization parallel to ERO 41. ERO 41 has KDHE's Health Occupations Credentialing Program moving out of the agency and into what will soon be Kansas Dept for Aging and Disability Services. Because HOC would be moving out of KDHE's Bureau of Child Care and Health Facilities and to another agency, Dr. Moser and Deputy Secretary Aaron Dunkel saw this as an opportunity to realign the remaining programs in BCCHS with two other bureaus within KDHE. Thus, the Health Facilities program moved to the Bureau of Community Health Systems while the Child Care and Foster Care programs moved to the Bureau of Family Health. LHDs and Hospitals will be able to find program staff using the same phone numbers and the same email addresses, except with HOC, whose staff will have new email addresses when Dept on Aging becomes KDADS. Miranda said that more information about the Reorg would be published in Dr. Moser's column in the July issue of Public Health Connections.

Tom Langer, Bureau Director for Environmental Health, provided an update on the Healthy Homes and Lead Hazard Prevention Program as well as capacity training opportunities for LHDs. With CDC eliminating HH funding, KDHE is no longer able to perform onsite inspections at homes around Kansas. Guidelines will be available soon and we'll have them on a flash drive for LHDs to save on as many computers as they need. The guidelines will have all the forms and procedures needed in the event qualified LHD staff conduct the inspections. On a separate but similar note, the HH program director, Shannon Steinbauer, has accepted a job with the US HUD. So, Shannon will still be working with lead prevention, but at the federal level.

Tom said that his office is assessing the ongoing need in our state for expanded capacity at the local level to identify and assist families who are affected by lead poisoning in their homes. He said he's reviewing remaining funds to see if further training can be offered and, if so, will rapidly notify Jane to assist in getting the word out to targeted areas where we hope to recruit and train local health department staff.

Tom also shared with LHDs and Hospitals the activities surrounding the Extreme Heat in KS and the work to collect info from the locals about heat-related incidents. Tom encouraged everyone to submit their heat-related stats so we're able to track the impact of these extreme temps. While heat-related incidents are not reportable under the requirements, it helps to know the effects so we can monitor the situation from a statewide perspective and we can demonstrate the importance of the safety tips and precautions. (Editor's Note: More info about submitting heat-related incidents was provided through KS-HAN)

Jane Shirley, Local Health Director, said that all the grants through our consolidated grant process (Aid-to-Local), except for the family planning grants, have the final approval decision. She said all grantees should have been notified or will very soon be notified of their awards. The reporting forms will be uploaded to the KDHE website in the coming weeks. A final decision on the FP grants was expected soon.

Miranda said that KDHE has joined the Midwest Dairy Council and other state and regional organizations as a partner in the Fuel Up to Play 60 program. If you and your schools are interested, let's look for ways to partner on an activity to promote 60 minutes of physical activity a day and a nutritional diet. For additional information and to see schools in your area who participate, visit the Fuel Up to Play 60 webpage at <http://students.fueluptoplay60.com/LogIn?ReturnUrl=%2f>.

Miranda said that the KanPICH group will be sending a survey to all LHDs and Hospitals asking for their input on the use of KansasHealthMatters.org. Your feedback is valuable as we evaluate this website/resource and made adjustments to better serve you. Be on the lookout for the survey.

The Statewide Health Information Exchange goes live July 1. Kansas is an opt-out state; more info can be found at www.KHIE.org. In a HIE, patient records are kept on Electronic Health Record systems in order to be exchanged, thus improving care when providers are able to better communicate about a patient's treatment.

An update was provided regarding the increased numbers of cases of pertussis in some locations in Kansas.