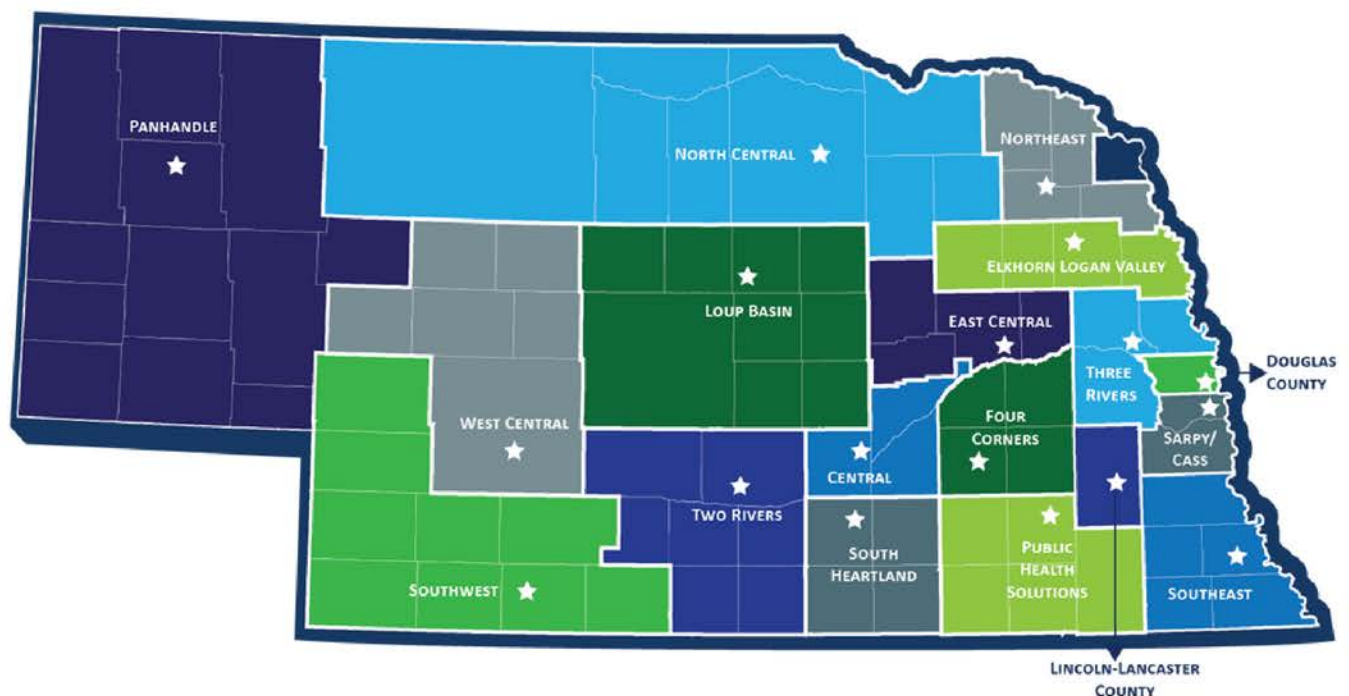


# 2022 LOCAL HEALTH DEPARTMENTS

*Annual Reports to the  
Nebraska Legislature*



**Table 1: The following local health departments are eligible for funds under the Health Care Funding Act and are included in this report.**

**Central District Health Department**  
*serving Merrick, Hall, and Hamilton counties*

**Douglas County Health Department**  
*serving Douglas County*

**East Central District Health Department**  
*serving Boone, Nance, Platte, and Colfax counties*

**Elkhorn Logan Valley Public Health Department**  
*serving Madison, Stanton, Cuming, and Burt counties*

**Four Corners Health Department**  
*serving Polk, Butler, York, and Seward counties*

**Lincoln-Lancaster County Health Department**  
*serving Lancaster County*

**Loup Basin Public Health Department**  
*serving Blaine, Custer, Garfield, Greeley, Howard, Loup, Sherman, Valley, and Wheeler counties*

**North Central District Health Department**  
*serving Cherry, Keya Peha, Boyd, Brown, Rock, Holt, Knox, Antelope, and Pierce counties*

**Northeast Nebraska Public Health Department**  
*serving Cedar, Dixon, Wayne, and Thurston counties*

**Panhandle Public Health District**  
*serving Deuel, Dawes, Box Butte, Sheridan, Banner, Morrill, Garden, Kimball, Cheyenne, Grant, Sioux, and Scotts Bluff counties*

**Public Health Solutions**  
*serving Fillmore, Saline, Thayer, Jefferson, and Gage counties*

**Sarpy/Cass Health Department**  
*serving Sarpy and Cass counties*

**South Heartland District Health Department**  
*serving Adams, Clay, Nuckolls, and Webster counties*

**Southeast District Health Department**  
*serving Johnson, Nemaha, Otoe, Pawnee, and Richardson counties*

**Southwest Nebraska Public Health Department**  
*serving Chase, Dundy, Frontier, Furnas, Hayes, Hitchcock, Keith, Perkins, and Red Willow counties*

**Three Rivers Public Health Department**  
*serving Dodge, Washington, and Saunders counties*

**Two Rivers Public Health Department**  
*serving Dawson, Buffalo, Gosper, Phelps, Kearney, Harlan, and Franklin counties*

**West Central District Health Department**  
*serving McPherson, Logan, Lincoln, Hooker, Arthur, and Thomas counties*



# 2021-2022 ANNUAL REPORTS

## Local Public Health in Nebraska

### Nebraska Health Care Funding Act

Nebraska's local public health departments (LHDs) act as communities' Chief Health Strategists by assuring that local partners are working together to improve and protect the health and wellbeing of all Nebraskans. The Nebraska Health Care Funding Act (LB 692) was passed in 2001 by the Nebraska Legislature. This Act provides funding to LHDs through the County Public Health Aid Program (Neb.Rev.Stat. §71-1628.08). The Act also requires all eligible LHDs to prepare a report each fiscal year. These reports highlight examples of specific programs and activities toward meeting LHDs' statutory obligations. These reports do **not** reflect the totality of the work performed by LHDs.

### The Core Functions of Public Health — cited in the Nebraska Health Care Funding Act



**Assessment:** Collect and analyze information about health problems in Nebraska communities.



**Policy Development:** Work with partners to apply data, educate the public, and develop programs and policies — all to address and prevent illness, disease and disability.



**Assurance:** Promote effective coordination and use of community resources to protect the health and wellbeing of Nebraskans.

### 10 Essential Services of Public Health

The activities and programs of LHDs are summarized under the associated 10 Essential Services of Public Health.

They provide a working definition of the public health system and a guiding framework for the responsibilities of local public health partners.

See: <https://phnci.org/national-frameworks/10-ephs>.





## Leveraging Other Funds

For over 20 years, funds from the Nebraska Health Care Funding Act (NHCFA) have served as the financial foundation for all LHDs and remain critical to LHD readiness to respond to public health issues. It was from this foundation that LHDs ramped-up their capacity in response to the COVID-19 pandemic, starting in the spring of 2020.

Data collected by the Nebraska Association of Local Health Directors (NALHD) in fiscal year 2021-2022 looked at revenue from LHDs' most recent completed fiscal years. These revenues included significant temporary funding for the COVID-19 response. Even so, State funds remained critical to LHD work; making up as much as 40% of individual LHD revenues and an average of 13% statewide.

LHDs' sustainability and ability to meet their statutory obligations and perform the Three Core Functions and 10 Essential Services of Public Health generally require their ongoing effort and success in securing additional funds. Typically, LHDs rely on federal pass-through awards via Nebraska DHHS and other State agencies, for a range of work. LHDs also pursue private or direct federal grants. In limited cases, LHDs collect fees and or bill for services.

## Moving Beyond the COVID-19 Response

The work during much of this reporting period included ongoing effort to respond to COVID-19, ensure access to vaccines, and help communities safely resume usual activities. LHDs' work would not be possible without the foundational resources provided by the Legislature via the Nebraska Health Care Funding Act. Existing and new funding sources remain critical post-pandemic as we rebuild our public health workforce and system and ensure its readiness for future small- and large-scale public health events.

## Organizational Coverage

As of June 30, 2022, a total of 18 LHDs covering 92 counties were eligible to receive funds under a portion of the Health Care Funding Act, Neb.Rev.Stat. §71-1626 through 71-1636. The list of eligible public health departments and their affiliated counties is shown in Table 1. Dakota County has a single county health department that does not meet the population requirements of the Act. Nebraska DHHS and other local public health partners continue to support the work of all LHDs.

## Report Time Frame and Scope

As required by statute, LHDs funded under the Health Care Funding Act submit a report to DHHS in October, for inclusion in the full Annual Report submitted by Nebraska DHHS on December 1. This Annual Report covers July 1, 2021 to June 30, 2022 and includes descriptions of selected activities, services, and programs provided by the LHDs related to the Three Core Functions and 10 Essential Service of Public Health. LHDs supported through the public health portion of the Nebraska Health Care Funding Act are working across their service areas to improve and protect the health and wellbeing of local communities. In their highlighted stories, LHDs have highlighted a range of programs that strategically address issues that impact the health and wellbeing of Nebraskans. Visit LHDs' individual websites (included in each report) to learn more about the full scope of their work.



**Central District  
Health Department**

*Serving Hamilton, Hall, and Merrick counties*



**2022**

**ANNUAL REPORT**





## DECREASING THE SPREAD OF ILLNESS IN LONG TERM CARE AND ASSISTED LIVING FACILITIES

The Central District Health Department (CDHD) advises 35 facilities, including long term care and assisted living facilities, on infection control and preventing the spread of illness. Efforts are directed toward staff residents, families, and visitors.

**Training:** Infection prevention and control (IPC) support is CDHD's primary goal when working with long term care (LTC) and assisted living (AL) facilities. This support encompasses many practices, such as proper hand hygiene, using appropriate EPA List N products to eliminate SARS-CoV-2 during environmental cleaning and disinfection, appropriate use of personal protective equipment (PPE), airborne transmission precautions, managing visitor access and movement within the facility, patient placement, quarantine and isolation, conventional, contingency and crisis capacity staffing, and more.

**Equipment:** Another important role of CDHD is providing personal protective equipment (PPE), COVID-19 testing supplies, vaccines, and cleaning supplies to LTC/AL facilities, while staying current on CDC guidelines and recommendations. CDHD also provides vaccination clinics at LTC/AL and independent living facilities to promote uptake of vaccines, and decrease the barriers associated with receiving vaccinations.

**Ensuring Capability of Practices:** Existing and emerging infections (such as antibiotic-resistant organisms in LTC/AL facilities where older, more vulnerable residents live) create unique challenges for infection control. Ongoing, continuous support is vital as healthcare-associated infections are among the leading causes of preventable deaths in the United States.



# ABOUT THIS REPORT

This report includes examples of efforts by this local health department to make the “Good Life” a healthy one in their jurisdiction. The following examples reflect work supported through multiple sources of funding, including monies from the Nebraska Health Care Funding Act (HCFA).

Local health departments act as communities’ Chief Health Strategists by assuring that the health and wellbeing of Nebraskans are protected and improved. Local health departments do this by working in each of the Three Core Function Areas of Public Health:



**Assessment:** Collect and analyze information about health problems in Nebraska communities.



**Assurance:** Promote effective coordination and use of community resources to protect the health and wellbeing of Nebraskans.



**Policy Development:** Work with partners to apply data, educate the public, and develop programs and policies—all to address and prevent illness, disease and disability.

## Community Health Assessment (CHA) / Community Health Improvement Plan (CHIP)

Across the nation, COVID-19 had a greater adverse impact on the health of rural people as well as the health of ethnic and racial minorities.

CDHD conducted a CHA survey with the support of local hospitals and community partners. Over 800 community members responded in English, Spanish, Arabic, and Somali. Follow-up focus groups were conducted. Needs identified include: more culturally appropriate behavioral healthcare, increased access to healthcare, and more quality childcare. To address these priorities, CDHD is partnering with behavioral health experts and the Grand Island Multicultural Coalition to promote resources, decrease stigma, and increase bilingual mental health trainings for residents. The CDHD and partners are building a Community Health Worker network to increase access to Medicaid and healthcare. The CDHD is partnering with the Hall County Community Collaborative to increase the reach of their educational services to Women Infants and Children (WIC) parents through the Ready Rosie Program.

### CHIP PRIORITIES:

- Increasing access to health care
- Increasing culturally appropriate behavioral health care
- Support for quality childcare

# AREAS OF WORK

## Communicable Disease Control and Prevention

*Includes communicable disease epidemiology (disease outbreak management/response), tuberculosis (TB), immunizations, sexually transmitted infections, and surveillance (tracking and following up on reports and provider/school reports).*

To combat COVID-19, the CDHD administered over 17,000 vaccines in the last 12 months. In addition to COVID-19 vaccinations, CDHD administered the Vaccine for Children (VFC) program, as well as CDHD's Private Pay Vaccine Program. CDHD continues to answer questions and educate residents on safety precautions to reduce risks associated with COVID-19.

In addition to the disease investigation program, CDHD now follows-up with individuals who test positive for sexually transmitted diseases.

## Chronic Disease Control and Prevention

*Includes asthma, cancer, cardiovascular disease, diabetes, obesity, tobacco control, and worksite wellness.*

Every DPP participant lowered their **blood pressure by 10 to 20 points**



The CDHD offers the Diabetes Prevention Program (DPP) as well as the Living Well with Diabetes Program in both English and Spanish. CDHD will be hosting DPP virtually in September 2022, for the first time. The Grand Island City Library hosts DPP at their facility. In the last Spanish-language DPP, every participant lowered their blood pressure by 10 to 20 points.

## Access to and Linkage to Clinical Care

*Includes coordination of services between medical providers and providers of health-related social needs, oral health/dental services, and behavioral/mental health.*

Rural and ethnic minority populations have been disproportionately impacted by COVID-19 and other health issues. In Hall County, 32% of residents are Latino/Hispanic. While Grand Island is designated urban, the rest of Hall County and all of Merrick and Hamilton counties are rural. All CDHD counties are designated Mental Health Professional Shortage Areas.

The need to expand services to residents in our rural and ethnically diverse communities, has increased during the pandemic. The CDHD is developing a program to locate community health workers and health navigators to be readily available to help residents access programs and services.



All CDHD counties are designated **Mental Health Professional Shortage Areas**



# AREAS OF WORK

## Environmental Health

*Includes radon, lead, emergency response, hazardous substances and sites, and Walkable Communities initiatives.*

The CDHD Environmental Health Inspectors inspect over 450 restaurants, food trucks, and grocery stores in Hall County, twice each year. They also inspect and issue temporary food permits to special event food stands, including at the Nebraska State Fair.

The CDHD provides testing for private and public water systems, notifying owners about the presence of bacteria or nitrates and advising next steps.

To ensure safety standards are met, the CDHD monitors lake water for toxic algae and inspects swimming pools and summer camps.

## Injury Prevention

*Includes motor vehicle injuries, occupational injuries, senior fall prevention, substance abuse, car seat safety, binge drinking, and distracted driving.*

The CDHD provides injury prevention education on a number of issues through the organization's website. This includes seat belt use, child safety seats, safe Trick-or-Treating, safe swimming, opioid overdose prevention and use of Narcan, safe food handling, and many other seasonal topics.

## Maternal and Child Health

*Includes Women, Infant, and Children (WIC), family planning, newborn screening, evidence-based home visitation, Early Preventative Screening, Diagnosis, and Treatment (EPSDT).*

CDHD helps over 2,500 clients each month with WIC services. Clients include pregnant and breastfeeding moms who qualify by income, as well as their children up to age 5.

The CDHD WIC caseload grew steadily since the start of the COVID-19 pandemic. Infant formula recall and shortages were more recent challenges. USDA's special waivers allowing clients to purchase a wider variety of formula brands were extended, due to the continued shortage of all formula.

# ADDITIONAL ACTIVITIES

Examples of additional public health activities that Central District Health Department performs to assure that the health and wellbeing of Nebraskans are protected and improved.

Communication is at the core of effective public health. The Central District Health Department uses a variety of communication strategies to influence and motivate the public about important health issues. It is critical for public health to communicate effectively in this unwelcome and long-lasting pandemic. The CDHD staff make themselves available for media interviews on request and average at least two television interviews each week, along with newspaper stories and weekly radio sessions. The CDHD has onboarded a Communication Specialist to ensure timely coordination and production of messaging using a variety of media including the CDHD website, Facebook, and Twitter. The CDHD continues to post COVID-19 cases three times each week and post COVID-19 wastewater results weekly. The department's website links to many CDC resources where accurate and up-to-date information can be found on many subjects. CDHD continues to focus on messaging that is both credible and science-based as a means of combating misinformation related to COVID-19 and vaccines. CDHD produces news releases in both English and Spanish. Going forward, CDHD is developing a Spanish link to the webpage for more effective communication. The CDHD continues to look at communication as an integral part of effective public health services.







## Teresa Anderson

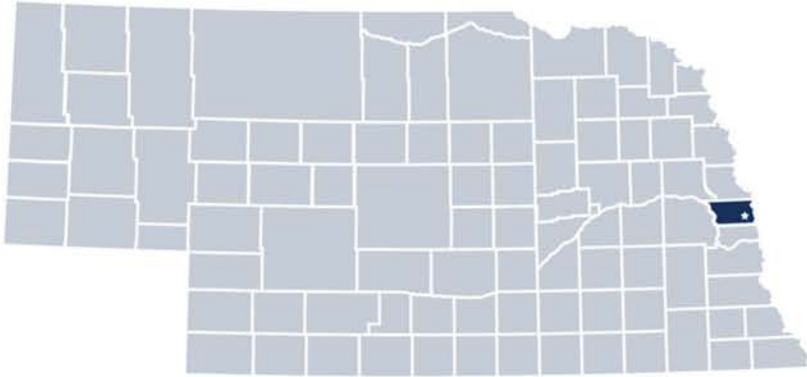
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**Douglas County  
Health Department**

*Serving Douglas County*



# 2022

# ANNUAL REPORT







## PARTNERSHIPS TO IMPROVE MENTAL HEALTH

In Douglas County, our residents report higher percentages of fair or poor mental health than the United States (17% vs 13.4%) and more of our residents report having been diagnosed with depression (25% vs 20.6%). This is undergirded by increasing rates of poverty, worries about housing safety and availability, and issues such as racism. These issues only escalated and became more apparent during COVID-19. Working under the Douglas County Board of Health's declaration of racism as a public health crisis, we built, staffed, and integrated the Office of Health Equity into both department and community work. We are partnering with health systems and non-profit organizations such as The Wellbeing Partners and Project Harmony to open discussions on destigmatizing mental health, working toward improved access for those who need it, and pursuing equity in the determinants of health that will decrease mental health problems over time. We have assembled community advisory committees for North and South Omaha to continually work with our residents to determine needs and best solutions to mental health and other public health problems.

# ABOUT THIS REPORT

This report includes examples of efforts by this local health department to make the “Good Life” a healthy one in their jurisdiction. The following examples reflect work supported through multiple sources of funding, including monies from the Nebraska Health Care Funding Act (HCFA).

Local health departments act as communities’ Chief Health Strategists by assuring that the health and wellbeing of Nebraskans are protected and improved. Local health departments do this by working in each of the Three Core Function Areas of Public Health:



**Assessment:** Collect and analyze information about health problems in Nebraska communities.



**Assurance:** Promote effective coordination and use of community resources to protect the health and wellbeing of Nebraskans.



**Policy Development:** Work with partners to apply data, educate the public, and develop programs and policies—all to address and prevent illness, disease and disability.

## Community Health Assessment (CHA) / Community Health Improvement Plan (CHIP)

The Douglas County Health Department (DCHD) partners with The Wellbeing Partners, Sarpy/Cass County Health Department, and Pottawattamie County Health Department (Iowa), and area health systems to take a regional approach to assessing health in the Omaha Metro area. In 2021, an updated CHA was published, with mental health rising to the top as the issue most concerning to residents. The CHIP is underway.

**CHIP PRIORITIES:** Issues relating to mental health remain the top concern for Douglas County residents, with 85.1% of respondents characterizing mental health as a major problem. This remains the top priority for the CHIP. Other top areas prioritized by the community include nutrition, physical activity and weight, substance abuse, diabetes, and sexual health.



# AREAS OF WORK

## Communicable Disease Control and Prevention

*Includes communicable disease epidemiology (disease outbreak management/response), tuberculosis (TB), immunizations, sexually transmitted infections, and surveillance (tracking and following up on reports and provider/school reports).*

Outreach for Sexually Transmitted Infection (STI) prevention is now in full swing following two years of the pandemic limiting activities. The DCHD offered a test-at-home program which increased access to testing for people otherwise unable to come to a clinic. A variety of venues have offered STI testing, including a clinic at DCHD. In addition to outreach, testing, and treatment, thousands of condoms were distributed to locations such as probation offices, library branches, and various community clinics. The DCHD maintains a high successful treatment rate, with over 96% of those testing positive for an STI being successfully treated.

## Chronic Disease Control and Prevention

*Includes asthma, cancer, cardiovascular disease, diabetes, obesity, tobacco control, and worksite wellness.*

The DCHD continues to work with community partners to assist residents in nicotine cessation. The DCHD also provides education support for Omaha Healthy Start, which helps those who are pregnant to build health for themselves and their infants, decreasing lifetime risk of many chronic diseases. Finally, the DCHD established the Douglas County Overdose Fatality Review Implementation Guide, which outlines the responsibilities of Overdose Fatality Review team members, policies, and procedures. Broader policies related to overdose fatality review are currently being explored.

## Access to and Linkage to Clinical Care

*Includes coordination of services between medical providers and providers of health-related social needs, oral health/dental services, and behavioral/mental health.*

Throughout the COVID-19 pandemic, the DCHD has provided guidance and services to the public to combat transmission. In the past year, the department has continued to offer all available vaccine courses, from the initial series to the most recent booster. Currently, 67.9% of the county is fully vaccinated, including children over 6 months of age. A total of 57.9% of residents over the age of 5 have received a third dose and/or booster doses.

Pop-up clinics were held in areas with limited access to services. The DCHD was also the primary hub in the community for the distribution of free testing kits to the community. These kits were provided through a partnership with Nebraska Department of Health and Human Services (NE-DHHS). Thousands of kits were provided to school districts and public libraries to be freely distributed to the public. The DCHD has also been the primary site in the region for monkeypox vaccination, following a significant outbreak across the nation.

Finally, the department has hired seven new community health workers (CHWs). These workers identify and connect people to resources and care that they need and are struggling to find. This program continues to grow and develop.

# AREAS OF WORK

## Environmental Health

*Includes radon, lead, emergency response, hazardous substances and sites, and Walkable Communities initiatives.*

The environmental health division has continued to provide vital food inspection, air quality, and sanitation services to the community, including over 4,200 inspections for food establishments. The DCHD responded to a warehouse fire in South Omaha that resulted in potential exposures to a variety of chemicals. The DCHD worked with the EPA, CDC, and Nebraska Department of Environment and Energy (NDEE) to assess the impacted areas and inform the public about risks related to potential air, water, or soil exposures. The DCHD's lead prevention program took reports for 208 children with blood lead levels over 3.5ug/dL and contacted families to provide education and mitigation resources. A total of 171 homes were assessed for lead risk in 2022, and 69 homes took part in the Interior Lead Dust Program. The DCHD also worked with the EPA and Omaha Public Schools to collaborate on testing around schools.

## Injury Prevention

*Includes motor vehicle injuries, occupational injuries, senior fall prevention, substance abuse, car seat safety, binge drinking, and distracted driving.*

Douglas County Health Department reports injury prevention activities elsewhere.

## Maternal and Child Health

*Includes Women, Infant, and Children (WIC), family planning, newborn screening, evidence-based home visitation, Early Preventative Screening, Diagnosis, and Treatment (EPSDT).*

The DCHD partners with the Omaha Healthy Start program at Charles Drew Community Health Center. The DCHD provides education regarding a number of issues related to Maternal and Child Health (MCH). The DCHD also is home to the county's Fetal and Infant Mortality Review. This position was vacant for a portion of the past year but is now fully staffed and will collaborate with other partners in the community to determine the most pressing variables that are impacting fetal and infant deaths. This information will help the community to develop more targeted and effective interventions. Additionally, DCHD operates two satellite clinics for Women, Infants, and Children (WIC), a federal nutrition program designed to assist new mothers in feeding their children. In 2022, DCHD served over 14,000 families monthly through WIC services.



# ADDITIONAL ACTIVITIES

Examples of additional public health activities that the Douglas County Health Department performs to assure that the health and wellbeing of Nebraskans are protected and improved.

In 2022, the DCHD took steps to keep their commitment to equity and established the Office of Health Equity. Staffed by a Health Equity Advisor, an Epidemiologist, and a Health Educator, this team works across the health department to identify policies and practices that are not upholding equity either within our walls or in the community. The team also works with area stakeholders and partners to hear about the unmet needs of our most underserved populations, and collaborate to identify solutions to ensure every resident enjoys access to the conditions that enable healthy lives.



Healthy. Vibrant.  
Everyone. Everywhere.

## Lindsay Huse, PhD

Health Director

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# East Central District Health Department

*Serving Boone, Colfax, Nance, and Platte counties*



# 2022 ANNUAL REPORT





# A HEALTHIER YOU IS WITHIN REACH.



## **BUILDING HEALTHY FAMILIES TO LEAD HEALTHIER LIFESTYLES**

According to the 2020 County Health Rankings, over one in three (1/3) adults in the ECDHD area were considered obese (Body Mass Index [BMI] = 30+). Over 80% of men and nearly 70% of women were overweight.

Building Healthy Families (BHF) is an exciting, new, evidence and family-based program in the East Central District. BHF is a nutritional program for families with kids 6 to 12 years of age who have a BMI greater than the 95th percentile. ECDHD is partnering with the Columbus YMCA and University of Nebraska Kearney (UNK) to help families lead healthier and more active lifestyles. The program is made up of 12 weekly sessions filled with fun nutrition activities, goal setting, and physical activities. This program has been implemented in Nebraska and has seen success for both children and their parents. Over the 12 weeks, participating obese children have lost more than 5% of their body mass, and participating adults' weight loss has averaged 14 pounds. The best thing about this program is not just that it is free to participants, but that it is fun. At every weekly session, participants cook healthy foods and incorporate nutrition education in a way that is engaging and easy to adopt. The entire family participates in the weekly physical activity. The physical activity portion is 100% game-based, including fun elementary gym games like kickball. The ECDHD Lifestyle Coordinator helps families set individual goals, providing support and expertise on how to get over barriers they may experience. Throughout the fall of 2021, ECDHD worked closely with key community stakeholders to help recruit families and prepare for the launching of the first cohort in January of 2022.



# ABOUT THIS REPORT

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**Policy Development:** Work with partners to apply data, educate the public, and develop programs and policies—all to address and prevent illness, disease and disability.

## Community Health Assessment (CHA) / Community Health Improvement Plan (CHIP)

Guiding the CHIP process is one of the most critical roles local health departments play in ensuring the health and wellbeing of the community. By understanding what issues community members find important to their own health, residents and key stakeholders guide strategic goals. The ECDHD connects community organizations and members to address health issues (including social determinants of health, chronic diseases, mental health, and environmental health and housing).

**CHIP PRIORITIES:** Platte County’s CHIP priority is assessing current county behavioral health resources. Good mental health is related to physical health and is essential for a person to live a healthy life. In the district, 10% of CHA respondents indicated their mental health was not good on 14 or more of the past 30 days, which is similar to the rate for Nebraska. The youth suicide risk is very high, and mental health providers are scarce. The community recognizes that mental health is important and a public health priority, but fails to know exactly what is and is not available in the community, as well as who is most affected. Platte County is executing a third-party assessment to gain further insight into these questions. From this data, we can execute evidence-based initiatives to address our behavioral health needs/concerns.

# AREAS OF WORK

## Communicable Disease Control and Prevention

*Includes communicable disease epidemiology (disease outbreak management/response), tuberculosis (TB), immunizations, sexually transmitted infections, and surveillance (tracking and following up on reports and provider/school reports).*

At the beginning of 2021, the ECDHD worked countless hours rolling out the initial COVID-19 vaccines, and boosters by the end of the year. After mass vaccine clinics were no longer necessary, the health department worked with local businesses and agencies (such as long term care facilities and factories) to identify underserved populations and set up mobile vaccine clinics.

## Chronic Disease Control and Prevention

*Includes asthma, cancer, cardiovascular disease, diabetes, obesity, tobacco control, and worksite wellness.*

The ECDHD has partnered with the University of Nebraska Medical Center (UNMC) to bring Family Connections, a family-based childhood weight management program that focuses on the Hispanic populations, to Platte and Colfax counties. The program is offered in Spanish and addresses topics in a culturally appropriate way.

The ECDHD also participates in the Platte County Lifestyle Coalition that highlights healthy lifestyles to reduce chronic diseases in the community.

## Access to and Linkage to Clinical Care

*Includes coordination of services between medical providers and providers of health-related social needs, oral health/dental services, and behavioral/mental health.*

According to the Nebraska Behavioral Risk Factor Surveillance System (BRFSS), nearly one in five adults in the ECDHD district between the ages of 18 and 64 years old did **not** have health care coverage.

East Central District Health Department is co-located with a Federally Qualified Health Center (FQHC), Good Neighbor Community Health Center. This partnership facilitates access to care and allows the ECDHD to refer community members to affordable clinical care. The ECDHD and Good Neighbor Community Health Center partner to address health as a whole.



Nearly **1 in 5** adults did **not** have **healthcare coverage**



# AREAS OF WORK

## Environmental Health

*Includes radon, lead, emergency response, hazardous substances and sites, and Walkable Communities initiatives.*

West Nile virus (WNV) is the **leading cause** of **mosquito-borne disease**



West Nile virus (WNV) is the ECDHD's current environmental health focus because of the virus' status as the leading cause of mosquito-borne disease in the continental United States. Currently, one of the ECDHD's project coordinators manages a WNV grant that supports surveillance efforts. Work includes mosquito collection and testing to better understand WNV prevalence in the district. The ECDHD also educates the public on WNV and how to avoid exposure.

## Injury Prevention

*Includes motor vehicle injuries, occupational injuries, senior fall prevention, substance abuse, car seat safety, binge drinking, and distracted driving.*

The ECDHD currently runs a community substance abuse coalition "Community Against Substance Misuse". The coalition focuses on reducing substance use in youth within the ECDHD's four counties, through prevention and education. The ECDHD also has a substance abuse grant that focuses on education about opioid misuse and reducing opioid overdoses.

## Maternal and Child Health

*Includes Women, Infant, and Children (WIC), family planning, newborn screening, evidence-based home visitation, Early Preventative Screening, Diagnosis, and Treatment (EPSDT).*

The ECDHD offers both Women Infants and Children (WIC) and Early Development Network (EDN) programs. Both are dedicated to the health and success of children. The WIC program served just over 1,100 individuals and EDN served 134 families. The ECDHD also provided student health screenings for local schools, conducted lead testing of school and daycare water faucets and drinking fountains, offered vaccines for children, and started implementation of the pediatric weight management programs: Building Healthy Families and Family Connections.



**East Central**  
District Health Department  
*Public Health...It's for everyone.*

## Jessica Hicks

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# Elkhorn Logan Valley Public Health Department

*Serving the Burt, Cuming, Madison, and Stanton counties*



# 2022 ANNUAL REPORT







## COACHING AND NAVIGATING WOMEN TO BETTER HEALTH

Elkhorn Logan Valley Public Health Department (ELVPHD) conducts health coaching services for women between the ages of 40 to 64 in both group and/or individual formats. In an effort to reach new health coaching participants, ELVPHD hosts various group classes. One such group class, which ELVPHD hosted in collaboration with the Nebraska Extension Office, was structured as a three-part nutrition series entitled "Healthy Foods Fast". During this series, participants learned simple techniques to make meals healthier. Each class included hands-on demonstrations using a multi-function cooker and air fryer, as well as recipes to sample. Nine (9) individuals participated in the series.

The ELVPHD also conducted a collaborative impact project to assist women in obtaining a mammogram and/or cervical cancer screening. The ELVPHD conducted this project from March to May of 2022 and promoted the project as "March is for Mammograms" and "May is for Mammograms." The project included navigation to mammography and/or cervical screening as well as a promotional component emphasizing the importance of screening. The target audience for the navigation component was women who received a flu shot during the fall of 2021 and who indicated they were not up to date with mammography and/or cervical screening. After contacting these eligible women, ELVPHD narrowed down the initial list to those who were deemed appropriate for navigation based upon identified barriers such as access to care, fear of the procedure, or limited formal education. Seventeen (17) women were navigated to 24 services (breast, cervical or both).



# ABOUT THIS REPORT

This report includes examples of efforts by this local health department to make the “Good Life” a healthy one in their jurisdiction. The following examples reflect work supported through multiple sources of funding, including monies from the Nebraska Health Care Funding Act (HCFA).

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**Assessment:** Collect and analyze information about health problems in Nebraska communities.



**Assurance:** Promote effective coordination and use of community resources to protect the health and wellbeing of Nebraskans.



**Policy Development:** Work with partners to apply data, educate the public, and develop programs and policies—all to address and prevent illness, disease and disability.

## Community Health Assessment (CHA) / Community Health Improvement Plan (CHIP)

Every three years, ELVPHD and hospital partners in the district—including St. Francis Memorial Hospital and Faith Regional Health Services—conduct a CHA. The most recent survey just concluded. Survey respondents were asked what they thought were the top three health concerns in the district, based on their experience. Preliminary results indicate that the top five concerns are:

- Access to Transportation
- Alcohol, Drugs and Tobacco Use
- Diabetes
- Cancer
- Chronic Lung Disease

**CHIP PRIORITIES:** The CHIP will be initiated later in 2021, following the completion of the assessment activities. Current CHIP priorities include:

- Chronic Disease Control and Sepsis
- Behavioral/Mental Health

These priorities will be reviewed and revised in the next fiscal year.

# AREAS OF WORK

## Communicable Disease Control and Prevention

*Includes communicable disease epidemiology (disease outbreak management/response), tuberculosis (TB), immunizations, sexually transmitted infections, and surveillance (tracking and following up on reports and provider/school reports).*

Nearly **1 in 2** adults 18 and older did not get a flu shot



The ELVPHD Behavioral Risk Factor Surveillance System (BRFSS) data from 2020 indicates that only 46.5% of all adults 18 and older in the ELVPHD health district and 69.9% of adults over age 65 had a flu shot. The ELVPHD administered 2,131 flu vaccines this season, an 11.7% increase from the previous flu vaccine season. This year, 1,364 other vaccines were given, which included 472 private vaccines, 527 in the Vaccines for Children (VFC) program, and 365 vaccines via the Adult Immunizations Program, which provides select vaccines for adults who are uninsured.

## Chronic Disease Control and Prevention

*Includes asthma, cancer, cardiovascular disease, diabetes, obesity, tobacco control, and worksite wellness.*

The rate of **pre-diabetes** in the ELVPHD area is **1.5X higher** than the state



According to 2020 BRFSS data, 11.2% of adults over the age of 18 in the ELVPHD service area have been diagnosed with pre-diabetes compared to 7.5% statewide. The ELVPHD held four Scale Down weight loss programs which is based on the National Diabetes Prevention Program (DPP) evidence-based curriculum. Fifty-three (53) people took part in the program and the participants lost a total of 575.6 lbs., with 47% of participants losing 5% or more of their starting weight.

## Access and Linkage to Clinical Care

*Includes coordination of services between medical providers and providers of health-related social needs, oral health/dental services, and behavioral/mental health.*

The Smile in Style Program provides preventative dental services in local schools and childcare centers. Services include oral health screening, fluoride varnish, dental sealants and oral health education by a Public Health Registered Dental Hygienist. During the 2021-2022 school year, ELVPHD's Smile in Style Program screened 1,719 children in local schools and childcare facilities. Education was provided to 1,926 children. A total of 1,215 dental services (fluoride varnish and/or sealants) were provided.



# AREAS OF WORK

## Environmental Health

*Includes radon, lead, emergency response, hazardous substances and sites, and Walkable Communities initiatives.*

The ELVPHD makes radon test kits available and educates about health risks and mitigation strategies. This reporting period, 236 kits were distributed, and 40.3% were returned. All clients who returned radon test kits were surveyed about their mitigation system plans. A few (8.3%) had already installed a radon mitigation system; half (50%) plan to have a system installed, and 41.6% are unsure if they will install a system. No respondents said that they do not intend to install a system.

## Injury Prevention

*Includes motor vehicle injuries, occupational injuries, senior fall prevention, substance abuse, car seat safety, binge drinking, and distracted driving.*

**1 in 5** adults age 45+ reported **falling** one or more times



According to the 2020 BRFSS, 21.5% of adults age 45+ reported falling one or more times. To address this issue, ELVPHD hosts Tai Chi and Stepping On fall prevention programs.

- Tai Chi: 67% of participants improved Timed Up and Go mobility measures from the series beginning to end.
- Stepping On: Participants indicated they collectively made 13 environmental safety changes (removing rugs, selecting safe footwear and installing bathroom grab bars) from series beginning to end.

## Maternal and Child Health

*Includes Women, Infant, and Children (WIC), family planning, newborn screening, evidence-based home visitation, Early Preventative Screening, Diagnosis, and Treatment (EPSDT).*

The ELVPHD continues to monitor blood lead levels among children in the service area and investigates cases of elevated blood lead levels. The ELVPHD has promoted education to prevent lead poisoning through social media and community outreach events. During this period, six (6) children tested with elevated lead levels (greater than 5 µg/dL). The ELVPHD assists the Nebraska Department of Health and Human Services (NE-DHHS) in coordinating inspections, referrals, and linkages to services for children.

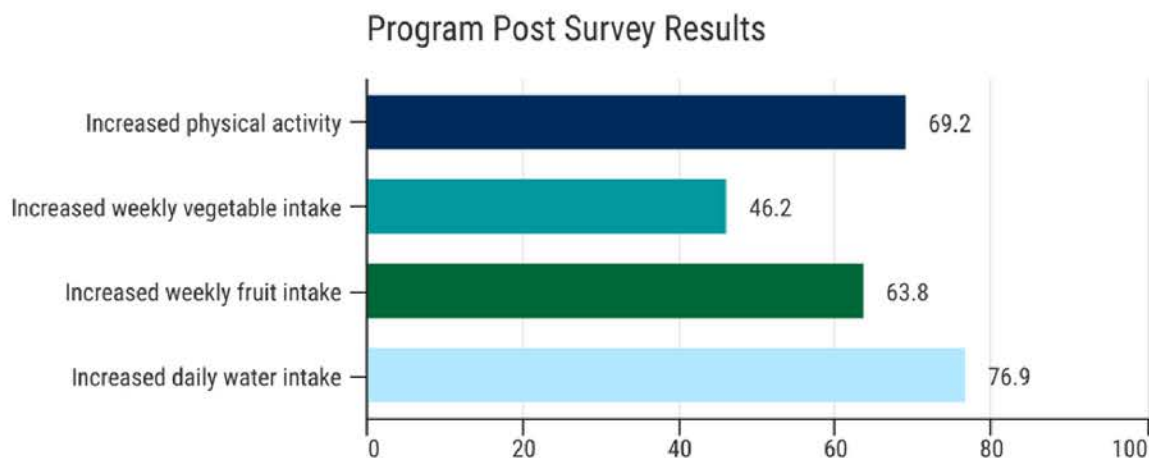
# ADDITIONAL ACTIVITIES

Examples of additional public health activities that Elkhorn Logan Valley Public Health Department performs to assure that the health and wellbeing of Nebraskans are protected and improved.

The ELVPHD held a Shape Up for Summer series weekly during six weeks in May and June 2022. The course included:

- Free biometric screenings for participants (optional).
- Weekly group walks featuring trails around the community.
- Health education provided on those group walks. Topics covered included: physical activity, health eating, and importance of medication management, stress reduction, COVID-19 awareness/education, and continuing healthy lifestyle changes.

Twenty three (23) individuals participated in the program, of which 13 completed the post survey therefore, the data below is based upon those 13 individuals.







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DEPARTMENT



# Four Corners Health Department

*Serving Butler, Polk, Seward, and York counties*



# 2022 ANNUAL REPORT







## A FOUR CORNERS AND YORK MEDICAL CLINIC PARTNERSHIP INNOVATES FOR BETTER HEALTH

Access to and quality of clinical healthcare make up only 20% of the factors affecting a person's health. Other factors significantly influence health, such as health behaviors, social and economic factors, and the physical environment. With this understanding, the Four Corners Health Department (FCHD) and the York Medical Clinic (YMC) have been developing an innovative rural health model. A FCHD public health nurse has been integrated into the care coordination team at YMC. The public health nurse links patients to resources and public health programs in the community, while the YMC team coordinates clinical care.

In the past year, 4,206 patients at the YMC completed a screening survey. Responding patients often have complex situations with multiple issues affecting their health. Over 950 patients indicated needs related to transportation, food, housing, alcohol or drug misuse, and/or mental health. The public health nurse and other FCHD staff refer respondents to community resources. The FCHD and the YMC are charting our progress to help with decisions as we move forward. For example, needs related to mental health led the FCHD to hire a Licensed Independent Mental Health Practitioner to be integrated into the patient flow at the YMC.

Of the 950 patients with needs identified in their screening surveys, 35% have trouble with transportation to their medical appointments. As a result, the FCHD invited city and county officials as well as medical, first responder, and economic development representatives to a transportation workgroup. The group is looking at options to bolster local public transportation services.

This integrative project between the FCHD and the YMC is ongoing, with plans to continue to share outcomes.

# ABOUT THIS REPORT

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Local health departments act as communities’ Chief Health Strategists by assuring that the health and wellbeing of Nebraskans are protected and improved. Local health departments do this by working in each of the Three Core Function Areas of Public Health:



**Assessment:** Collect and analyze information about health problems in Nebraska communities.



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**Policy Development:** Work with partners to apply data, educate the public, and develop programs and policies—all to address and prevent illness, disease and disability.

## Community Health Assessment (CHA) / Community Health Improvement Plan (CHIP)

The Four Corners Health Department (FCHD) monitors rates of disease and other factors that may affect the health of our communities. A CHA survey has been completed and the FCHD is collaborating with area partners to develop a CHIP for the district. The FCHD will review the survey data as well as health-related data from statewide and national sources. The community health survey has shown the following concerns: Mental Health, Cancer, Poverty, Aging Problems, Drug and Alcohol Abuse, Overweight, and Too Much Screen Time. As the FCHD collaborates with partners on these issues, we hope to identify sustainable opportunities for improvement in each of these areas.

### CHIP PRIORITIES:

- Local Public Health System Collaboration
- Healthy Lifestyles (Physical Activity and Nutrition, Cancer, Diabetes, and Heart Disease)
- Behavioral and Mental Health/Substance Abuse
- Motor Vehicle Crashes and Deaths



# AREAS OF WORK

## Communicable Disease Control and Prevention

*Includes communicable disease epidemiology (disease outbreak management/response), tuberculosis (TB), immunizations, sexually transmitted infections, and surveillance (tracking and following up on reports and provider/school reports).*

COVID-19 response continues to be a priority for the FCHD. The health department followed up with over 11,600 cases since the beginning of the pandemic and provided recommendations to schools, businesses, and many other partners. The FCHD serves as a drive-up testing site and has given 9,575 COVID-19 vaccines to members of the community. Other cases of reportable diseases, such as foodborne illnesses, are also investigated when they occur. The FCHD provides necessary recommendations.

## Chronic Disease Control and Prevention

*Includes asthma, cancer, cardiovascular disease, diabetes, obesity, tobacco control, and worksite wellness.*

In the FCHD area, the rate of **heart attack or coronary disease** is **1.5X higher** than the state



In 2020, 7.0% of adults in the FCHD area reported having a heart attack or coronary artery disease, compared to 5.3% for Nebraska. Just over 10% of residents in the FCHD area reported having diabetes, compared to 9.9% for Nebraska. The FCHD offers the Living Well with Chronic Disease and with Diabetes, and the Diabetes Prevention Program (DPP). These classes are evidence-based and equip local participants to better manage their chronic diseases.

## Access to and Linkage to Clinical Care

*Includes coordination of services between medical providers and providers of health-related social needs, oral health/dental services, and behavioral/mental health.*

Every recent health assessment by the FCHD shows mental health concerns are "high priority" for community members. Last year, 47% of the York Medical Clinic (YMC) patients with health-related social needs (according to their screening survey results) reported stress due to a family member's or their own substance abuse or mental health issues. The FCHD has a mental health practitioner and a public health nurse to link patients to community and mental health resources. The FCHD mental health practitioner provided 1,040 counseling sessions in the past year.



**1 in 2** of YMC patients with health-related social needs reported **stress** due to **substance abuse or mental health issues**

# AREAS OF WORK

## Environmental Health

*Includes radon, lead, emergency response, hazardous substances and sites, and Walkable Communities initiatives.*

Household Hazardous Waste Disposal events were held in all four counties to protect groundwater and soil. As a rural area, the FCHD does not have a way to dispose of hazardous materials outside of these special events. The FCHD partnered with the Nebraska Environmental Trust for grant funding and were assisted by community partners to organize and work the events. The events brought in thousands of pounds of paint, pesticides, and chemicals from 390 district households.

## Injury Prevention

*Includes motor vehicle injuries, occupational injuries, senior fall prevention, substance abuse, car seat safety, binge drinking, and distracted driving.*

**3 in 10** traffic fatalities involved **alcohol**

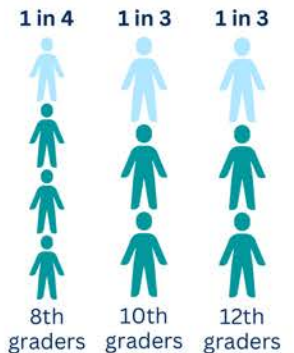


The Nebraska Annual Traffic Study found that there were 10 traffic fatalities in the FCHD area, 30% involved alcohol. The FCHD Drive Smart program focuses on occupant protection; speed awareness; motorcycle, pedestrian, harvest, and bicycle safety; and impaired, distracted and drowsy driving. The program arranges local media campaigns to address these priorities. Additionally, the FCHD's certified child passenger safety technicians teach correct car seat installation and provide about 60 car seats to families in need each year.

## Maternal and Child Health

*Includes Women, Infant, and Children (WIC), family planning, newborn screening, evidence-based home visitation, Early Preventative Screening, Diagnosis, and Treatment (EPSDT).*

In the FCHD area, 25.8% of 8th graders, 34.6% of 10th graders, and 30.7% of 12th graders reported some level of depression in the past 12 months. Many students reported that they considered some form of self-harm and/or attempting suicide. The FCHD is establishing a district-wide coalition and hosting workshops to explore and address the issues identified in these data. The goal is to create more comprehensive and sustainable approaches to supporting youth mental health and preventing suicide.



Proportion of students reporting **depression** in the past 12 months



# ADDITIONAL ACTIVITIES

Examples of additional public health activities that the Four Corners Health Department performs to assure that the health and wellbeing of Nebraskans are protected and improved.

Drug overdoses have dramatically increased over the past decade, with deaths increasing in Nebraska by over 55% between 2018 and 2020.

One in 14 Americans reports experiencing a substance use disorder. No single factor leads to addiction. Some people may use drugs to help cope with stress, trauma, or mental health issues. Some may even develop opioid use disorder after misusing opioids that were initially prescribed by doctors for valid reasons.

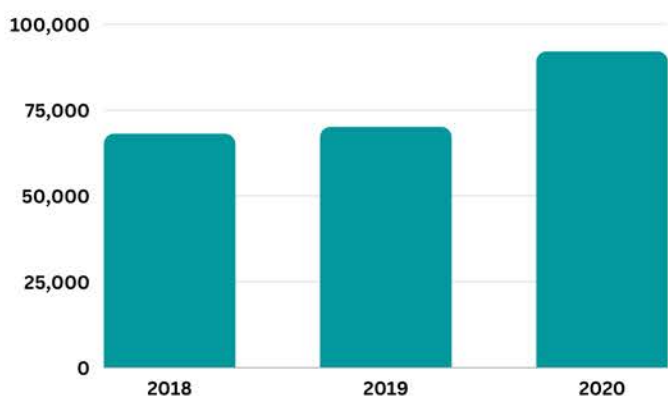
The FCHD has been actively working with community partners to carry out focus groups, listening sessions, and trainings. These strategies aim to provide our communities with a better understanding of the overdose situation, including how to respond to an opioid overdose using Naloxone, support our community members through recovery, and minimize the stigma of addiction.

The FCHD identified three priority areas related to substance use disorder:

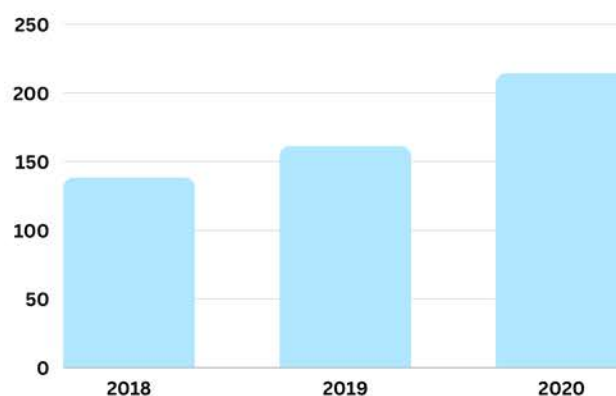
- Education – educating parents and the public on how to identify and respond to an overdose, including training to administer Naloxone nasal spray. Naloxone is a medication designed to rapidly reverse an opioid overdose.
- Treating addiction – addiction is a disease, not a character flaw. How can we best support individuals on their road to recovery and provide community support?
- Mental health and substance abuse/misuse – substance abuse does not discriminate. It impacts all segments of our community.

These priority areas were defined through a focus group with participants from: diversion, colleges, the FCHD, law enforcement, York Women's Prison, as well as mental health professionals. Several of the focus group members have agreed to become a part of an Overdose to Action (OD2A) work group through 2023.

### US Overdose Deaths



### NE Overdose Deaths





## Laura McDougall

Health Director

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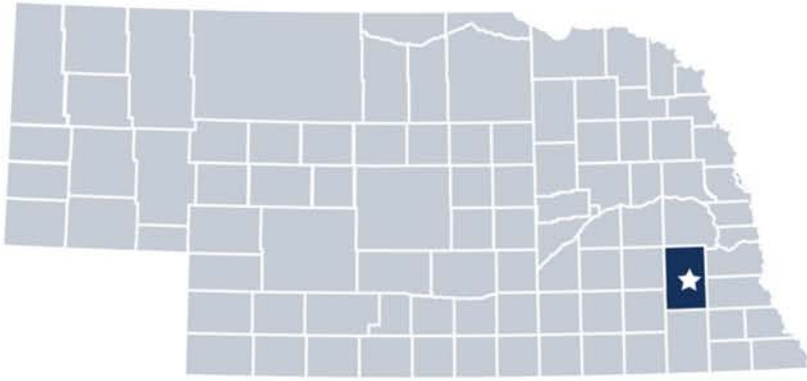
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# Lincoln-Lancaster County Health Department

Serving the City of Lincoln and Lancaster County



# 2022

# ANNUAL REPORT



Photos from the 2022 Community Health Summit





## ENHANCING CHILDREN'S ACCESS TO DENTAL CARE

The Lincoln-Lancaster County Health Department (LLCHD) Dental Health Program works with Lincoln Public Schools (LPS) to screen children who have not seen a dentist in the past year. Early identification, treatment for cavities, oral health education, and regular care are very important for a child's health and wellbeing. Access to routine dental care can be difficult for many families due to barriers including lack of insurance, language, income, and transportation. Local volunteer dentists and LLCHD staff visit each school and do brief screenings for every child who has not seen a dentist in the past year. Information is provided to parents about how to find a dental home. For children with high, unmet needs, the school nurse and LLCHD staff work directly with parents. If other resources are not available, the team can schedule appointments at the health department for dental care.

The program is an important part of the population-based approach for public health. It provides a broad community-wide assessment of access to dental care for children, identifies who has not had dental care, offers assistance to find a dental home, and provides case management and direct services for those who are not able to find care. The annual screening program, follow-up, education, and assistance to establish a dental home, aim to steadily reduce the percentage of students who do not see a dentist annually.

The screening program is very efficient and involves volunteers, LLCHD staff, and LPS school nurses. Between 3,500 and 5,500 children are screened each year. In this past school year, 4,527 children in 44 schools were screened. Of those, 807 children had cavities and needed to see a dentist, and 247 had urgent dental care needs.



# ABOUT THIS REPORT

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## Community Health Assessment (CHA) / Community Health Improvement Plan (CHIP)

On May 19, 2022, the Lincoln-Lancaster County Health Department (LLCHD) hosted the 2022 Community Health Summit to identify the most important health priorities and health barriers in Lancaster County, Nebraska. Earlier, the LLCHD had begun a continuous CHA with expanded local data. Partnering with local cultural centers to administer a community health survey and engaging various groups in community conversations added to the overall CHA process—incorporating the direct voices of new partners and a growing number of individual community members from typically under-represented populations. Qualitative analysis of the community health survey identified perceived health and wellness behaviors and allowed LLCHD to analyze the data geographically. These results led to a Minority Health Summit and then to the Community Health Summit. The Community Health Summit experience was based on quantitative and qualitative results of the CHA using a three-part methodology: epidemiological data from public health surveillance systems, the community health survey, and community conversations with equity groups.

*On the cover - photos from the 2022 Community Health Summit*

### CHIP PRIORITIES:

- **Access to Care** - Maternal Child Health, Preventative Care, Barriers to Care
- **Chronic Disease** - Heart Disease, Unhealthy Lifestyles, Diabetes
- **Behavioral Health** - Youth Health, Access to Behavioral Health Care, Suicide
- **Injury Prevention** - Motor Vehicle Safety, Unintentional Falls, Intentional Violence

# AREAS OF WORK

## Communicable Disease Control and Prevention

*Includes communicable disease epidemiology (disease outbreak management/response), tuberculosis (TB), immunizations, sexually transmitted infections, and surveillance (tracking and following up on reports and provider/school reports).*

The LLCHD routinely assesses communicable diseases in the community. The epidemiologist is part of the LLCHD Epi Team that is activated within 24 hours of a reported disease outbreak. The epidemiologist is essential to this team's work in assessment, follow-up, analysis, and reporting. During this past year, LLCHD epidemiologists analyzed data, identified clusters, and created daily reports on COVID-19 to inform decision-making by the Health Director and the Mayor. An epidemiologist also coordinated staff who make and answer calls about vaccinations.

## Chronic Disease Control and Prevention

*Includes asthma, cancer, cardiovascular disease, diabetes, obesity, tobacco control, and worksite wellness.*

Nearly **3 in 10 adults** do not see a doctor annually



Health literacy includes ensuring that all community members have access to understandable and actionable information about chronic disease management and prevention. The LLCHD's close collaboration with cultural centers and health care providers assures that services are culturally and linguistically appropriate. This priority is reflected in the LLCHD's new Community Health Improvement Plan, including the goal of increasing the number of adults who participate in annual primary care visits by 10%. (Baseline 2020 BRFSS = 71.3% of adults).

## Access to and Linkage to Clinical Care

*Includes coordination of services between medical providers and providers of health-related social needs, oral health/dental services, and behavioral/mental health.*

Poor oral health can affect a child's ability to learn. The LLCHD screens the 22% (4,527) of LPS school children who had not seen a dentist over the past year. LLCHD works closely with the school nurses and families to make referrals or to provide the dental health services needed. The goal is to assist families to establish a dental home and assure that the child sees a dentist at least once a year.



LLCHD screened the **1 out of 4** of LPS school children who had not seen a dentist last year



# AREAS OF WORK

## Environmental Health

*Includes radon, lead, emergency response, hazardous substances and sites, and Walkable Communities initiatives.*

HazMat staff responded to **124 hazardous materials spills**



The work of LLCHD environmental health staff included providing consultation and training to childcare providers on health, safety, and outbreak response to COVID-19. This was critical, as there were over 60 outbreaks of COVID-19, RSV, parainfluenza, and norovirus. Over 1,150 childcare providers were trained in health and safety practices during the last year.

Environmental health HazMat staff responded to 124 hazardous materials spills during the past year to minimize public exposure to hazardous material and manage the cleanup.

## Injury Prevention

*Includes motor vehicle injuries, occupational injuries, senior fall prevention, substance abuse, car seat safety, binge drinking, and distracted driving.*

The LLCHD reviews hospital data, state adult/youth injury data, as well as local police and fire data to assess leading causes of unintentional injury among children and adults. This information, along with Safe Kids coalition partnerships, and CDC/Safe Kids Worldwide inform the LLCHD's use of data-driven strategies. The LLCHD efforts include car seat inspections, drowning prevention and pool retailer education, youth sports injury prevention videos for volunteer coaches and families, smoke alarm and safe disposal videos, and childcare training certification.

## Maternal and Child Health

*Includes Women, Infant, and Children (WIC), family planning, newborn screening, evidence-based home visitation, Early Preventative Screening, Diagnosis, and Treatment (EPSDT).*

The LLCHD epidemiology team and information management team support the health department's evidence-based home visitation program and assure that the automated reporting and dashboards continue to provide quality data. The dashboards provide daily updates on caseloads and status of clients, track assessments and interventions by required time frames, and monitor timeliness. This reporting function creates the monthly report to the state. Goals of the LLCHD Community Health Improvement Plan are to reduce racial, ethnic, economic, and geographic disparities in maternal and child health outcomes and to promote health equity for maternal and child health populations. One measure is monitoring breastfeeding rates, the objective is to increase breastfeeding rates by 5% by 2025. Breastfeeding is a significant indicator for healthy start to life.

# ADDITIONAL ACTIVITIES

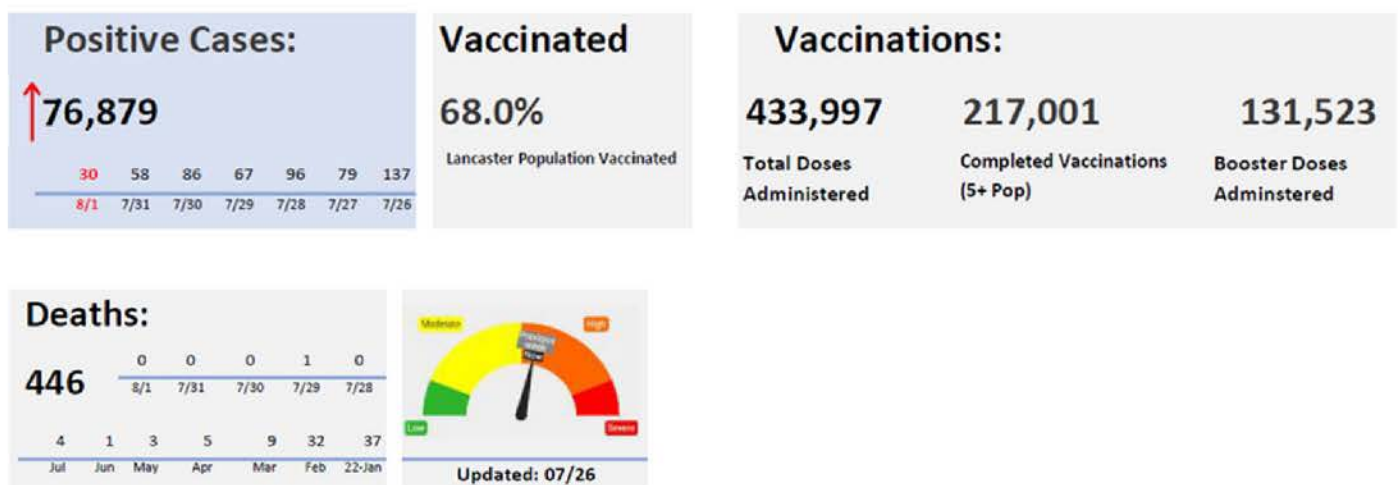
Examples of additional public health activities that Lincoln-Lancaster County Health Department performs to assure that the health and wellbeing of Nebraskans are protected and improved.

## LLCHD's Information Management Infrastructure for Analysis and Reporting

The Lincoln-Lancaster County Health Department's (LLCHD) infrastructure for analysis and reporting includes servers and systems that allow storing and reporting data and ensuring LLCHD staff have the training and tools they need to analyze the data and create reports.

The LLCHD utilizes numerous tools and programs to accommodate different needs for data analysis and reporting to different audiences. Our most common tools include: Logi Analytics, Logi Report and Logi Composer for dashboard creation and web applications, ESRI GIS for geospatial reports and maps, Crystal Reports for on demand reports, letters and applications, SPSS for statistical analysis reporting, and in some cases, Microsoft Access or Excel for simple analysis and reporting. During the past two years, the LLCHD has acquired SAS and Redcap for data analysis and data collection. Each of these tools is used on a daily basis by our epidemiologists, information management staff, and other data experts in the division to display hundreds of reports for both internal and external (public) consumption. Whenever possible, the LLCHD automates processes to minimize time required to get raw data to a final, de-identified report. Given complex, often multi-sourced data, these tools allows staff to do more with the time available, generating easy to understand reports, resulting in informed decision-makers.

## Lancaster County







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*Mission: To protect and promote the public's health*

**Loup Basin  
Public Health Department**

*Serving Blaine, Custer, Garfield, Greeley, Howard,  
Loup, Sherman, Valley, and Wheeler counties*



**2022**

**ANNUAL REPORT**







## WELL @ WORK: IMPROVING CARDIOVASCULAR HEALTH

According to the Centers for Disease Control and Prevention, heart disease is the leading cause of death for men, women, and people of most racial and ethnic groups in the United States. One person dies every 34 seconds in the United States from cardiovascular disease. At a local level, 41% of respondents to the Loup Basin Community Health Assessment survey said that heart disease and stroke are top health problems in the district. In response to these facts about heart disease, Loup Basin Public Health Department (LBPHD) provides the Well @ Work program across the health district. The Well @ Work program offers onsite health screenings to employees of businesses and schools in the LBPHD service area. The LBPHD was able to modify its Well @ Work program in order to continue to provide these services through the pandemic. Through Well @ Work, LBPHD staff gather important health screening data from participants such as total cholesterol, HDL cholesterol, LDL cholesterol, triglycerides, glucose, thyroid stimulating hormone, blood pressure, pulse, height, weight, and body mass index. To help participating residents modify their nutrition and physical activity, the LBPHD staff develop and share personalized education and work with participants to improve their health outcomes. When appropriate, referrals are made to the participant's primary medical provider for further evaluation of health screening findings. The services provided are free to participants.

There were 20 Well @ Work health screening events held at businesses and schools from August 2021 to May 2022. A total of 242 individuals participated, of which 33% had either elevated blood pressure or Stage 1 or Stage 2 hypertension.

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## Community Health Assessment (CHA) / Community Health Improvement Plan (CHIP)

The Loup Basin Community Health Assessment (CHA) is completed every three years as a group effort among public health, health care, schools and education providers, established coalitions, and other key leaders in the community. The most recent CHA was completed in the spring of 2022. This process demonstrates a commitment to assessing the health needs of Blaine, Custer, Garfield, Greeley, Howard, Loup, Sherman, Valley, and Wheeler counties. The results of the CHA are used to develop the Community Health Improvement Plan (CHIP). The CHIP contains priorities, goals, and strategies to improve the health of the district. The LBPHD’s first CHIP priority is to reduce the incidence and progression of heart disease. This round, 41% of CHA respondents identified heart disease and stroke as top health problems in the district. The second CHIP priority is to increase connections to mental health resources. Respondents to the 2022 CHA survey indicated more concern related to mental health problems compared to the 2019 CHA responses.

### CHIP PRIORITIES:

- Reduce the incidence and progression of heart disease
- Increase connections to mental health resources



# AREAS OF WORK

## Communicable Disease Control and Prevention

*Includes communicable disease epidemiology (disease outbreak management/response), tuberculosis (TB), immunizations, sexually transmitted infections, and surveillance (tracking and following up on reports and provider/school reports).*

The LBPHD conducts surveillance, investigation, and follow-up of reportable communicable and other diseases as part of meeting its responsibilities as a local health department. Nebraska utilizes the National Electronic Disease Surveillance System allowing health departments to receive communicable disease reports from a variety of healthcare entities. In addition to COVID-19, the diseases LBPHD followed-up on this year included animal exposures, childhood lead exposures, E. coli, campylobacter, hepatitis C, pertussis, salmonella, and West Nile virus.

## Chronic Disease Control and Prevention

*Includes asthma, cancer, cardiovascular disease, diabetes, obesity, tobacco control, and worksite wellness.*

Drug overdose prevention is one of LBPHD's many chronic disease control and prevention strategies. In coordination with multiple community partners, LBPHD sponsored a speaker on drug overdose awareness and prevention at area schools. LBPHD ran radio spots to raise awareness about the use of Narcan and the dangers of Fentanyl. The health department also completed a districtwide mass mailing as part of the Center for Disease Control and Prevention's (CDC) Rx Awareness campaign that tells real stories of people whose lives were devastated by prescription opioids.

## Access to and Linkage to Clinical Care

*Includes coordination of services between medical providers and providers of health-related social needs, oral health/dental services, and behavioral/mental health.*

According to the CDC, children, ages 5 through 19, from low-income households are twice as likely to have cavities compared to children from higher income households. The health department offers Loup Basin Smiles, an oral health program focused on prevention. The program utilizes a Public Health Authorized dental hygienist to provide oral screenings and fluoride varnish at Head Starts, preschools, and elementary schools throughout LBPHD's district. Loup Basin Smiles reaches over 2,000 students during a regular school year.



Kids from **low-income** households are twice as likely to have **cavities**

# AREAS OF WORK

## Environmental Health

*Includes radon, lead, emergency response, hazardous substances and sites, and Walkable Communities initiatives.*

Whether caused by natural, accidental, or intentional means, environmental public health threats are often present. The LBPHD collaborates with local, state, and national partners to prevent and respond to environmental public health threats. More specifically, the LBPHD participates in the Childhood Lead Poisoning Prevention Program. When a lead exposure is identified during a medical visit or screening, the LBPHD team gives guidance to the family regarding follow-up testing and helps to arrange for an environmental inspection of the home.

## Injury Prevention

*Includes motor vehicle injuries, occupational injuries, senior fall prevention, substance abuse, car seat safety, binge drinking, and distracted driving.*

In the US, **59%** of car seats are **not installed correctly**



While most families put kids in car seats, the latest research from the National Highway Traffic Safety Administration shows 59% of car seats are not installed correctly. The LBPHD employs a public health nurse who is also a certified car seat technician. Car seat technicians know the ins and outs of car seats, installation options, vehicle differences, and harnessing procedures. The LBPHD's technician instructs caregivers through one-on-one learning experiences on installation and inspecting car seats.

## Maternal and Child Health

*Includes Women, Infant, and Children (WIC), family planning, newborn screening, evidence-based home visitation, Early Preventative Screening, Diagnosis, and Treatment (EPSDT).*

The LBPHD protects families in the health district by providing services such as immunizations, health screenings, communicable disease investigations, and car seat safety education and checks. Currently, LBPHD does not receive funding from Nebraska's Maternal and Child Health program. The Nebraska Department of Health and Human Services (NE-DHHS) or other resources in the area address these needs. The LBPHD refers community members to these resources as appropriate. The LBPHD is also in the process of becoming a Nebraska Safe Babies Clinic Champion, which involves promoting prevention messaging for Infant Safe Sleep and Abusive Head Trauma/Shaken Baby Syndrome to decrease infant mortality.



# ADDITIONAL ACTIVITIES

Examples of additional public health activities that the Loup Basin Public Health Department performs to assure that the health and wellbeing of Nebraskans are protected and improved.

The Loup Basin Public Health Department strives to reduce or eliminate cases of vaccine-preventable disease. The health department's immunization program promotes and provides adult and childhood immunizations. In addition to administering vaccines in the office, LBPHD offers immunization services every other month in Broken Bow (Custer County). Health department staff work with local school nurses, to assure compliance with Nebraska Student Immunization Law and across the district.

The LBPHD supports statewide data accuracy by ensuring the area's immunization data is correctly entered into the Nebraska State Immunization Information System. The LBPHD holds a COVID-19 vaccine clinic every Tuesday in the office. The LBPHD continues to go into long term care and assisted living facilities to administer COVID-19 boosters to residents and staff.

The LBPHD participates in the Vaccines for Children (VFC) and Adult Immunization Program. These are federally-funded and state-operated vaccine supply programs. Through these programs, ACIP (Advisory Committee on Immunization Practices) recommended vaccines can be given to eligible persons.





**Loup Basin**  
PUBLIC HEALTH DEPARTMENT

## Amanda Jeffres

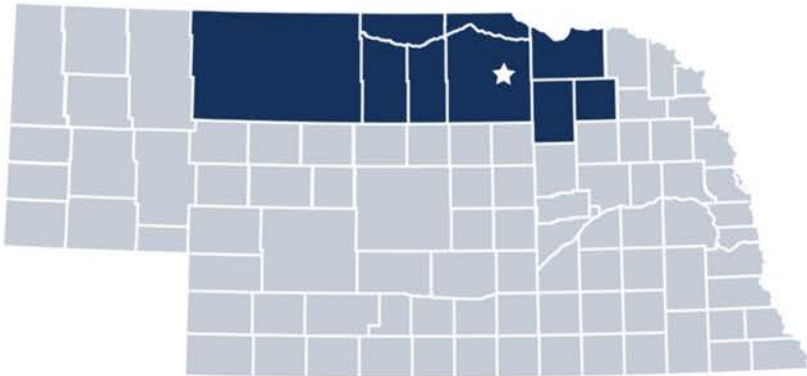
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# North Central District Health Department

Serving Antelope, Boyd, Brown, Cherry, Holt, Keya  
Paha, Knox, Pierce, and Rock counties



# 2022 ANNUAL REPORT





## IMPROVING MENTAL HEALTH THROUGH SPREADING AWARENESS AND EXPANDING TRAINING OPPORTUNITIES

From 2018–2020, there were 21 deaths by suicide in the North Central District Health Department (NCDHD) service area. NCDHD and our partnering agency's goal is to reduce this number by 10% through multiple strategies, including sponsoring seven screenings of Kevin Hines' documentary, *The Ripple Effect*, throughout the district. Kevin shares his story of attempting suicide by jumping off the Golden Gate bridge, a jump that kills nearly every jumper. His story of healing and mental health advocacy is one of hope, perseverance, and encouragement for those with suicidal ideation.

In addition to specific work to address suicide, mental health continues to be a priority for the NCDHD and partners. Several strategies to address mental wellness were incorporated into NCDHD's 2022–2024 Community Health Improvement Plan (CHIP). These include: increasing the number of trainings and trainees for Mental Health First Aid (MHFA), providing MHFA training in each of the nine counties, increasing peer-to-peer mental health training in the schools, and bringing one Board Certified Behavior Analyst to the district to support our school systems.



# ABOUT THIS REPORT

This report includes examples of efforts by this local health department to make the “Good Life” a healthy one in their jurisdiction. The following examples reflect work supported through multiple sources of funding, including monies from the Nebraska Health Care Funding Act (HCFA).

Local health departments act as communities’ Chief Health Strategists by assuring that the health and wellbeing of Nebraskans are protected and improved. Local health departments do this by working in each of the Three Core Function Areas of Public Health:



**Assessment:** Collect and analyze information about health problems in Nebraska communities.



**Assurance:** Promote effective coordination and use of community resources to protect the health and wellbeing of Nebraskans.



**Policy Development:** Work with partners to apply data, educate the public, and develop programs and policies—all to address and prevent illness, disease and disability.

## Community Health Assessment (CHA) / Community Health Improvement Plan (CHIP)

The NCDHD and area partners commenced the Community Health Assessment (CHA) process in October of 2021. Data were gathered through digital survey distribution, focus groups, and voluntary survey completion at health fairs and vaccine clinics. External evaluators were hired to analyze primary and secondary data sources to provide a clear picture of the health of NCDHD residents. The CHA results showed that between 2018-2022, heart disease was one of the leading causes of death: 392 NCDHD residents died due to heart disease. Additionally, 58.7% reported mental health as a top concern. Based on these results, and responses from surveys and focus groups, NCDHD and CHIP Partners selected Cardiovascular Health and Mental Health as the 2022-2024 CHIP Priorities.

### CHIP PRIORITIES:

- Cardiovascular Health
- Mental Health

# AREAS OF WORK

## Communicable Disease Control and Prevention

*Includes communicable disease epidemiology (disease outbreak management/response), tuberculosis (TB), immunizations, sexually transmitted infections, and surveillance (tracking and following up on reports and provider/school reports).*

The NCDHD surveillance efforts identify, investigate, and monitor each incidence of reportable communicable disease. Timely recognition of these diseases enables prevention and control activities, which helps NCDHD contain these diseases.

In 2021, the NCDHD implemented changes including the addition of vaccines, treatment therapies, and continued mitigation tools to combat COVID-19. NCDHD experienced a COVID-19 case uptick in the spring of 2021 and a significant surge in the fall of 2021.

## Chronic Disease Control and Prevention

*Includes asthma, cancer, cardiovascular disease, diabetes, obesity, tobacco control, and worksite wellness.*

NCDHD partners with health care entities in the nine-county area to ensure access to Chronic Disease Prevention measures.

## Access to and Linkage to Clinical Care

*Includes coordination of services between medical providers and providers of health-related social needs, oral health/dental services, and behavioral/mental health.*

The NCDHD works to improve access to health services in the area, including by hosting mobile vaccination clinics. NCDHD has provided this service on a monthly or a bimonthly basis to eight (8) communities. The clinics offer COVID-19, seasonal flu, shingles, pneumonia and Tdap (tetanus, diphtheria, and pertussis) vaccinations. In addition, the NCDHD staff traveled to 18 other locations during flu shot season to provide these services and support local clinics' and hospitals' vaccination efforts.



# AREAS OF WORK

## Environmental Health

*Includes radon, lead, emergency response, hazardous substances and sites, and Walkable Communities initiatives.*

The NCDHD informs the public and pesticide applicators about tick and mosquito-borne illnesses, including West Nile virus (WNV), via our newsletter and our data dashboard.

Since September 2021, NCDHD has been involved in a project that tests school and daycare faucets for lead. So far, 15/57 schools and 17/116 daycares have submitted samples for testing.

NCDHD educates about the risk of radon gas and provides radon testing kits for \$10/kit. When testing shows elevated radon levels, NCDHD provides a Do-it-Yourself Mitigation Guide and a list of licensed radon mitigators.

## Injury Prevention

*Includes motor vehicle injuries, occupational injuries, senior fall prevention, substance abuse, car seat safety, binge drinking, and distracted driving.*

The NCDHD is currently partnering with health care entities in our nine counties to ensure access to injury prevention measures.

## Maternal and Child Health

*Includes Women, Infant, and Children (WIC), family planning, newborn screening, evidence-based home visitation, Early Preventative Screening, Diagnosis, and Treatment (EPSDT).*

Miles of Smiles (MOS) is a school-based oral screening and fluoride varnish program available to preschool, elementary, and middle school-age students (20% Medicaid clientele) within the nine-county health district. MOS conducts oral screenings and applies fluoride varnish. In 2021, 118 of the children seen needed immediate referrals to a dentist. Six sealant programs were held in six different schools and 347 sealants were placed for the year. The program was able to return to all schools in both semesters of the school year, despite COVID-19 challenges.

# ADDITIONAL ACTIVITIES

Examples of additional public health activities that North Central District Health Department performs to assure that the health and wellbeing of Nebraskans are protected and improved.

The North Central District Health Department (NCDHD) achieved accreditation from the Public Health Accreditation Board (PHAB) in the Spring of 2022. PHAB is the nonprofit organization that administers the national accreditation program. This program aims to advance and transform public health practice by championing performance improvement, strong infrastructure, and innovation. Accreditation through PHAB demonstrates the NCDHD's commitment to excellence in serving the communities of north central Nebraska.





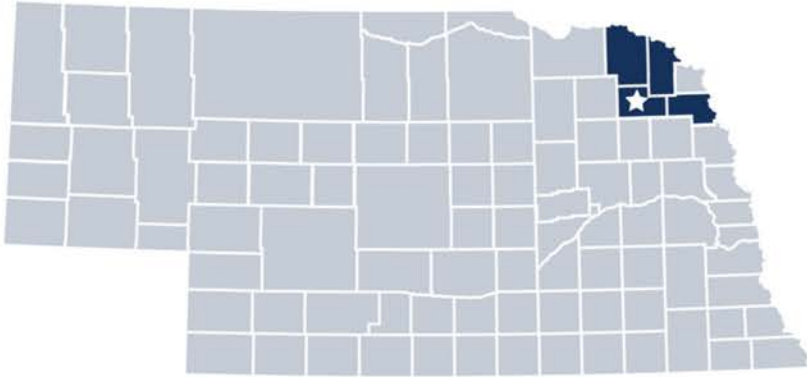
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**Northeast Nebraska  
Public Health Department**

*Serving Cedar, Dixon, Thurston, and Wayne counties*



# 2022 ANNUAL REPORT







## WORKING TOGETHER TO CREATE A HEALTHIER COMMUNITY

Partnerships and collaboration are key when addressing complicated health problems. The Northeast Nebraska Rural Health Network (NNRHN) began in 2017 when five healthcare entities came together to complete a Community Health Assessment (CHA) and a Community Health Improvement Plan (CHIP). The Northeast Nebraska Public Health Department (NNPHD) is the collaborative lead of this Network, which includes Providence Medical Center (PMC), Pender Community Hospital (PCH), Winnebago Tribal Health Department, and the University of Nebraska Medical Center (UNMC), including the Colleges of Nursing and Public Health. The NNRHN was formed with the vision of “Working together we create a healthier community.” The group developed a plan to take on obesity as the first priority. However, the timing for this coincided with the COVID-19 pandemic when all partners needed to turn their attention to the pandemic response. The commitment to collaborative work became very evident during the pandemic response efforts, which required continuous communications between the NNRHN partners, additional partners, and from the communities being served. Strengthening, supporting, and mobilizing communities and partnerships is one of the essential services of public health. No one entity has the key to or the resources for addressing the complex health problems that our nation faces today. The NNRHN partners agreed to come together to maximize and leverage new resources to collaboratively address the complex health issues of communities in the Northeast Nebraska Public Health Department area.

Two new formal healthcare partners were added in 2022, the regional Federally Qualified Health Center (FQHC) in Norfolk, Midtown Health Center, and one of the larger providers of primary care services in the area, Faith Regional Physician’s Services – Wayne Clinics. Once the NNRHN members were able to focus again on areas of need other than the pandemic response, they also hired a Network Director employed by the NNPHD, the fiscal agent for the Network.



# ABOUT THIS REPORT

This report includes examples of efforts by this local health department to make the “Good Life” a healthy one in their jurisdiction. The following examples reflect work supported through multiple sources of funding, including monies from the Nebraska Health Care Funding Act (HCFA).

Local health departments act as communities’ Chief Health Strategists by assuring that the health and wellbeing of Nebraskans are protected and improved. Local health departments do this by working in each of the Three Core Function Areas of Public Health:



**Assessment:** Collect and analyze information about health problems in Nebraska communities.



**Assurance:** Promote effective coordination and use of community resources to protect the health and wellbeing of Nebraskans.



**Policy Development:** Work with partners to apply data, educate the public, and develop programs and policies—all to address and prevent illness, disease and disability.

## Community Health Assessment (CHA) / Community Health Improvement Plan (CHIP)

The NNPHD leveraged the work of the Nebraska Rural Health Network (NNRHN) to accomplish the CHA and CHIP process in 2021 and 2022. In all, 29 different entities joined NNRHN partners in the process. These included: economic development, housing, a large agri-business employer, county officials from each of the four counties in the NNPHD area, city officials from three larger communities, and two additional Native American tribes. Two community health workers (CHWs) assisted with community surveys which increased the input from the growing number of Spanish-speaking community members. The CHIP priorities coming into 2021 were obesity and mental health. New CHIP priorities identified by the NNRHN and partners in 2022 for the next three-year planning cycle include, Health Behaviors and Education, Social Determinants of Health, Resources, Mental Health, and Chronic Disease. The next steps for all of these partners is to plan how to collaboratively address these issues.

### CURRENT CHIP PRIORITIES:

- Mental Health
- Health Promotion



# AREAS OF WORK

## Communicable Disease Control and Prevention

*Includes communicable disease epidemiology (disease outbreak management/response), tuberculosis (TB), immunizations, sexually transmitted infections, and surveillance (tracking and following up on reports and provider/school reports).*

Approximately **2 out of 3** emerging infectious diseases globally are transmitted between **animals and people**



Over the last year, the NNPHD responded to sustained COVID-19 transmission through case surveillance, data reporting, immunizations, improved access to testing and treatment, and ongoing education for staff, partners, and the public. Other infectious disease responses included avian influenza and planning for the monkeypox virus. In the fall of 2021, NNPHD worked with the state DHHS to initiate health alerts to medical providers in response to the very first endemic Lyme disease case in Nebraska after ticks carrying the disease organism were discovered in the area.

## Chronic Disease Control and Prevention

*Includes asthma, cancer, cardiovascular disease, diabetes, obesity, tobacco control, and worksite wellness.*

**Over 1 in 3** adults living in the district are considered **obese**



Obesity was identified as one of the two priority areas during the 2018-2019 CHIP planning. A total of 35.7% of adults living in the NNPHD district are considered obese (NNRHN 2022 CHNA). The NNPHD implemented Building Healthy Families (BHF), an evidence-based program focused on working with families to make healthy lifestyle changes that will develop into life-long healthy behaviors. Participating families met weekly for 12 weeks to learn new ways to eat healthier and make physical activity fun. Participants averaged a total family weight loss of 8.92 pounds. Participating families reported quitting soda pop in their home, gaining confidence, and that children were more active without being prompted.

## Access and Linkage to Clinical Care

*Includes coordination of services between medical providers and providers of health-related social needs, oral health/dental services, and behavioral/mental health.*

To maximize available resources and support families' healthy living, the NNPHD collaborates with the Wayne Association of Congregations and Ministers, Wayne Community Chest, and the Norfolk Family Coalition to provide linkages to needed health and human services for residents of Wayne and the surrounding area. The areas of largest need in 2021 were for rent and utility assistance. In 2021, the NNPHD staff made 125 total visits with families and provided services to 26 households (67 people) in the Wayne area through this Community Response program.



**80%** of what influences health and wellbeing occurs in **homes, workplaces, schools, and communities**

# AREAS OF WORK

## Environmental Health

*Includes radon, lead, emergency response, hazardous substances and sites, and Walkable Communities initiatives.*

**Radon** is the **2nd** leading cause of **lung cancer** in the U.S.



Because the entire NNPHD area has a predicted average indoor radon level above the accepted safe level, test kits are offered to residents. The NNPHD does West Nile virus (WNV) mosquito surveillance and monitors and investigates human WNV cases. The NNPHD works with UNL Extension to make these services available throughout the health district. The NNPHD offers public information on mold identification and remediation in homes as well as free well water test kits. Human elevated blood lead testing is a reportable condition and is monitored by the NNPHD. The NNPHD follows up to ensure further health care and environmental testing are completed.

## Injury Prevention

*Includes motor vehicle injuries, occupational injuries, senior fall prevention, substance abuse, car seat safety, binge drinking, and distracted driving.*

This work was halted due to the COVID-19 pandemic response and will be resumed soon.

## Maternal and Child Health

*Includes Women, Infant, and Children (WIC), family planning, newborn screening, evidence-based home visitation, Early Preventative Screening, Diagnosis, and Treatment (EPSDT).*

According to a MMWR 2016 Report, tooth decay is one of the most common chronic diseases of childhood. If left untreated, tooth decay can have serious consequences including problems with eating, speaking, and learning.

The NNPHD restarted the Creating New Smiles oral health program services in partnership with area schools, daycare centers, and long-term care facilities. The program provided free, preventive oral health care and education to 164 long-term care facility residents and 794 children. Of those served, 65 (7%) had immediate oral health need and were assisted with ongoing dental care. Oral health services are provided by a Public Health Registered Dental Hygienist, assisted by a community health worker (CHW).



# ADDITIONAL ACTIVITIES

Examples of additional public health activities that the Northeast Nebraska Public Health Department performs to assure that the health and wellbeing of Nebraskans are protected and improved.

Through a Nebraska Department of Education grant, the NNPHD worked with five local schools to provide resources, technical assistance, and guidance to advance school wellness policies that also supported CDC pandemic recommendations to schools. Region 4 Behavioral Health Services funding awarded to the NNPHD was used to send 20 students and four sponsors to the Human Performance Project workshop at the University of Nebraska–Lincoln (UNL) in May 2022. This training provides education to guide youth on healthy goal setting. Participants came back with plans to offer the training to many more junior and senior high students in northeast Nebraska in Fall 2022.

Overdose prevention work is being planned for northeast Nebraska, partners leading the work include the NNPHD, the Winnebago Public Health Department, and the Carl T Curtis Health Education Center.

A community taskforce representative of the local Latino community and the Health Equity Advisory Council began in Spring 2022, both are partnership efforts to examine and plan how to address local health equity needs.

As highlighted throughout this report, partnerships are critical to improving the health of our communities. This held true throughout the COVID-19 response which continued throughout this fiscal year. Response efforts continued to be coordinated by the NNPHD but could not have been accomplished without the partnerships that have formed over the years. Response activities included regular meetings and communications, immunizations, testing, treatment, case identification, quarantine and isolation, personal protective equipment (PPE) management and distribution, data management and distribution to the public, and ongoing education. As we continue to figure out how to live with the virus, partnerships will help to determine needed changes to the local public health emergency response to be better prepared for the next pandemic.



*Public COVID-19 vaccine clinic made possible through collaboration with local city government, county government, Nebraska National Guard, private citizen volunteers and NNPHD.*





## Julie Rother

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*NNPHD staff are taking time to celebrate their Super Powers that helped them get through the pandemic response.*



# Panhandle Public Health District

*Serving Banner, Box Butte, Cheyenne, Dawes, Deuel, Garden,  
Grant, Kimball, Morrill, Scotts Bluff, Sheridan, and Sioux counties*



# 2022 ANNUAL REPORT



*The PPHD's dental hygienist providing screening, fluoride and sealants for students at schools in the Panhandle.*





*Shown here are some of the Platte Valley Company employees who participated in Walk at Lunch Day.*

## **WORKSITE WELLNESS PARTNERSHIPS IMPROVE HEALTH**

Panhandle Worksite Wellness Council (PWWC) is part of Panhandle Public Health District. The council has been building services for area businesses, schools, and hospitals for over 14 years. The council serves as an excellent conduit for public health information and resources and proved incredibly beneficial during the district's COVID-19 response.

Annually, the council issues a survey to area businesses to evaluate and monitor area needs and opportunities. The business, school, or hospital receives a customized scorecard to help identify areas of opportunity. The scorecard initially focused on physical wellbeing in terms of healthy eating, active living, and tobacco cessation. It now also includes mental health, substance misuse, and driving behaviors. The follow-up recommends evidence-based strategies, resources, and support along the prevention continuum to include policy, environment, programming, education, and awareness.

Of the 76 businesses surveyed since 2011:

- 38% have policies allowing flextime for employees to participate in physical activity during work hours, an increase from 19% in 2011.
- 36% have on-site exercise facilities, such as a workout room or basketball court, that are open to employees during working hours, an increase from 13% in 2011.
- 73% have policies that require employees to wear seatbelts while driving a car or operating a moving vehicle while on company business, an increase from 56% in 2011.
- 71% have a policy that prohibits smoking in outdoor work areas, an increase from 50% in 2011.
- 60% have adopted a policy that restricts smoking within a certain distance from the entrance of the building, an increase from 25% in 2011.

The Council offers monthly promotions, public communications, newsletters, quarterly wellness chats, health risk appraisals and interest surveys, mental health toolkits, and consultations. For a minimal fee, the Council also provides on-site health screenings, an annual Safety & Wellness Conference, and wellness challenges.



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**Policy Development:** Work with partners to apply data, educate the public, and develop programs and policies—all to address and prevent illness, disease and disability.

## Community Health Assessment (CHA) / Community Health Improvement Plan (CHIP)

In the past year, the Panhandle Public Health District (PPHD) hosted quarterly workgroup and steering committee meetings to collect data and share ideas on how to make the Panhandle healthier for all residents. Health indicators for 2021 were collected and presented in the annual report on the PPHD website. The PPHD also used the Mobilizing for Action through Planning and Partnerships (MAPP) process to analyze health data for different racial groups in the Panhandle.

**CHIP PRIORITIES:** The PPHD collects population health data. These include chronic disease numbers such as cancer, smoking, and hypertension rates. The PPHD uses these data to monitor overall health outcomes in the region. For the past two CHIP cycles, mental health, housing, and early childcare have been priorities of the regional efforts to improve outcomes. Breast cancer screening rates are another health indicator of interest in the recent CHIP process. A decrease in breast cancer screening rates was observed in 2018, which initiated a Quality Improvement (QI) project. According to 2020 Behavioral Risk Factor Surveillance System (BRFSS) data, screening rates have increased by four percent (4%), and PPHD anticipates further increases in the 2022 data.

# AREAS OF WORK

## Communicable Disease Control and Prevention

*Includes communicable disease epidemiology (disease outbreak management/response), tuberculosis (TB), immunizations, sexually transmitted infections, and surveillance (tracking and following up on reports and provider/school reports).*

PPHD had **338** confirmed cases or reportable diseases other than COVID-19



The PPHD's disease surveillance team works to protect the health of Nebraskans in the district by performing public health surveillance, responding to disease outbreaks, and preventing and controlling the spread of disease. The PPHD partners with hospitals, long term care facilities, and other healthcare entities to educate, coordinate testing, and respond to public health concerns. In 2021, the health district had 338 confirmed, probable, and suspected cases diseases other than COVID-19.

## Chronic Disease Control and Prevention

*Includes asthma, cancer, cardiovascular disease, diabetes, obesity, tobacco control, and worksite wellness.*

**1 in 3 adults** has a chronic health condition



One in three adults has a chronic health condition, and one in two deaths is caused by complications resulting from ongoing health conditions. The PPHD offers Living Well and National Diabetes Prevention Programs (DPP) to residents in rural communities who are working to manage chronic disease and improve their quality of life. The PPHD provides programs, training of trainers, and ongoing technical assistance for data collection, referral strategies and/or policies.

## Access to and Linkage to Clinical Care

*Includes coordination of services between medical providers and providers of health-related social needs, oral health/dental services, and behavioral/mental health.*

To increase access and linkages to clinical care, the PPHD conducted a Quality Improvement (QI) process with Region 1 Behavioral Health Authority and their providers. The yearlong QI process identified the referral process as a key challenge and focused efforts on developing a region-wide referral form. The region-wide form simplified referrals and established a shared understanding of what is needed for a referral, so clients receive care in the most efficient and quickest way possible.



# AREAS OF WORK

## Environmental Health

*Includes radon, lead, emergency response, hazardous substances and sites, and Walkable Communities initiatives.*

Nearly 4 in 5 homes in the district were built prior to 1979



In 2015, Scotts Bluff County was the county in the PPHD's 12-county district with the highest number of children, over six years old, who had elevated blood lead levels (greater than 5 mcg/dL).

Additionally, 77% of homes in the county were built prior to 1979. This prompted the PPHD to invest in supporting three staff to become licensed Lead Abatement Risk Assessors. Today, these staff perform risk assessments and elevated blood lead level investigations in homes where children with elevated blood levels live.

## Injury Prevention

*Includes motor vehicle injuries, occupational injuries, senior fall prevention, substance abuse, car seat safety, binge drinking, and distracted driving.*

Seven PPHD communities have active living plans in place. Alliance's bike share program allows residents to use bikes at no charge. Crosswalk beautification resolutions in Alliance, Gordon, Rushville, Kimball, and Bridgeport introduce traffic-calming mechanisms and raise awareness about pedestrian safety. An updated city ordinance in Gordon reduces the speed limit during school hours in the elementary school zone. Improvements include LED-flashing pedestrian signs, extended walking and biking trails, and accessible pedestrian signals at crosswalks.

## Maternal and Child Health

*Includes Women, Infant, and Children (WIC), family planning, newborn screening, evidence-based home visitation, Early Preventative Screening, Diagnosis, and Treatment (EPSDT).*

The PPHD is providing home visiting services to families in the district, utilizing the Healthy Families America (HFA) model. The PPHD's interactions with families are relationship-based and designed to strengthen parent-child relationships, promote healthy child development, and enhance family wellbeing. The PPHD is currently serving 70 families of many different cultures. While HFA is open to all, 68% of families served in 2022 were assessed as high-risk. National data show that HFA improves child safety and prevents maltreatment by 33%.



Nearly 7 in 10 families served through HFA were high risk

# ADDITIONAL ACTIVITIES

Examples of additional public health activities that the Panhandle Public Health Department performs to assure that the health and wellbeing of Nebraskans are protected and improved.

## Oral Health

Panhandle Public Health District residents are at high-risk for dental decay. Out of our 12 counties, eight are state-designated shortage areas for general dentistry. Other barriers such as travelling significant distances to see a dental provider, finding a provider that will take new Medicaid patients, and the affordability of dental care can make it difficult for families to create dental homes for their children. Through Keeping Teeth Strong, elementary students are all offered basic dental preventive services at school. The program helps to fill the gap in access to care by providing dental screenings, fluoride treatment and sealants to children in schools and Head Start Programs.



**8 out of 12**  
PPHD counties are  
**dentistry shortage** areas

## Suicide Prevention

The Panhandle area has a higher youth suicide rate than Nebraska as a whole and tends to have a higher per capita suicide rate than surrounding states.

The PPHD partners with organizations across the district to provide Question, Persuade, Refer (QPR), a proven suicide prevention training which helps participants recognize the warning signs and risk factors for suicide. Over the past year, the PPHD has facilitated 15 trainings to 136 participants.

The PPHD assists schools in supporting the implementation of Hope Squads, a peer-to-peer suicide prevention program. The program reduces youth suicide through education, training, and peer intervention. Approximately 30% of Panhandle high schools and the local community college have implemented Hope Squads.





# Panhandle

Public Health District

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# Public Health Solutions District Health Department

*Serving Fillmore, Gage, Jefferson, Saline, and Thayer  
counties*



# 2022

# ANNUAL REPORT







## ADVANCING HEALTH EQUITY, DIVERSITY & INCLUSION

In October 2021, Public Health Solutions (PHS) hired the first Health Equity, Diversity, and Inclusion Coordinator in the department's history. Since that time, the department has embarked on a journey of self-discovery, learning, and awareness. Using several funding sources, PHS conducted a minority health needs assessment in spring 2022. This survey was completed with over 500 individuals, the majority being in-person interviews with the PHS Health Equity Activation Team (HEAT), a group of passionate bilingual community partners, willing to knock on doors and attend church services and soccer games, to solicit input from individuals. Public Health Solutions sponsored the 1st Annual PHS Multicultural Day in January 2022. The day included intensive training for the PHS staff and community partners, magnificent foods from various regions throughout the world, and displays of cultural items from the home countries of our community members. The highlight of Multicultural Day was a panel of community members from various races, ethnicities, and cultural backgrounds. The PHS staff members, Board of Health members, and community partners heard stories of immigration, loss, struggle, triumph, and the resiliency of the human spirit.

Currently, PHS is developing a Language Access Plan and developing an interpreter training for those serving as interpreters in the PHS district. A Health Equity Community Committee has formed and will direct the work of developing a Minority Health Improvement Plan. The PHS Health Equity program aims to increase the diversity of the PHS workforce and leadership, enhance cultural and linguistic competency, improve quality of care, accelerate and expand efforts to eliminate disparities, and utilize the role of Chief Health Strategist to provide leadership in the community in the areas of health equity, diversity, and inclusion.

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**Policy Development:** Work with partners to apply data, educate the public, and develop programs and policies—all to address and prevent illness, disease and disability.

## Community Health Assessment (CHA) / Community Health Improvement Plan (CHIP)

Public Health Solutions is preparing for the upcoming CHA and CHIP in 2023. The Partners for a Healthy Community group, a district steering committee, is beginning the work of reviewing relevant data and health indicators for the district, while ensuring the group is representative of the demographics of the PHS district. Community members, partners, and leaders come together across the district to form this important group and lead CHA and CHIP efforts.

### CHIP PRIORITIES:

- Mental/Emotional Health
- Chronic Disease Prevention
- Environmental Health & Safety
- Access to Resources and Opportunities (Health Equity)



# AREAS OF WORK

## Communicable Disease Control and Prevention

*Includes communicable disease epidemiology (disease outbreak management/response), tuberculosis (TB), immunizations, sexually transmitted infections, and surveillance (tracking and following up on reports and provider/school reports).*

Public Health Solutions provides 24/7 monitoring of communicable disease reports from the district. When a report is received, a trained surveillance coordinator takes appropriate steps depending on the type of communicable disease reported. This response may include obtaining medical records, interviewing the patient for further info, piecing together info from various sources to track potential foodborne illnesses, and working with organizations and facilities to support prevention or remediation of disease outbreaks. During the pandemic, PHS employed 2.5 FTE surveillance staff to handle the load of reports being received daily. During regular (non-pandemic) periods, PHS employs one full-time Surveillance Coordinator with support from other staff members as needed to provide constant surveillance.

## Chronic Disease Control and Prevention

*Includes asthma, cancer, cardiovascular disease, diabetes, obesity, tobacco control, and worksite wellness.*

The Health Community Alliance (HCA) Clinic is a collaboration between PHS, Saline Medical Specialties, and other area providers. The HCA provides free case management and health maintenance services to uninsured adults with chronic illnesses. Patients sign a contract agreeing to follow the chronic disease management recommendations of their healthcare provider. A total of 15 patients received services at clinics held over the past year: nine had hypertension, two had pre-diabetes, two had Type 2 diabetes, six were managing obesity and related issues, one had chronic depression, and three had hypothyroidism.

## Access to and Linkage to Clinical Care

*Includes coordination of services between medical providers and providers of health-related social needs, oral health/dental services, and behavioral/mental health.*

The PHS dental program grew by leaps and bounds over the past year. On-site screenings served 365 young children in Head Start and Early Head Start programs. Public Health Solutions identified untreated tooth decay in 19.45% of children screened. A total of 268 fluoride varnishes were applied and 207 patients received dental sealants. The program has expanded to offer a clinic at the health department for children and adults, and a through partnership with UNMC, enabled PHS to offer teledentistry to the community as well.



1 in 5 kids  
screened had  
untreated tooth  
decay

# AREAS OF WORK

## Environmental Health

*Includes radon, lead, emergency response, hazardous substances and sites, and Walkable Communities initiatives.*

The entire PHS area has a predicted average **indoor radon level above the accepted safe level**



Public Health Solutions focuses efforts to help provide clean water, soil, and air quality for district residents. Among these efforts is the radon awareness and testing program. The entire PHS area has a predicted average indoor radon level above the accepted safe level. The health department provides free radon testing kits to all district residents, provides follow-up counseling to explain results of the radon testing, and provider referral to radon mitigation services. Public Health Solutions distributed 105 radon kits last year.

## Injury Prevention

*Includes motor vehicle injuries, occupational injuries, senior fall prevention, substance abuse, car seat safety, binge drinking, and distracted driving.*

Public Health Solutions currently provides a Tai Chi - Moving for Better Balance classes in all five counties. The classes have been popular with older adults and the social benefits have been just as important as the improved balance reported by participants. Public Health Solutions is incorporating overall wellness components within the Tai Chi - Moving for a Healthy Balance classes, which will include mental health and stress reduction techniques such as meditation.

## Maternal and Child Health

*Includes Women, Infant, and Children (WIC), family planning, newborn screening, evidence-based home visitation, Early Preventative Screening, Diagnosis, and Treatment (EPSDT).*

Public Health Solutions offered eight Circle of Security-Parenting (COS-P) classes virtually and in-person throughout the district, in English and Spanish. The 8-week COS-P builds parents' and caregivers' skills to strengthen their parent-child relationship. Last year, PHS provided Parent-Child Interactive Therapy (PCIT) to 10 families with young children experiencing behavioral or emotional difficulties. A licensed and specially trained therapist works with parents to build their skills. Public Health Solutions offers PCIT in Gage and Jefferson counties with an expansion planned for Fillmore County. The PHS's Healthy Families program provided 667 home visits to 55 families, promoting positive parent-child interactions and family wellbeing.



# ADDITIONAL ACTIVITIES

Examples of additional public health activities that the Public Health Solutions District Health Department performs to assure that the health and wellbeing of Nebraskans are protected and improved.

Additional work in mental and behavioral health included developing the Blue River LOSS (Local Outreach for Survivors of Suicide) Team in Jefferson and Gage counties, with expansion to Fillmore and Saline counties. PHS offered QPR (Question, Persuade, Refer) training to community members to help identify and interrupt a suicidal episode. PHS also provided Narcan training for overdose recovery and sent a PHS team to the Zero Suicide Academy. The Zero Suicide program helps teams identify ways to improve care and safety for individuals at risk for suicidal behavior.

The PHS immunization program served over 6,000 children for regular childhood immunizations and over 1,000 adults. There were 30,890 individuals receiving at least one COVID-19 vaccine in the district. The SKIP flu program (flu shots in the school setting) provided clinics at 22 schools last year and vaccinated 1,766 students and staff members.

Over the past year, 302,346 articles of personal protective equipment (PPE) were distributed to 282 organizations, providers, and other entities within the district. With the help of county emergency managers, the PPE was sorted, packed, loaded, and delivered to long-term care facilities, hospitals, clinics, dentists, pharmacies, daycares, funeral homes, law enforcement agencies, schools, and businesses across the five counties.

The PHS Walkable Communities program worked with the city of Geneva's grassroots coalition (Geneva in Motion) and provided technical assistance to the coalition to complete Phase I of the community's Trails Master Plan.







**Public Health**  
*Solutions*

## **Kim Showalter**

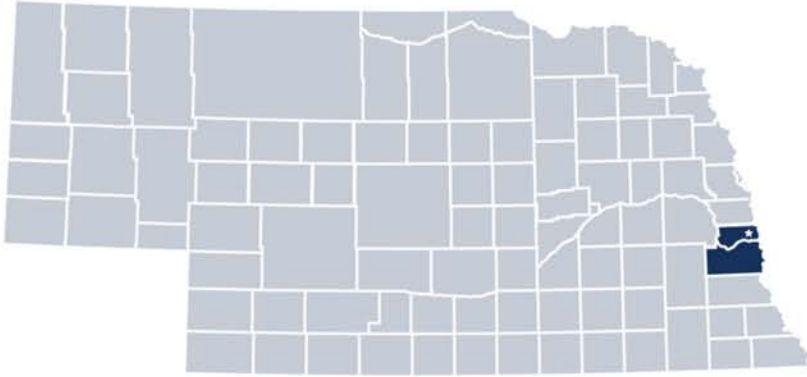
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# Sarpy/Cass Health Department

Serving Sarpy and Cass counties



# 2022

# ANNUAL REPORT







## IMPROVING VACCINE ACCESS THROUGH SCHOOL CLINICS

As the residents of Sarpy and Cass counties continue to navigate through the pandemic, the Sarpy/Cass Health Department (SCHD) committed to ensuring access to COVID-19 vaccine through numerous strategies. Vaccination is a key public health strategy to combat the COVID-19 pandemic.

Schools are a large part of the daily lives of students and their families, and schools are an essential part of a robust community. Convenience is one main indicator that contributes to individuals deciding to get vaccinated. School based vaccination clinics is one strategy that SCHD utilized to amplify residents', particularly families, access to COVID-19 vaccines across Sarpy and Cass counties.

The SCHD took the lead on planning and coordinating school-based clinics throughout the jurisdiction. To ensure clinics were successful the SCHD vaccination team relied on a number of community partners. Key partners included the Medical Reserve Corp (MRC), Team Rubican, Community Emergency Response Team (CERT), local law enforcement, emergency medical services (EMS) staff and school district leaders and staff.

The SCHD worked closely with the schools in the district to encourage families and surrounding community members to participate vaccination clinics. Outreach materials were created that provided essential details (ex. date, time and how to make an appointment), general vaccine information (ex. COVID-19 vaccine schedule), links to vaccine fact sheets and consent forms. These outreach materials were shared with all school districts, public and private, in the health jurisdiction.

In fiscal year 2022, school-based clinics were held in eight different schools across six of the nine public school districts in the health jurisdiction. The school-based clinics were well attended, and the size of each clinic was reflective of the community it was held in. Clinic sizes ranged from 200 to nearly 2,000 doses administered at each event. Through this collaboration, the department was able to provide COVID-19 vaccine to school staff, students, families and the community at large.



# ABOUT THIS REPORT

This report includes examples of efforts by this local health department to make the “Good Life” a healthy one in their jurisdiction. The following examples reflect work supported through multiple sources of funding, including monies from the Nebraska Health Care Funding Act (HCFA).

Local health departments act as communities’ Chief Health Strategists by assuring that the health and wellbeing of Nebraskans are protected and improved. Local health departments do this by working in each of the Three Core Function Areas of Public Health:



**Assessment:** Collect and analyze information about health problems in Nebraska communities.



**Assurance:** Promote effective coordination and use of community resources to protect the health and wellbeing of Nebraskans.



**Policy Development:** Work with partners to apply data, educate the public, and develop programs and policies—all to address and prevent illness, disease and disability.

## Community Health Assessment (CHA) / Community Health Improvement Plan (CHIP)

The SCHED uses the CHA process to ensure that the physical and behavioral health needs in the district are met. Since 2008, the SCHED has participated in a collaborative, regional CHA that includes Douglas, Sarpy, and Cass counties in Nebraska and Pottawattamie County, Iowa. This regional assessment looks at the health status, behaviors, and needs in the four-county Omaha Metropolitan area. The regional CHA identified mental health as the overarching priority.

Additionally, the SCHED conducted a minority health needs assessment last year. We utilized a combination of in-person and phone surveys, listening sessions, and key informant interviews to best understand the needs and assets of the diverse communities within the SCHED service area.

In March 2022, SCHED developed a [CHIP update](https://thewellbeingpartners.org/wp-content/uploads/2022/03/TWP_CHIP_MARCH2022_UPDATE_FINAL.pdf) working with The Wellbeing Partner (TWP).

[https://thewellbeingpartners.org/wp-content/uploads/2022/03/TWP\\_CHIP\\_MARCH2022\\_UPDATE\\_FINAL.pdf](https://thewellbeingpartners.org/wp-content/uploads/2022/03/TWP_CHIP_MARCH2022_UPDATE_FINAL.pdf)

### CHIP PRIORITIES:

- Reduce stigma of mental health and substance use disorder
- Increase connections to mental health and preventive resources
- Connect people to increase social supports
- Reduce trauma

# AREAS OF WORK

## Communicable Disease Control and Prevention

*Includes communicable disease epidemiology (disease outbreak management/response), tuberculosis (TB), immunizations, sexually transmitted infections, and surveillance (tracking and following up on reports and provider/school reports).*

Preventing the spread of contagious and infectious diseases is a vital function of public health. The SCHED conducts surveillance and investigation of reportable communicable diseases as part of meeting our responsibilities as a local health department. Nebraska utilizes an electronic reporting system which provides health departments with communicable disease reports from a variety of healthcare entities. In addition to COVID-19, the diseases the SCHED investigated this year included animal bites, childhood lead exposures, foodborne illnesses, hepatitis C, pertussis, and West Nile virus (WNV).

## Chronic Disease Control and Prevention

*Includes asthma, cancer, cardiovascular disease, diabetes, obesity, tobacco control, and worksite wellness.*

The Active Aging program at SCHED helps keep aging residents in their homes through one-on-one support and education. Public Health Nurses provided basic foot care, blood pressure screening, individualized health information, and referrals for additional services.

Data from the SCHED minority health needs assessment confirmed the role that physical environment, social factors, and cultural norms play in health and wellbeing. In response, the SCHED is engaging community members in developing diabetes prevention and self-management programs that are culturally and linguistically responsive.

## Access to and Linkage to Clinical Care

*Includes coordination of services between medical providers and providers of health-related social needs, oral health/dental services, and behavioral/mental health.*

This year, the SCHED's community partners continued to provide COVID-19 vaccines to Sarpy and Cass counties' residents. Partnerships were created and expanded to provide vaccination opportunities to as many residents as possible. The COVID-19 vaccine was provided via public vaccination clinics, pharmacies, nursing homes, assisted living facilities, schools, private worksites, and through in-home visitation.



# AREAS OF WORK

## Environmental Health

*Includes radon, lead, emergency response, hazardous substances and sites, and Walkable Communities initiatives.*

When a **lead exposure** is identified, SCHED provides guidance on **follow-up and testing**



The SCHED collaborates with local, state, and national partners to prevent, respond to, and rapidly recover from ever-changing environmental public health threats. The SCHED continues to participate in the Childhood Lead Poisoning Prevention Program. When a lead exposure is identified, staff provide guidance to local families regarding follow-up and testing.

The SCHED inspects swimming pools for compliance with Nebraska Regulation Title 178 Chapter 2.

Additionally, through the SCHED arbovirus surveillance program, staff collected mosquitos in traps throughout the jurisdiction for West Nile virus (WNV) and other testing.

## Injury Prevention

*Includes motor vehicle injuries, occupational injuries, senior fall prevention, substance abuse, car seat safety, binge drinking, and distracted driving.*

The SCHED's Safe Kids Sarpy/Cass is a childhood injury prevention that includes child passenger safety. Typically, the SCHED receives 12 requests for car seat installation support per month from the residents of Sarpy and Cass counties. Additionally, staff educate the community on home safety, the dangers of texting and driving, and sports injury prevention.

## Maternal and Child Health

*Includes Women, Infant, and Children (WIC), family planning, newborn screening, evidence-based home visitation, Early Preventative Screening, Diagnosis, and Treatment (EPSDT).*

The SCHED continues to partner with the Douglas/Sarpy County Women, Infants, and Children (WIC) Program to support women and children enrolled in the Special Supplemental Nutrition Program. Due to the pandemic, the SCHED WIC Clinic appointments were conducted virtually. In-person appointments are anticipated to resume in the summer of 2022. Additionally, the WIC Breastfeeding Peer Counselor program provides basic breastfeeding information, advice, and encouragement to pregnant and postpartum women.



WIC Clinic appointments were **conducted virtually** in 2021

# ADDITIONAL ACTIVITIES

Examples of additional public health activities that Sarpy/Cass Health Department performs to assure that the health and wellbeing of Nebraskans are protected and improved.

The SCHED is implementing a community-based prevention program aimed at addressing underage drinking and marijuana usage among persons ages 9 to 20, in Cass County. In December 2021, all five Cass County public school districts participated in the Communities that Care Youth Risk and Protective Factor Survey. This survey was designed to assess students' involvement in a specific set of problem behaviors, as well as their exposure to a set of scientifically-validated risk and protective factors. The risk and protective factors have been shown to influence the likelihood of academic success, school dropout, substance abuse, violence, and delinquency among youth.

Additionally, the SCHED Community Health Planner engaged the help of influential community members from law enforcement, school, government, business, religious and youth organizations. The leaders recruited additional residents from across the county to join the Community Board, which is directly involved with the assessment, prioritization, selection, implementation, and evaluation of substance abuse prevention programs, policies, and practices. This community action model utilizes a systematic, public health approach to community building which ultimately leads to positive health outcomes.

The SCHED's Minority Health Initiative (MHI) program, through a comprehensive survey process, identified community health priorities such as access to health care and mental health services, safe and affordable housing, transportation, educational opportunities, accessibility to healthy food, and availability of local community resources. The SCHED's MHI program is launching a Sarpy County Health Equity Advisory Board to better-engage community partners in planning, advising, and decision making. This group evaluates factors contributing to sub-optimal health outcomes to improve community health for everyone.







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# Southeast District Health Department

Serving Johnson, Nemaha, Otoe, Pawnee, and  
Richardson counties



# 2022 ANNUAL REPORT







## **PREVENTATIVE DENTAL CARE AND BRIGHTER SMILES FOR KIDS**

The Southeast District Health Department's (SEDHD) Brighter Smiles program provides preventative dental services for children and adolescents who might otherwise lack that care or who face barriers in accessing oral health care. Since 2017, Nebraska has seen a decrease in the number of Medicaid-enrolled children one to 18 years old, enrolled in Medicaid, who have received any dental services. Programs like Brighter Smiles are imperative in rural areas, where access to providers accepting Medicaid is limited or unavailable.

Last year, Brighter Smiles performed 1,234 oral screenings, 724 fluoride varnishes and 20 sealants. Participation has grown steadily since the program started in 2017. This year the program added a new preschool site. Brighter Smiles has been providing services in collaboration with five school districts, six Head Start sites, as well as two additional preschool sites. This collaboration has increased the awareness of services offered, allowed for educational opportunities within classrooms, and connected students and their families with needed preventative care and referrals to additional dental services.

# ABOUT THIS REPORT

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**Assessment:** Collect and analyze information about health problems in Nebraska communities.



**Assurance:** Promote effective coordination and use of community resources to protect the health and wellbeing of Nebraskans.



**Policy Development:** Work with partners to apply data, educate the public, and develop programs and policies—all to address and prevent illness, disease and disability.

## Community Health Assessment (CHA) / Community Health Improvement Plan (CHIP)

Every three years, the SEDHD collaborates with area Critical Access Hospitals and other local partners (including clinics, schools, law enforcement, military and veteran organizations, economic development agencies, businesses, foundations, other community organizations, and individual community members) to complete a CHA which identifies the key health issues within the district. The process consists of a community survey and focus groups. The resulting formal assessment is used to create a community-wide plan aimed at strategically improving health – the CHIP. The CHA/CHIP process ensures that local communities can work together toward a Good, Healthy Life for all Nebraskans.

### CHIP PRIORITIES:

- Behavioral/Mental Health
- Preventative Care and Screening
- Social Determinants of Health



# AREAS OF WORK

## Communicable Disease Control and Prevention

*Includes communicable disease epidemiology (disease outbreak management/response), tuberculosis (TB), immunizations, sexually transmitted infections, and surveillance (tracking and following up on reports and provider/school reports).*

The SEDHD's disease surveillance and public health emergency preparedness programs collect and analyze data to monitor disease incidence across the district's five-county region. Data is shared with various community partners (schools, health care, etc.) to inform on disease incidence trends and to educate on best practices related to infectious disease prevention. The SEDHD provides immunizations for children and adults to prevent vaccine-preventable diseases. The department also links community members to other health care services when needed.

## Chronic Disease Control and Prevention

*Includes asthma, cancer, cardiovascular disease, diabetes, obesity, tobacco control, and worksite wellness.*

The SEDHD monitors chronic disease-related data from primary and secondary sources, which provide a deeper understanding of the community's health, and informs priorities of the Community Health Improvement Plan (CHIP). The SEDHD conducts health screenings for community members at health fairs and engages worksites in other sustainable wellness activities, including evidence-based wellness programs, and worksite policy changes. The SEDHD staff provides education related to diabetes and blood pressure monitoring, healthy eating, and weight management. The SEDHD also assists with breast, cervical, and colon cancer screenings. The SEDHD is currently working with local health care partners to refer community members to primary care providers to prevent and improve management of chronic disease.

## Access to and Linkage to Clinical Care

*Includes coordination of services between medical providers and providers of health-related social needs, oral health/dental services, and behavioral/mental health.*

The Vaccines for Children (VFC) program offers the recommended vaccines to eligible children for free or at a reduced cost. This national program strives to increase vaccine coverage levels across the US. Children are eligible if they are 18 years of age or younger and are uninsured or underinsured, Medicaid-enrolled, and/or American Indian or Alaska Native. Last year, the SEDHD gave 300 VFC vaccines (not including COVID vaccines) to kids ages 6 months to 18 years.



In addition to COVID-19 vaccines, VFC gave **300** other vaccines to kids

# AREAS OF WORK

## Environmental Health

*Includes radon, lead, emergency response, hazardous substances and sites, and Walkable Communities initiatives.*

The SEDHD's radon program provides kits to test homes along with education on, and assistance in identifying radon risks and mitigation strategies.

The department's lead program also provides education and assists in reducing childhood lead exposure.

The SEDHD's emergency preparedness programs identify gaps in planning for emergencies; plan and implement exercises to coordinate and practice emergency efforts; align policies and procedures to promote cooperative response across the region; and provide a platform for collaboration between response agencies, emergency management, public health, and health care organizations.

## Injury Prevention

*Includes motor vehicle injuries, occupational injuries, senior fall prevention, substance abuse, car seat safety, binge drinking, and distracted driving.*

The SEDHD conducts car seat checks and installation as a part of the department's Safe Kids Coalition. The SEDHD's Growing Great Kids program performs home safety visits and provides childproofing supplies to families. The Southeast District Prevention Partnership, spearheaded by the SEDHD, provides evidence-based substance use prevention and intervention curriculum to schools within the district.

## Maternal and Child Health

*Includes Women, Infant, and Children (WIC), family planning, newborn screening, evidence-based home visitation, Early Preventative Screening, Diagnosis, and Treatment (EPSDT).*

In 2021, the SEDHD's Growing Great Kids program served nearly two times as many families compared to 2019 or 2020. The SEDHD collects developmental screenings data by way of the Behavioral Risk Factor Surveillance System (BRFSS) and other sources, and disseminates these data to inform the community on maternal, child, and family health-related issues across the district. The SEDHD refers families with developmentally delayed children to the Early Development Network. The SEDHD supports family planning efforts through implementing a curriculum for family planning in schools and provides referrals to primary care.



Growing Great Kids served nearly **twice** as many families in 2021





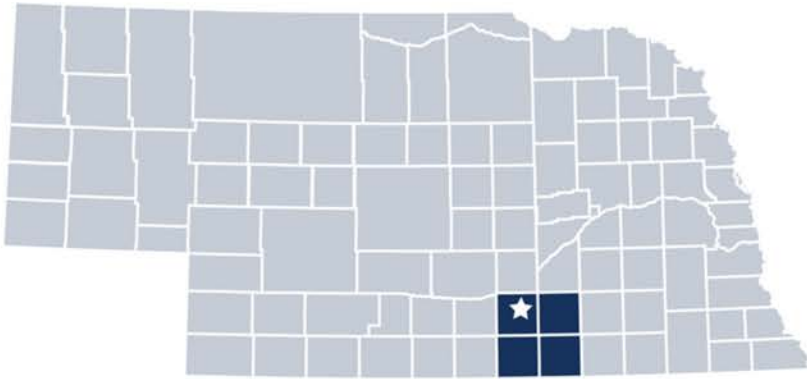
## Grant Brueggemann

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# South Heartland District Health Department

Serving the Adams, Clay, Nuckolls, and Webster  
counties



# 2022

# ANNUAL REPORT







## SHDHD'S CHIP STEERING COMMITTEES DRIVE HEALTH IMPROVEMENT PLAN FORWARD

Five steering committees meeting biannually in April and October are helping the South Heartland District Health Department (SHDHD) make progress on the Community Health Improvement Plan (CHIP) priorities: Access to Care, Mental Health, Substance Misuse, Obesity and related health conditions, and Cancer.

The committees include community members, leaders, professionals, and SHDHD staff. The committees review the most current data, including the 2021 Community Health Assessment (CHA). They evaluate plan progress (CHIP objectives/strategies), changes in environment or resources, and the need for course corrections or revisions.

The Cancer Steering Committee made a course correction for the goal, "Reduce the number of new cancer cases as well as illness, disability and death caused by cancer", specifically with respect to a performance measure to reduce incidence rates. In reviewing the most current cancer registry data, the committee was concerned that three of the five cancer incidence metrics were trending in the wrong direction and were worse than overall state trends. However, the committee proposed that if the SHDHD is successful in increasing screening rates, this could produce an increase in diagnoses (incidence). The committee agreed to add a performance measure considering the cancer stage at diagnosis. If increased screening is successful, the SHDHD expects increased early-stage diagnoses, reduced late-stage diagnoses, and decreased mortality for cancers where intervention is effective. The SHDHD added this performance measure to the CHIP Cancer goal and is requesting the appropriate data to share trends with the committee at their next meeting.

CHIP progress and revisions were reported in SHDHD's 2021 CHIP Annual Report. The SHDHD is also developing a public-facing interactive data dashboard to assist the public and partners in visualizing progress on the community's health priorities.



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**Policy Development:** Work with partners to apply data, educate the public, and develop programs and policies—all to address and prevent illness, disease and disability.

## Community Health Assessment (CHA) / Community Health Improvement Plan (CHIP)

The SHDHD and community partners completed an interim CHA in 2021. The assessment included 1,102 community surveys, (four focus groups with the general community, and two focus groups targeting minority communities). The assessment results helped the SHDHD determine progress on 2019-2024 CHIP performance measures, as well as the impact of the pandemic on the public’s health. Data reports, including progress on the objectives, were reviewed with the five steering committees (one for each of the five health priorities), which moved the health improvement process forward and helped SHDHD adjust strategies, where needed.

Outcomes: 2021 CHIP Annual Report; 2021 Interim CHA Report; minority community focus group transitioning to a minority advisory committee; and results communicated to staff, Board of Health, partners, and the public.

### CHIP PRIORITIES:

- Access to Care
- Mental Health
- Substance Misuse
- Obesity and related health conditions
- Cancer



# AREAS OF WORK

## Communicable Disease Control and Prevention

*Includes communicable disease epidemiology (disease outbreak management/response), tuberculosis (TB), immunizations, sexually transmitted infections, and surveillance (tracking and following up on reports and provider/school reports).*

Over the last year, the SHDHD's epidemiology team received 5,655 positive COVID-19 lab reports, collaborating, investigating and providing education as necessary. The team monitors and orders sequencing for emerging variants and continues to assist schools/colleges, nursing homes, daycare facilities, and other group settings with COVID-19 prevention.

As the global monkeypox outbreak expands into Nebraska, the team is providing the most current information to providers and the public and is preparing to conduct case investigations and contact tracing, as well as provide vaccines to those at risk.

## Chronic Disease Control and Prevention

*Includes asthma, cancer, cardiovascular disease, diabetes, obesity, tobacco control, and worksite wellness.*

HALT participants achieved a **3.4% total weight loss** in 5 months



The SHDHD added a virtual option, called HALT, to the Smart Moves evidence-based diabetes prevention offerings. Participants engage at their convenience using their computer or mobile app to log their weight and physical activity minutes, photo-journal their food, and message with their Lifestyle Coach and other participants through an in-app Community Board. The first cohort of 11 participants lost a combined 79 pounds, 3.4% total weight loss, in 5 months. The goal is 5–7% weight loss by the end of the year-long class: participants are right on track!

## Access to and Linkage to Clinical Care

*Includes coordination of services between medical providers and providers of health-related social needs, oral health/dental services, and behavioral/mental health.*

Limited health literacy affects millions of people, costs billions of dollars each year, and keeps people from getting the most from their health care. Health literacy specialists from the SHDHD offered presentations to 11 staff members from two rural primary care clinics within the district. They focused on the evidence-based practices of Plain Language and Teach Back, techniques that promote the ability to understand and use information in making health-related decisions and taking health-related actions.



Nearly **36% of adults** in the U.S. have **low health literacy**, with disproportionate rates found among **lower-income** Americans eligible for **Medicaid**

# AREAS OF WORK

## Environmental Health

*Includes radon, lead, emergency response, hazardous substances and sites, and Walkable Communities initiatives.*

Last year, **over 40%** of SHDHD's tested homes had **high radon levels** that put residents at **risk**



According to EPA estimates, radon is the number one cause of lung cancer among non-smokers, making it the second leading cause of lung cancer. The SHDHD sold 76 radon test kits, with 34 kits completed.

The highest recorded level among tests was 17.9 pCi/L and 14 tests had a level at/or above the action level of 4 pCi/L. To date, 35% of the homes tested have an action plan to retest or mitigate radon in their home.

## Injury Prevention

*Includes motor vehicle injuries, occupational injuries, senior fall prevention, substance abuse, car seat safety, binge drinking, and distracted driving.*

**Falls with injuries** in the district fell by **more than half** after providing **fall prevention classes**



In 2012, 30.1% of adults in the district age 45+ reported falling and 11.8% reported falls with injuries. The SHDHD started providing evidence-based falls prevention classes, which included Tai Chi in 2010 and Stepping On in 2017.

By 2020, falls in the SHDHD area dropped significantly, to 19.8%, and falls with injuries dropped significantly to 5.5% (Behavioral Risk Factors Surveillance System [BRFSS], 2020). In partnership with Midland Area Agency on Aging, community and professional volunteers, and with support from Nebraska DHHS, the SHDHD is coordinating, promoting, and expanding falls prevention classes across the health district.

## Maternal and Child Health

*Includes Women, Infant, and Children (WIC), family planning, newborn screening, evidence-based home visitation, Early Preventative Screening, Diagnosis, and Treatment (EPSDT).*

Through a partnership with the University of Nebraska Kearney (UNK), the SHDHD became a pilot site for Building Healthy Families (BHF), a family-based pediatric weight management and lifestyle modification program. The SHDHD secured initial funds from UNK and additional funds from Children's Hospital to implement the program in Hastings. With community partnerships (YMCA, Mary Lanning Healthcare, UNL Extension), two cohorts successfully completed the BHF program. The SHDHD is engaging medical providers and school staff to help recruit families for the next cohort.



# ADDITIONAL ACTIVITIES

Examples of additional public health activities that South Heartland District Health Department performs to assure that the health and wellbeing of Nebraskans are protected and improved.

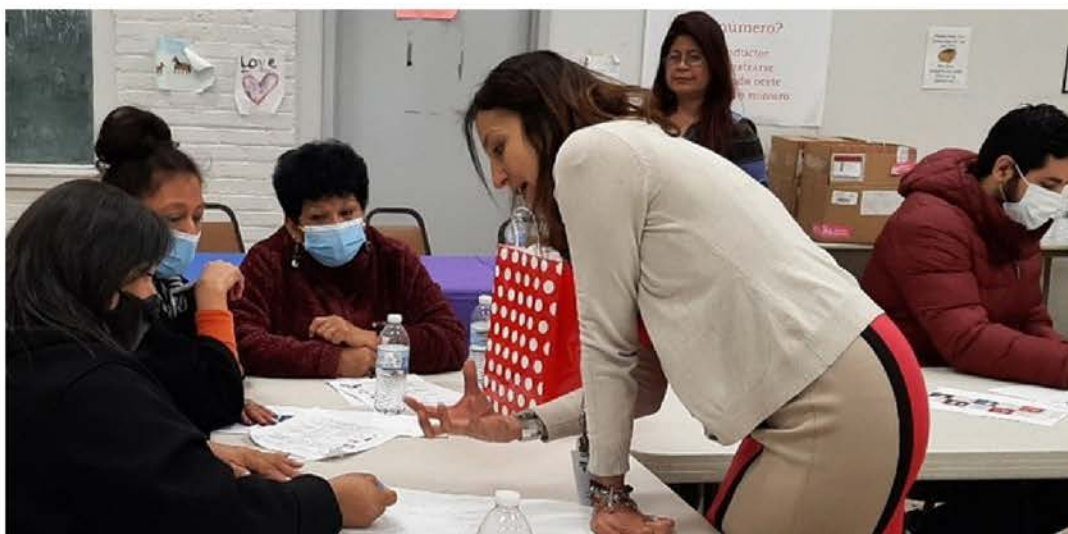
## Engaging Our Minority Community Members in Community Health Improvement

The SHDHD is fortunate to have a trusted leader helping our team connect with minority community members. On top of her full-time job with Migrant Education, Aida Evans works part-time with the SHDHD, connecting people to information and resources and engaging community members in their health.

This year, the SHDHD conducted a Community Health Assessment (CHA) to update the Community Health Improvement Plan (CHIP). The health department wanted to help the district do a better job serving all residents. To do this, the SHDHD needed to hear from a good cross-section of the population: the health department needed to give as many people as possible the opportunity to communicate about the health issues that matter most to them, and identify barriers which keep them from getting the care they need.

Aida helped the SHDHD bring together minority residents for a minority outreach planning session, where participants were asked how best to reach Spanish-speaking residents for community assessment surveys and listening sessions. The 17 attendees provided great ideas and committed to a goal of recruiting at least 5% of the Hispanic community members across the four counties to complete the community assessment survey. Each participant in the planning session met the challenge to promote the survey to 10-25 others, exceeding the 183 total surveys required for the 5% goal. Of the 300 racial/ethnic minority respondents, 276 (92%) were Hispanic or Latino. Additionally, 29 racial/ethnic minority participants attended 2 listening sessions.

Participants met again to review results, choose priorities, and create a plan for improvement. Some participants have committed to oversee the improvement initiatives and offer ongoing input to the SHDHD and the Board of Health through forming a minority health advisory board.







SOUTH  
HEARTLAND  
DISTRICT



HEALTH  
DEPARTMENT

## Michele Bever, PhD

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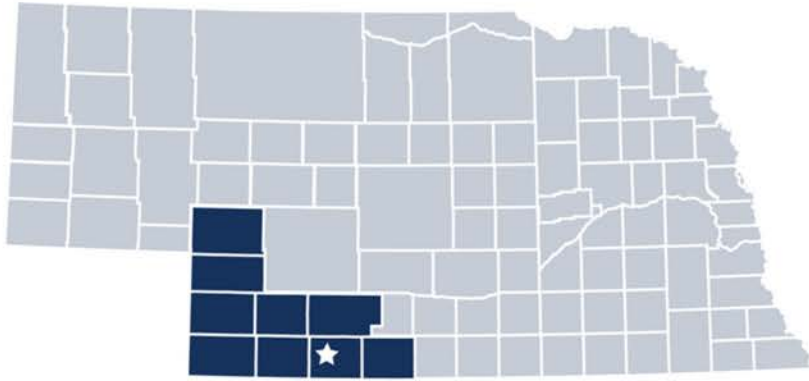
[www.southheartlandhealth.ne.gov](http://www.southheartlandhealth.ne.gov)





# Southwest Nebraska Public Health Department

Serving the Chase, Dundy, Frontier, Furnas, Hayes,  
Hitchcock, Keith, Perkins, and Red Willow counties



# 2022

# ANNUAL REPORT







# Southwest Nebraska Public Health Department

## NEW OFFICE



### DRIVE-UP COVID TESTING

PCR and rapid antigen tests with verified result for travel, presurgical, or treatment. With or without symptoms. Call for appointments.

## BUILDING UP PUBLIC HEALTH

The Southwest Nebraska Public Health (SWNPHD) has been providing services to local communities for 20 years. There has always been a need for more investment in public health, and the SWNPHD took the recent opportunity to build up their infrastructure and services in several ways.

Five new offices were added to the existing space in the main office in McCook to accommodate the increase in staff that were hired to help with the pandemic response. As the response effort became more manageable, these staff were utilized to expand the reach of public health services in the district. These services include a dental screening program for children that is increasing access for vulnerable or underserved populations and assisting with public vaccination clinics.

The first Ogallala office has allowed the SWNPHD to better provide services to the four counties in the Mountain Time Zone. This office offers preventive lab draws, drive-up COVID-19 testing, vaccinations for people who are uninsured or underinsured, and other health department programs. The local doctors have been enthusiastic about having these low-cost services available for their communities and have been referring clients.

The SWNPHD also leased two additional vehicles, which allowed staff to get out into the communities of the nine-county health district, which stretches over 120 miles east to west. Improvements were made to the McCook location to support continuity of operations and improve access, including installing a generator and paving the parking lot. Security cameras were also added to the McCook office to increase the security and safety of SWNPHD employees.



# ABOUT THIS REPORT

This report includes examples of efforts by this local health department to make the “Good Life” a healthy one in their jurisdiction. The following examples reflect work supported through multiple sources of funding, including monies from the Nebraska Health Care Funding Act (HCFA).

Local health departments act as communities’ Chief Health Strategists by assuring that the health and wellbeing of Nebraskans are protected and improved. Local health departments do this by working in each of the Three Core Function Areas of Public Health:



**Assessment:** Collect and analyze information about health problems in Nebraska communities.



**Assurance:** Promote effective coordination and use of community resources to protect the health and wellbeing of Nebraskans.



**Policy Development:** Work with partners to apply data, educate the public, and develop programs and policies—all to address and prevent illness, disease and disability.

## Community Health Assessment (CHA) / Community Health Improvement Plan (CHIP)

The SWNPHD is preparing to apply for accreditation, through working to put the required procedures in place. The Public Health Accreditation Standards and Measures align with the 10 Essential Services of Public Health and raise the standard of excellence of health departments who chose to go through the accreditation process. This includes a district-wide CHA and CHIP. The SWNPHD has participated in several local CHAs conducted by healthcare facilities and will include that data in a district-wide CHA/CHIP, which will drive future public health activities. For the 2016 CHIP, SWNPHD conducted two focus groups, one in Red Willow County and one in Perkins County. Two out of the six invited hospitals participated in the focus groups and helped identify the two CHIP priority areas.

### CHIP PRIORITIES:

- Cancer
- Heart Disease

# AREAS OF WORK

## Communicable Disease Control and Prevention

*Includes communicable disease epidemiology (disease outbreak management/response), tuberculosis (TB), immunizations, sexually transmitted infections, and surveillance (tracking and following up on reports and provider/school reports).*

Contagious and infectious disease prevention continues to be a major public health activity. As COVID-19 continues to spread throughout the health district, the SWNPHD staff has been working hard to get the most current information about this disease out to the public.

While the SWNPHD continued to focus on COVID-19, other disease investigations continued, such as hepatitis, food borne illness, and West Nile virus (WNV). The Nebraska Department of Health and Human Services (NE-DHHS) assisted with these efforts. In total, 924 communicable disease investigations were completed involving 58 different diseases.

## Chronic Disease Control and Prevention

*Includes asthma, cancer, cardiovascular disease, diabetes, obesity, tobacco control, and worksite wellness.*

The SWNPHD has several programs for public outreach and education which encourage physical activity and offer preventive screenings. The goal of these programs is to reduce chronic disease rates, especially heart disease and cancer, which are the two main causes of death in the health district.

Walk to Health is a free walking program that provides step tracking, health information and motivation to residents. It encourages the CDC's physical activity goals for adults to help manage and prevent chronic diseases. This program partners with Community Hospital's Wellness for Life program to provide the step tracking app and challenge incentives.

## Access to and Linkage to Clinical Care

*Includes coordination of services between medical providers and providers of health-related social needs, oral health/dental services, and behavioral/mental health.*

The Health Hub and Target Your Health (TYH) programs were created to provide free health screenings, including blood pressure checks, cholesterol, glucose checks, as well as weight and BMI measurements. The Health Hub offers cancer screenings to women ages 40-64 and men ages 50-74.

Women who qualify can also receive free health coaching to assist in reaching their weight, fitness, and nutrition goals. SWNPHD staff collaborate with local businesses to increase the number of residents receiving preventive cancer screenings. These programs serve 15 counties which include the nine counties in the SWNPHD district, and six counties in West Central District Health Department.



# AREAS OF WORK

## Environmental Health

*Includes radon, lead, emergency response, hazardous substances and sites, and Walkable Communities initiatives.*

**Radon** is the second leading cause of **lung cancer**



The SWNPHD provides free lead testing for drinking-water sources located within 47 schools and childcare centers inside the nine-county health district. Funding from Nebraska Department of Environment and Energy (NDEE) supports this work. Education and follow up on elevated lead levels is essential to protect children from exposure to lead. The SWNPHD monitors cases, encourages testing, educates families about risks, and recommends treatments for lead exposure.

SWNPHD's radon program encourages residents to test their homes for radon gas, a health hazard that is the second leading cause of lung cancer. Education is shared during January each year for Radon Action Month through radio ads, news releases and social media posts. An annual radon poster contest had participants from six local schools in 2021-2022, with winners from five different counties.

## Injury Prevention

*Includes motor vehicle injuries, occupational injuries, senior fall prevention, substance abuse, car seat safety, binge drinking, and distracted driving.*

Southwest Nebraska Public Health Department created an injury prevention program called Fitness Reaching Older Gens, or FROG. This program is aimed at preventing falls among residents over 50 by providing exercise groups at senior centers and other community locations. Activities are focused on improving balance, strength, and flexibility.

## Maternal and Child Health

*Includes Women, Infant, and Children (WIC), family planning, newborn screening, evidence-based home visitation, Early Preventative Screening, Diagnosis, and Treatment (EPSDT).*

The department has no activities to report at this time.

# ADDITIONAL ACTIVITIES

Examples of additional public health activities that Southwest Nebraska Public Health Department performs to assure that the health and wellbeing of Nebraskans are protected and improved.

## **Health Equity**

SWNPHD is implementing a Minority Health Initiative (MHI) project, which seeks to engage with minority populations within the district to increase access to care and decrease disparities in health outcomes. SWNPHD circulated a survey and held four listening sessions. Information collected from these activities will shape next year's strategies to meet the goals of the MHI grant and to expand the reach of the program. SWNPHD also took part in a CDC equity grant to examine and maximize the effectiveness of coordination of COVID-19 activities. The grant aims to enhance the accessibility to COVID-19 testing, support contact tracing, and aid in the vaccination of vulnerable or hard-to-reach populations within our health district—including the disabled, racial and ethnic minorities, and those in rural communities who may lack access to healthcare.

## **Emergency Preparedness**

SWNPHD worked with many partners—clinics, pharmacies, and community groups—to provide accessible, local opportunities for testing and vaccination. Local advisory groups are being developed to continue and strengthen collaboration within these communities. Emergency response continues to work towards safer and more secure communities. Partnerships were strengthened as we all worked together throughout the pandemic. This included numerous healthcare entities, emergency management, schools, cross-state partners such as Colorado and Kansas, and NE-DHHS.





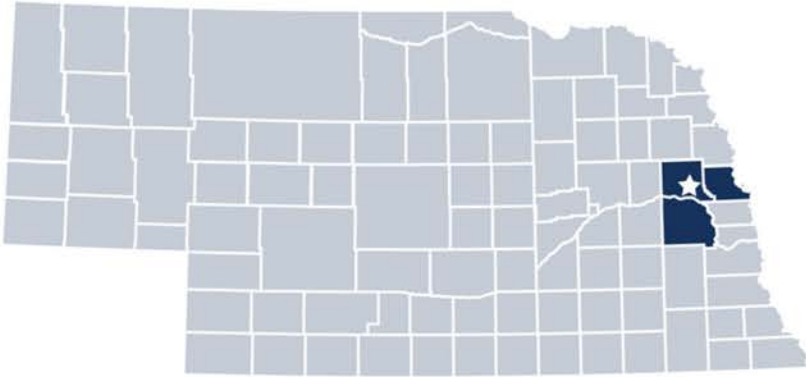
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**Three Rivers  
Public Health Department**

*Serving Dodge, Saunders, and Washington counties*



# 2022

# ANNUAL REPORT







## CAR SEAT SAFETY: PROVIDING RESOURCES TO FAMILIES IN-NEED

Nationally, in 2019 608 child passengers aged 12 and younger died in motor vehicle crashes, and more than 91,000 were injured. **Of the children 12 and younger who died in a crash** (for whom restraint use was known), **38% were not buckled up.** This according to the National Center for Injury Prevention and Control.

It is the goal of the Three Rivers Public Health Department's (3RPHD) child passenger safety program to educate and empower parents and caregivers to be sure all children are not only buckled up every ride, but also restrained properly for their age, size, and developmental abilities.

During the fiscal year of July 1, 2021 to June 30, 2022, Safe Kids coalition car seat technicians checked a total of 113 car seats and provided a total of 39 car seats to families in need. Three community car seat check events were held this year, one in each of the three counties the 3RPHD serves.

The 3RPHD also partners with a local Sixpence program to provide car seats and education to families. Sixpence has two trained car seat technicians who provide on-site education to the families they serve. The 3RPHD provides car seats for Sixpence to distribute to these families when a financial need exists. This partnership allows families to receive these services in a timely manner without having to schedule additional appointments at other locations.

# ABOUT THIS REPORT

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**Assurance:** Promote effective coordination and use of community resources to protect the health and wellbeing of Nebraskans.



**Policy Development:** Work with partners to apply data, educate the public, and develop programs and policies—all to address and prevent illness, disease and disability.

## Community Health Assessment (CHA) / Community Health Improvement Plan (CHIP)

The 3RPHD, in collaboration with its local healthcare partners, recently completed a CHA; which shapes the focus of the CHIP. A total of 815 community members completed the Community Health Status Survey. Over 339 Minority Health Assessments were also completed. The goals of the CHA are to describe the health status of the population and identify areas for health improvement; it utilizes four different assessments to achieve this goal. With the CHA completed, the CHIP will then be created to target these key health issues and additional concerns. Both the assessment and improvement plan are updated and revised every three years.

**CHIP PRIORITIES:** Public health stakeholders from Dodge, Saunders, and Washington counties met and prioritized health issues to be addressed based on the results from the CHA process and report. All three counties identified the following health issues to be addressed in the health district:

- Mental Health
- Obesity/Unhealthy Lifestyles
- Access to Health Care



# AREAS OF WORK

## Communicable Disease Control and Prevention

*Includes communicable disease epidemiology (disease outbreak management/response), tuberculosis (TB), immunizations, sexually transmitted infections, and surveillance (tracking and following up on reports and provider/school reports).*

Nearly all of the 3RPHD's recent communicable disease work has been aimed at mitigating the COVID-19 pandemic. During the week of January 16, 2022, the 3RPHD had 1,363 new COVID-19 cases per 100,000 population. Through the surge and beyond, staff provided COVID-19 guidance, expanded access to testing, and performed case investigations and contact tracing.

The 3RPHD has followed the more recent monkeypox outbreak by monitoring contacts and providing situational awareness. The 3RPHD also worked with a local tuberculosis (TB) case.

## Chronic Disease Control and Prevention

*Includes asthma, cancer, cardiovascular disease, diabetes, obesity, tobacco control, and worksite wellness.*

Chronic conditions such as diabetes and fibromyalgia negatively impact many areas of a person's life and overall health. The Living Well self-management workshops help individuals work towards positive changes and healthier living. The staff at 3RPHD offered two Living Well workshops this year, one to the 3RPHD employees and one to a group of Spanish-speaking community members.

The 3RPHD also conducted blood draws for staff as part of our employee wellness program.

## Access to and Linkage to Clinical Care

*Includes coordination of services between medical providers and providers of health-related social needs, oral health/dental services, and behavioral/mental health.*

Lack of insurance is often a barrier to medical care. The 3RPHD offers the following programs to connect community members with essential services:

- Title X: Family planning services for low-income individuals. In 2021, 72% of the district's Title X patients were uninsured.
- Contraceptive Access Project: Free birth control for 15- to 24-year-olds
- Collaborative Impact Project: Breast and cervical cancer screenings for uninsured, non-U.S. citizens.
- Every Woman Matters: Preventative health screenings and diagnostic testing for under/uninsured.
- VFC Program: Vaccinations for Children (VFC) who might not get vaccinated due to inability to pay.

# AREAS OF WORK

## Environmental Health

*Includes radon, lead, emergency response, hazardous substances and sites, and Walkable Communities initiatives.*

**2 out of 5 radon kits** returned to 3RPHD tested with **elevated levels**



High radon levels in the home are strongly associated with lung cancer. To reduce this risk locally, 3RPHD distributed 138 radon test kits from December 2021 to May 2022. In Dodge County, 40% of kits returned high results. The 3RPHD provided information on radon mitigation to those with elevated levels.

In September 2021, the 3RPHD had nine positive West Nile virus (WNV) cases and two deaths. The 3RPHD traps mosquitos for WNV surveillance. Staff also distribute mosquito dunks and wipes and educate on how avoid mosquito bites and mosquito-borne illnesses.

## Injury Prevention

*Includes motor vehicle injuries, occupational injuries, senior fall prevention, substance abuse, car seat safety, binge drinking, and distracted driving.*

The 3RPHD focuses prevention efforts on: (1) child passenger safety and (2) bike and pedestrian safety.

From July 2021 to June 2022, the 3RPHD checked 113 car seats and gave 39 to families in need.

Bike rodeos were held in Dodge County (serving 65 kids with 43 helmets given) and in Saunders County (serving 83 kids with 62 helmets given). The Washington County bike rodeo scheduled for April of 2022 was cancelled due to inclement weather.

## Maternal and Child Health

*Includes Women, Infant, and Children (WIC), family planning, newborn screening, evidence-based home visitation, Early Preventative Screening, Diagnosis, and Treatment (EPSDT).*

Injuries and deaths from motor vehicle crashes and increased rates of sexually transmitted infections (STIs) disproportionately affect adolescents. To address this, 3RPHD work included:

- A reproductive health project aimed at reducing rates of chlamydia and gonorrhea among adolescents and encouraging STI testing.
- A motor vehicle safety program with area schools to reduce injuries and fatalities among youth due to crashes.
- Bringing youth motivational and prevention speaker, Cara Filler, to speak at the following schools in February 2022: North Bend 6th - 12th graders (370 students and teachers), Mead 7th - 12th graders (130 students plus teachers), Fort Calhoun 7th - 12th graders (350 students plus teachers), Ashland-Greenwood 6th - 12th graders (570 students plus teachers), Scribner-Snyder 7th - 12th graders (50 students and teachers), and approximately 50 people attended a parent night.



# ADDITIONAL ACTIVITIES

Examples of additional public health activities that the Three Rivers Public Health Department performs to assure that the health and wellbeing of Nebraskans are protected and improved.

- The Communities that Care program is working to address youth problem behaviors in Washington County. Based on the Communities that Care Youth Survey results and other input from the community, the priorities include: 1) perceived risk of drug use, 2) low commitment to school, 3) depressive symptoms, and 4) alcohol and energy drink use.
- Youth often receive inaccurate information on puberty from friends and social media. The 3RPHD staff presented on the topic of human growth and development/puberty at 10 area schools and reached over 1,000 students. Covering the physical, emotional, and social/behavioral changes that occur during puberty, the focus was to provide comprehensive, medically-accurate information to students in a fact-based manner.
- Sexually transmitted infections (STIs) disproportionately impact college-age individuals. The 3RPHD provided STI outreach and testing for chlamydia/gonorrhea at Midland University. The health department provided education to a total of 73 students and tested 10. This was the first time the 3RPHD has been allowed to offer reproductive health-related programming on campus other than in specific classroom settings.
- With a goal of removing barriers to accessing COVID-19 vaccinations, the 3RPHD initiated a mobile vaccination clinic this year. The clinic included transforming a 24-foot trailer into a suitable space for administering vaccines and taking it on the road. The health department provided COVID-19 vaccinations at various community events and locations including mobile home parks, county fairs, and John C. Fremont Days.
- Due to the COVID-19 pandemic, telehealth has become an essential method for receiving health-related services, the 3RPHD received a grant to assist in starting a telehealth program. The 3RPHD provides telehealth services to Title X clients to reduce no-shows and ensure access to care for those with transportation issues.



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# Two Rivers Public Health Department

*Serving Buffalo, Dawson, Franklin, Gosper, Harlan,  
Kearney, and Phelps counties*



# 2022

# ANNUAL REPORT







## THE LIFSMILES DENTAL PROGRAM: ADDRESSING NEEDS

The Two Rivers Public Health Department (2RPHD) operates the LifeSmiles Dental Program. The LifeSmiles Dental Health Program collaborates with community-based groups, healthcare providers, and organizations to provide preventive dental care. LifeSmiles provides services in preschools, Head Start programs, schools, and WIC clinics.

LifeSmiles Dental Program will help decrease the instance of oral disease and the need for complex dental treatment. LifeSmiles focuses primarily on infants through third graders to prevent tooth decay and poor oral hygiene. According to the 2019 American Community Survey results, 8% of 2RPHD's residents are uninsured and 27% of residents are on public insurance (Medicaid). Among families that qualify, most cannot find dental offices that accept Medicaid. LifeSmiles polled all dentists in the health district by phone and found that only 6 out of 40 providers accept Medicaid. Those who accept it place strict limitations based on county of residence, age, and the current number of existing Medicaid patients already in their practice.

During the 2021-2022 fiscal year, the LifeSmiles Dental Team conducted 1,623 dental screenings, 884 fluoride treatments, and sealed 2,011 teeth. The LifeSmiles dental team visited 16 schools in the health district twice.

LifeSmiles has expanded to offer services for 4th through 6th graders. The 2RPHD anticipates expanding services to include children through 18 years of age. Expanding LifeSmiles will educate and guide young families about options to establish a dental provider.



# ABOUT THIS REPORT

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## Community Health Assessment (CHA) / Community Health Improvement Plan (CHIP)

The 2RPHD CHIP prioritizes increasing access to care. Related to this priority, the 2RPHD engaged in an innovative practice called the CDC Rapid Community Assessment, that assesses knowledge, attitudes, practices, and barriers related to specific public health issues. The 2RPHD applied this practice to the uptake of COVID-19 vaccine in the health district. The assessment enabled the 2RPHD to pinpoint outreach and activities to improve vaccination coverage and access. The 2RPHD used this assessment results to direct COVID-19 immunization, administration, and educational activities. Insights from this process emphasized the need for providing educational materials in various languages and locating clinics across the health district for easier access to care.

**CHIP PRIORITIES:** The 2RPHD CHIP priorities include Access to Care, Safe Environment, and Mental Health and Suicide Prevention. Within the access to care priority, the 2RPHD is working toward two objectives, 1) increased educational materials in various languages and 2) improved vaccination rates throughout the health district. The 2RPHD has implemented a Minority Advisory Committee to recommend topics of education for populations experiencing health disparities in the health district. Historically, the 2RPHD has noted low vaccination rates. The 2RPHD Community Health Nurses are expanding access to needed vaccines throughout the health district, utilizing community partnerships to leverage vaccine locations, offering vaccine clinics from the mobile trailer, and distributing COVID-19 vaccine to health system partners.

# AREAS OF WORK

## Communicable Disease Control and Prevention

*Includes communicable disease epidemiology (disease outbreak management/response), tuberculosis (TB), immunizations, sexually transmitted infections, and surveillance (tracking and following up on reports and provider/school reports).*

2RPHD had **6,410** confirmed cases of **COVID-19**



2RPHD continued COVID-19 prevention efforts in the district. COVID-19 variants spread in 2RPHD, with 6,410 confirmed cases. Other communicable disease outbreaks in 2RPHD this year included norovirus and rotavirus.

An increase in Legionnaire's disease led to joint efforts with Nebraska DHHS (NE-DHHS), the UNMC Infection Control Assessment and Promotion Program (ICAP), and local officials to prevent bacteria growth in private water systems.

In expanding work, 2RPHD nurses are currently training to do sexually transmitted infection investigations.

## Chronic Disease Control and Prevention

*Includes asthma, cancer, cardiovascular disease, diabetes, obesity, tobacco control, and worksite wellness.*

Building on the success of 2RPHD's mobile vaccination unit, the department plans to implement chronic disease screenings using the same mobile strategy. During the fiscal year 2022-2023, 2RPHD plans to provide mobile testing for diabetes, cholesterol, and high blood pressure throughout the health district. Clinics conducted through our mobile unit will increase access to care for individuals who are not able to travel long distances to visit a provider.

## Access to and Linkage to Clinical Care

*Includes coordination of services between medical providers and providers of health-related social needs, oral health/dental services, and behavioral/mental health.*

2RPHD utilizes a combination of mobile community outreach clinics and community health workers (CHWs) to reduce barriers and increase access to immunizations and dental services. After individuals are seen in mobile community outreach clinics, CHWs provide referrals and resources to assist individuals who need additional healthcare navigation services. The 2RPHD collaborates with providers across the health district to provide or connect residents to needed services.



# AREAS OF WORK

## Environmental Health

*Includes radon, lead, emergency response, hazardous substances and sites, and Walkable Communities initiatives.*

The 2RPHD anticipates new expansion in environmental health services during autumn of 2022 that will positively impact the health district by allowing the 2RPHD to quickly identify and respond to communicable diseases and environmental threats.

The 2RPHD will be able to respond through disease investigation processes and environmental interventions.

## Injury Prevention

*Includes motor vehicle injuries, occupational injuries, senior fall prevention, substance abuse, car seat safety, binge drinking, and distracted driving.*

The 2RPHD's community health worker (CHW) travels throughout the health district providing car seat installation information and safety checks. The CHW also translates information into Spanish when these services are provided by other entities.

The 2RPHD educates on a wide range of safety topics through television, radio, and social media.

## Maternal and Child Health

*Includes Women, Infant, and Children (WIC), family planning, newborn screening, evidence-based home visitation, Early Preventative Screening, Diagnosis, and Treatment (EPSDT).*

The 2RPHD's Vaccines for Children (VFC) program provides regular childhood vaccinations to families who are uninsured or underinsured. In 2022, 2RPHD increased outreach and clinics offered. Each month, 2RPHD provides four clinics at the Kearney office and a minimum of two mobile clinics at other sites.

The 2RPHD's LifeSmiles Dental Program provides dental screenings for children during WIC clinic hours in Lexington, Nebraska. This partnership facilitates access to care, offering a variety of services in one stop.

# ADDITIONAL ACTIVITIES

Examples of additional public health activities that the Two Rivers Public Health Department performs to assure that the health and wellbeing of Nebraskans are protected and improved.

The Two Rivers Public Health Department (2RPHD) was accredited through the Public Health Accreditation Board (PHAB) in March of 2022. As an accredited public health department, 2RPHD emphasizes continuous improvement of services and performance. The 2RPHD ensures the public health needs of those we serve as are met as effectively as possible. Accreditation also enhances the health department's ability to seek, secure, and manage further funding opportunities.

The 2RPHD staff appeared on NTV, a local ABC affiliate news station, approximately 100 times during the 2021-2022 fiscal year to present a wide range of health topics. Each month, TRPHD staff appear on a radio program called Talk of the Town for both KUVR Radio, Holdrege and NRG Radio, Kearney. Counting appearances on individual radio stations, the 2RPHD staff presented health topics on local radio stations at least 24 times during the 2021-2022 fiscal year. Topics presented included: communicable diseases, physical health, preparedness activities, and highlighting the work of partners.





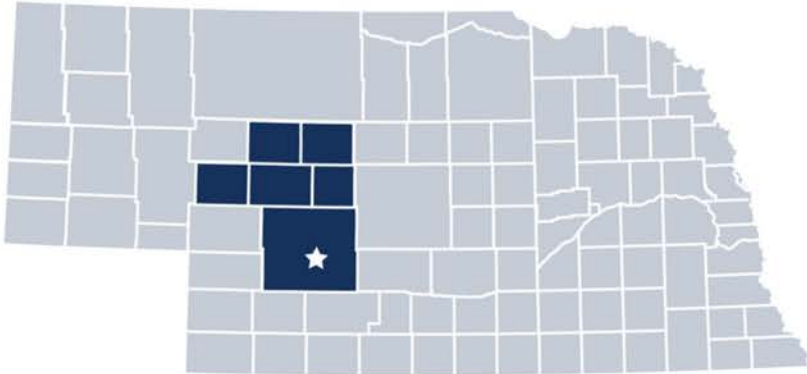
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# West Central District Health Department

Serving Arthur, Hooker, Lincoln, Logan, McPherson,  
and Thomas counties



# 2022

# ANNUAL REPORT







## SUPPORTING MENTAL HEALTH THROUGH THE TYLER VANDERHEIDEN MEMORIAL RUN

To help raise awareness for mental health and suicide prevention needs, the West Central District Health Department (WCDHD) hosted the Tyler Vanderheiden Memorial Run, which highlighted the intersection of mental health and physical health, as well as the power which running and walking have in healing. Nearly 400 people (including people from all 50 states, overseas and from 66 Nebraska counties) ran and walked in support of those who struggle with their mental health.

The 2022 Tyler Vanderheiden Memorial Run raised more than \$8,000 for Nebraska Game and Parks trails, which enabled the state to access up to \$32,000 in matching federal Recreation Trails Program funds. The \$40,000 in support to Nebraska Game and Parks advanced the trail improvement project at Platte River State Park, which aims to make the trail leading to Stone Creek Falls accessible to those with disabilities. Through this contribution, the event not only highlighted mental and physical health needs, but also helped to develop accessible trail infrastructure, supporting behaviors such as walking, running, and exploring nature. These supported behaviors can positively impact the mental and physical health of Nebraskans.



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## Community Health Assessment (CHA) / Community Health Improvement Plan (CHIP)

The WCDHD, in partnership with Great Plains Regional Health embarked on the CHA process in the fall of 2019. This process was abruptly suspended by the pandemic in early 2020. Prior to the disruption, planning meetings, focus groups, and priority group meetings were held, and over 40 individual interviews were conducted.

The CHA is used to develop a data report which helps WCDHD, the local hospital, and the healthcare system better understand health behaviors and outcomes in our community. The WCDHD finalized the CHA data report in 2022. This document creates a comprehensive picture of the district’s health status, factors contributing to higher health risk or poorer health outcomes, and community resources available to improve them.

### CHIP PRIORITIES:

- Increase access to mental and behavioral care
- Increase prevention, education, and recreational resources, to reduce the prevalence of chronic diseases, preventable conditions, readmissions, and high mortality rates
- Increase access to safe and affordable housing
- Improve access to medical and dental care



# AREAS OF WORK

## Communicable Disease Control and Prevention

*Includes communicable disease epidemiology (disease outbreak management/response), tuberculosis (TB), immunizations, sexually transmitted infections, and surveillance (tracking and following up on reports and provider/school reports).*

The WCDHD has seen a **100% increase** in **HPV vaccination** in the last year



Vaccination for human papillomavirus (HPV) can prevent several forms of cancer. Across Nebraska, HPV vaccination rates have increased by nearly 20%, from 46% in 2016 to 65% in 2021. Even more striking, the WCDHD has seen a 100% increase in HPV vaccination between 2021 and 2022. The WCDHD staff have seen both children and adults be more comfortable talking about HPV and the vaccine.

## Chronic Disease Control and Prevention

*Includes asthma, cancer, cardiovascular disease, diabetes, obesity, tobacco control, and worksite wellness.*

Through the ongoing COVID-19 response, the WCDHD trained and onboarded five medical facilities, one homeless shelter, and three school districts for BinaxNOW COVID-19 testing for use with students and staff. We also provided regular updates on CDC current guidance and provided information on other emerging health concerns. The WCDHD advertised and facilitated the distribution of over 5,600 vaccines in the 2021-2022 fiscal year.

The WCDHD hosted over 300 COVID-19 vaccine clinics including offsite clinics at long term care facilities, the Union Pacific Railroad Company and other businesses, court houses, schools, the hospital, local event centers, congregant living sites, drive through sites, and car-side clinics. We also provided vaccinations to homebound residents.

## Access to and Linkage to Clinical Care

*Includes coordination of services between medical providers and providers of health-related social needs, oral health/dental services, and behavioral/mental health.*

Between July 2021 and June 2022, WCDHD community health workers (CHWs) served over 1,600 minority community members with health coaching for individuals, interpretation assistance to medical providers and pharmacies, helping patients with financial forms and applications for healthcare coverage. Maria Lein was one of three CHWs who received the Community Health Worker Award from the State of Nebraska for demonstrating outstanding leadership, teamwork, and service to the community during the COVID-19 pandemic.

# AREAS OF WORK

## Environmental Health

*Includes radon, lead, emergency response, hazardous substances and sites, and Walkable Communities initiatives.*

The rate of **elevated blood lead levels** for children in the WCDHD area is **2X higher** than the State's



There is no safe level of lead for children. Last year, out of 86 children under the age of 6 in the WCDHD area who were tested, three had lab-confirmed cases of elevated blood lead levels (a rate of 3.5% compared to the state's 1.5%). The WCDHD supports lead screening by educating parents on lead poisoning prevention at community events and during routine WCDHD clinics. The WCDHD collaborates with area medical providers to encourage lead screenings of children, age 6 and younger. Each week, pediatric providers sent between five and 10 lead testing results to WCDHD during the 2022 fiscal year.

## Injury Prevention

*Includes motor vehicle injuries, occupational injuries, senior fall prevention, substance abuse, car seat safety, binge drinking, and distracted driving.*

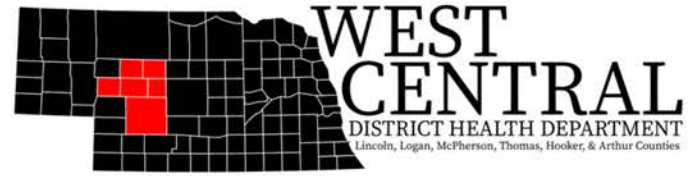
Prior to last year, bilingual water safety or swimming education had never been offered in the WCDHD. As a first step in addressing this public health concern, families within the Minority Health Initiative were invited to basic water safety classes. These were taught by an American Red Cross certified Water Safety Educator and with WCHD staff interpreting. The class content in both sessions had age-appropriate education for the 35 children attending as well as important safety information for 26 parents.

## Maternal and Child Health

*Includes Women, Infant, and Children (WIC), family planning, newborn screening, evidence-based home visitation, Early Preventative Screening, Diagnosis, and Treatment (EPSDT).*

WCDHD employees participated in a breastfeeding education training through Southeast Community College to help support and encourage breastfeeding within the district. The WCDHD has implemented strategies in the immunization clinics to encourage breastfeeding moms to breastfeed during and after infants' vaccinations. The WCDHD's goal is to increase the proportion of area infants who are breastfed up to age 1, to reach the Healthy People 2030 goal of 54.1%.





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