

# Panhandle **PUBLIC HEALTH** *Annual Report* District



Panhandle

Public Health District

# ***2018: A Year in Review***

- 3** Message from the Board President
- 4** Community Health Improvement
  - 5 Priority Areas
  - 6 Objectives
- 7** Panhandle Worksite Wellness Council
  - 8 Data
  - 9 Membership Impact on Employees
  - 10 Panhandle Safety & Wellness Conference
- 11** Dental Health Program
- 12** Heart Health
- 13** Local Opportunities Support Healthy Lifestyles
- 14** Walkable Communities
- 15** Good, Healthy Life
- 16** Healthy Families Nebraska Panhandle
- 17** Performance Management & Quality Improvement
- 18** Panhandle Prevention Coalition
  - 19 Vaping Epidemic
  - 20 Panhandle Opioid Response
  - 21 Suicide Prevention & Awareness
- 22** Cancer Prevention & Screening
- 23** Lead Poisoning
- 24** Panhandle Alert
- 25** Panhandle Region Medical Response System
- 26** Mosquito Bite Prevention & Disease Surveillance
- 27** Keep Your Home Safe from Radon
- 28** Children's Health
- 29** Financial Statement
- 30** The PPHD Team
- 31** Director's Notes

It has been my pleasure to serve on the Panhandle Public Health District Board of Health since 2004. As a school nurse, I appreciate public health's focus on prevention and community engagement for improved health. I was fortunate to attend the National Board of Health Conference this year where we learned that there are similar challenges for local health departments throughout the country.

What we have going for us in the Panhandle are the relationships and the spirit of collaboration to work together on tough issues like preventing underage drinking, obesity, and tobacco use.

There are twelve counties in our district, with each represented on the board by a county commissioner and a community-spirited citizen appointed by the commissioners. We also have a physician, a dentist, and a veterinarian. The board meets six times a year to carry out the functions of policy development, resource stewardship, legal authority, partner engagement, continuous improvement, and oversight.

We hope you enjoy reading the annual report highlighting our staff and the work they do with Panhandle communities. I would like to say, "Thank you to all of the staff and members of the board of health for their service."



Thank **you** for taking the time to look through our report. Please let us know if you have any questions or comments!

Marie Parker  
Board President



**Board of Health**  
**Banner County**

- Bob Gifford  
*County Commissioner*
- Marie Parker  
*Community-Spirited Citizen*

**Box Butte County**

- Susan Lore  
*County Commissioner*
- Carolyn Jones  
*Community-Spirited Citizen*

**Cheyenne County**

- Randy Miller  
*County Commissioner*
- Mandi Raffelson  
*Community-Spirited Citizen*

**Dawes County**

- Vic Rivera  
*County Commissioner*
- Karen Eisenbarth  
*Community-Spirited Citizen*

**Deuel County**

- Steve Fischer  
*County Commissioner*
- Judy Soper  
*Community-Spirited Citizen*

**Garden County**

- Dixann Krajewski  
*County Commissioner*
- Open  
*Community-Spirited Citizen*

**Grant County**

- Brian Brennemann  
*County Commissioner*
- Jon Werth  
*Community Spirited Citizen*

**Kimball County**

- Daria Anderson-Faden  
*County Commissioner*
- Kenneth Mars  
*Community-Spitited Citizen*

**Morrill County**

- Susanna Batterman  
*County Commissioner*
- Kay Anderson  
*Community-Spirited Citizen*

**Scotts Bluff County**

- Ken Meyer  
*County Commissioner*
- Anne Bowman  
*Community-Spirited Citizen*

**Sheridan County**

- Loren Paul  
*County Commissioner*
- Pat Wellnitz  
*Community-Spirited Citizen*

**Sioux County**

- Hal Downer  
*County Commissioner*
- Jackie Delatour  
*Community-Spirited Citizen*

**At Large**

- Dr. Timothy Narjes, MD, *Medical Doctor*
- Brandon Wilcox, DDS, *Dentist*
- Jon Werth, DVM, *Veterinarian*

# COMMUNITY HEALTH IMPROVEMENT



*The Panhandle Community Health Assessment (CHA) is completed every 3 years as a group effort among public health, healthcare, economic development, the Panhandle Partnership, and other Panhandle organizations.*

## The results of the CHA are used to make the CHIP **COMMUNITY HEALTH IMPROVEMENT PLAN**

### **PRIORITY AREAS**

- 1 Access to Care**
- 2 Aging Population**
- 3 Behavioral Health**  
*// mental health, substance abuse*
- 4 Chronic Disease**  
*// cancer, diabetes, heart disease, risk factors*
- 5 Early Childhood Care & Education**
- 6 Social Determinants of Health**  
*// transportation, poverty, housing, intolerance*



*Kelsey Irvine  
Community Health  
Planner*

*“The CHIP is a road map for regional community health improvement activities. It is so important to choose the priority areas based on the data collected during the assessment.”*

*-Kelsey Irvine, Community Health Planner*

## AGING POPULATION



The 65+ population will increase by nearly 7,000 people by 2030, making up 27% of the total population<sup>2</sup>

## BEHAVIORAL HEALTH



**19.9%**<sup>1</sup>

of Panhandle adults have been diagnosed with depression



**36.7%**<sup>3</sup>

of Panhandle 12th graders drank in the past 30 days

The Panhandle is designated a

**HIGH<sup>5</sup>  
BURDEN  
AREA**



for drug overdose deaths by Nebraska DHHS



**22.4%**<sup>3</sup>

of Panhandle 12th graders used tobacco in the last 30 days &

**18.2%**<sup>3</sup>

used an electronic vape in the last 30 days

## ACCESS TO CARE



**17.1%**<sup>1</sup> of Panhandle adults do not have health care coverage

**14.5%**<sup>1</sup> could not see a doctor over the past year due to cost



## CHRONIC DISEASE



The percentage of adults up to date on breast and cervical cancer screening is

**LOWER**  
than that of the state and continues to **DECREASE**<sup>1</sup>

**35.8%**<sup>1</sup>  
of Panhandle adults are obese



**37.5%**<sup>1</sup>  
of Panhandle adults eat fruit less than once per day

**33.4%**<sup>1</sup>  
of Panhandle adults have high blood pressure

**1 in 7**  
remain undiagnosed



**82.6%**<sup>1</sup>

of Panhandle adults do NOT meet aerobic physical activity and muscle strengthening recommendations

## EARLY CHILDHOOD CARE & EDUCATION



**4,391**<sup>4</sup>

Panhandle children under 5 years have both parents working outside of the home

There are only **3,390**<sup>5</sup> spots available in licensed child care facilities



See sources on page 6.

# SOCIAL DETERMINANTS OF HEALTH

are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.\*

\*Definition from Healthy People 2020

## Poverty was the **TOP CONCERN**

listed on the  
2017 Panhandle  
Community Health  
Survey

## **TRANSPORTATION & INTOLERANCE**

were consistently mentioned  
as issues across 24 Panhandle  
focus groups attended by 159  
people in 2017

# 41%

of Panhandle  
households  
that rent pay

# MORE THAN 30%

of their household income toward rent<sup>2</sup>

## WHAT ARE WE DOING?

Partners came together to choose objectives under each priority area and evidence-based strategies to address these objectives. A work group for each priority area meets quarterly to discuss progress and upcoming opportunities. An annual report is published each year to track our progress.

### The main objectives of the Community Health Improvement Plan are:

#### **Access to Care**

- Increase access to healthcare

#### **Aging Population**

- Decrease falls in older adults
- Increase use of local resources by older adults

#### **Behavioral Health**

- Improve mental health status
- Decrease drug, alcohol, and tobacco use

#### **Chronic Disease Prevention**

- Increase awareness of preventive cancer screening
- Decrease heart disease
- Decrease diabetes
- Improve physical activity and nutrition habits

#### **Early Childhood Care & Education**

- Increase number of licensed and high-quality early childcare providers

#### **Social Determinants of Health**

- Mitigate the negative impacts of poverty
- Improve the availability of quality housing
- Increase the use of public transportation
- Improve tolerance of LGBTQ+ and non-English language speakers

Find the entire CHIP document and associated work plan at [www.pphd.org](http://www.pphd.org)

<sup>1</sup>2017 Nebraska Behavioral Risk Factor Surveillance System

<sup>2</sup>U.S. Census Bureau

<sup>3</sup>2016 Nebraska Risk and Protective Factor Student Survey

<sup>4</sup>2016 Kids Count in Nebraska Annual Report

<sup>5</sup>Nebraska Department of Health & Human Services

# Panhandle Worksite Wellness Council is YOUR Organization's Greatest Resource for Worksite Wellness

## Annual Dues Structure

|                    |           |                  |
|--------------------|-----------|------------------|
| <b>1-5</b>         | Employees | <b>\$50</b>      |
|                    |           | <b>NEW LEVEL</b> |
| <b>6-10</b>        | Employees | <b>\$90</b>      |
| <b>11-25</b>       | Employees | <b>\$125</b>     |
| <b>26-50</b>       | Employees | <b>\$200</b>     |
| <b>21-100</b>      | Employees | <b>\$275</b>     |
| <b>101-249</b>     | Employees | <b>\$350</b>     |
| <b>250 &amp; ↑</b> | Employees | <b>\$415</b>     |

### Member Benefits

1. We provide **personal service** and **support**.
2. We understand the **specific needs of the Panhandle region**.
3. Every Panhandle employer, **regardless of size**, can benefit from membership.
4. We provide a **virtual toolbox** with resources members can use to advance their worksite wellness program.
5. As part of PPHD, the Council provides **evidenced-based programming, training, and resources**.

“Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it's the only thing that ever has.”  
-Margaret Mead

### Advisory Committee Members Name and Organization

---

Dan Newhoff, Chair  
Box Butte General Hospital

---

Kiersten Richards  
Cheyenne County Community Center

---

Diana Lecher  
Chadron Community Hospital

---

Kendra Dean  
Cirrus House, Inc.

---

Jennifer Sorenson  
Northwest Community Action Partnership

---

Susan Wiedeman  
Panhandle Coop

---

Terri Allen  
Western Nebraska Community College



**Jessica Davies**  
Assistant Director





90% of US health care expenses are for chronic and mental health conditions (CDC)

**MODIFIABLE RISK FACTORS FOR CHRONIC DISEASE ARE**

1)Physical Activity 2)Nutrition 3)Tobacco Use

**18.6%**

of Panhandle adults smoke cigarettes (2017)<sup>1</sup>

**35.8%**

of Panhandle adults are obese (2017)<sup>1</sup>

**82.6%**

of Panhandle adults do not meet aerobic physical activity and muscle strengthening recommendations (2017)<sup>1</sup>

**37.5%**

of Panhandle adults eat fruit less than once per day (2017)<sup>1</sup>

<sup>1</sup>Nebraska Behavioral Risk Factor Surveillance System

**Panhandle Worksite Wellness Council partners with employers to provide training, resources and guidance on developing effective worksite wellness programs.**



For every **\$1** spent on worksite wellness programs, employers can save up to **\$6**



Healthy worksites = Healthy communities  
**Worksite wellness policies reach more than only agency employees**

PWWC has 48 members with over 12,000 employees



**But impacts an estimated additional 14,400 family members of employees**

Worksite wellness policies collectively reach 30% of the Panhandle population.

**What can PWWC do for you?**



**95%**

of members have at least one policy in place regarding food served



**79%**

of members have at least one policy in place regarding support for breastfeeding



**62%**

of members have at least one policy in place to support physical activity among employees



**77%**

of members have at least one policy in place regarding tobacco use

Join Panhandle Worksite Wellness Council today to improve your employees' health and your business's bottom line.



# How Does The Worksite Wellness Council Impact Employee Well-being?

Just ask Jodi Lewellen and Karen Anderson of the Scottsbluff-Gering United Chamber of Commerce. The Chamber joined the Council this past year to take advantage of the resources offered. Lewellen and Anderson used the Spring 2018 Council-sponsored wellness challenge, The Great River Road Race, as the first springboard to improve their health.

Their small but mighty team committed to averaging 9,200 or more steps per day to reach the goal in the six-week timeframe. The commitment and accountability paid off big with a third place finish, winning \$250 toward their office wellness program. They wisely invested in sit-to-stand workstations.

But the race was just the beginning. They then set their sights on training for the Monument Half Marathon, walking the Scotts Bluff National Monument summit road three mornings a week and even some Saturdays. At the end of their training they had made 50 trips up the Monument for a total of 176.2 miles. They also used a number of area 5k walk/runs to prep for the September half marathon.

Lewellen relayed, "We were both very pleased with our times, this was my first half marathon and Karen's fourth. All this is because we decided to take The Great River Road Race Challenge."

The Council has a new \$50 membership level for businesses with 1-5 employees to better accommodate small businesses just like the Scottsbluff-Gering United Chamber of Commerce. This is an easy way for businesses to provide health and wellness support to their employees and ultimately impact their bottom line.



"All this is because we decided to take The Great River Road Race Challenge."

"We are always so proud to work with these organizations to create environments supporting employee health and well-being."  
 -Jessica Davies, Asst. Director



*Hemingford Telephone Company/  
 Mobius Communications*

**Businesses honored with the Governor's Wellness Award at the Panhandle Safety & Wellness Conference & Awards Luncheon in September 2018.**



*Regional West Health Services*

Here's a little taste of how these organizations are leading the charge:

- **Hemingford Telephone Company/Mobius Communications** reduced high risk blood pressure readings by half by offering self-measured blood pressure monitoring.
- **Regional West Health Services** implemented a walkable campus initiative, healthy eating/vending initiative, increased the number of employees and covered spouses that participated in health screenings, participated in National Walk @ Lunch Day, and had the grand opening of the YMCA at Regional West Fitness Center.
- **Cirrus House, Inc.** offered a healthy snack initiative and now begins each company meeting with five minutes of exercise.
- **Chadron Community Hospital** improved employee stress risk scores by 43% through policy and environmental changes.



*Chadron Community Hospital*

**2019 Conference coming in September!**



*Cirrus House, Inc.*



The Panhandle Worksite Wellness Council created the Leading Light Award in honor of Annie Loutzenhiser, "to honor her for her dedication and leadership to employee health and well-being in the Panhandle."

Annie joined the Council advisory committee in 2013, and sadly passed away in July 2018 at the young age of 44 after a courageous battle with cancer.

"Annie had her work family's health and quality of life as a priority. Even in her illness she lead the efforts in this area of the firm. Annie was and will always be our 'Leading Light.'"  
 -Vince Ryan, Shareholder, Garden, Loutzenhiser and Ryan, P.C.

# Dental Health Program

## Keeping Teeth Strong



Proudly part of  
Panhandle Public Health District

PPHD offers preventive dental services such as:

- Dental screenings,
- Fluoride varnish treatments,
- Dental sealants,
- Dental health education, and
- Referrals.

School-based dental health programs are an evidence-based way to provide access to preventive oral health services and education to improve the health status of underserved populations.

We partner with 12 school districts across the Panhandle along with Educational Service Unit #13 (ESU 13) Head Start to provide preventive dental services to children.

We also work with 4 long-term care facilities to provide preventive dental care to older adults. The dental screenings, cleanings, and referrals are important services that can improve the quality of life for older adults. Providing treatment in the nursing homes decreases barriers to accessing dental care.



**Kendra Lauruhn**  
Public Health Registered Dental Hygienist  
Dental Health Coordinator



Dental screenings are used to detect signs of dental disease.



Fluoride varnish treatment strengthens tooth enamel to help prevent cavities.



Dental sealants are placed on the back teeth by using white sealant material that flows into the pits and grooves. The sealant acts as a barrier, protecting enamel by sealing out plaque, bacteria, and food.



# Be heart healthy. Make control your goal!

## PPHD Aims to Prevent Diabetes and High Blood Pressure Through Evidence-Based Strategies

The main goal of this work is to connect patients with healthy lifestyle programs, and to share that information back with their medical provider. We do this by working with area hospitals, clinics, and pharmacies to create processes for referring patients to National Diabetes Prevention Program, health and wellness coaching, and other local healthy lifestyle programs.

We have worked hard to improve the connection between healthy lifestyle programs and medical providers. Support for this connection is included in the regional and hospital-level Community Health Improvement Plans (CHIPs). These strong partnerships, supported by consistent policies and processes, provide a way to connect patients with the best local resources to reduce chronic disease.

High blood pressure contributes to 1,000 deaths daily



1 of every 3 deaths is caused by heart disease and stroke

When your blood pressure is high you are:



**4 times** more likely to die from a stroke



**3 times** more likely to die from heart disease

**Check your blood pressure today!**



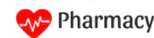
[www.cdc.gov/bloodpressure/facts.htm](http://www.cdc.gov/bloodpressure/facts.htm)

### Community Resources

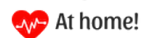
Where can I check my blood pressure locally?



Clinic



Pharmacy



At home!

How do I measure my blood pressure at home?

Connect with Panhandle Public Health District for a no-cost blood pressure monitor with health coaching. Or, you can buy a home blood pressure monitor at your local pharmacy.



Cheri Farris, CHES  
Community Health Educator  
(308) 220-8020

certified/wellcoach

Are there community programs that can help me control my blood pressure?

If you want to work on lifestyle change so that you can lower your blood pressure, ask your health care provider about opportunities through Panhandle Public Health District or contact us directly.



National DPP



Health & Wellness Coaching



Living Well



# Local Opportunities Support Healthy Lifestyles



**9** out of **10**  
people with prediabetes  
do not know they have it

**1** in **3**

PANHANDLE ADULTS  
have at least one  
chronic disease



1 in **2** deaths in  
the Panhandle  
are caused by  
**chronic disease**

**84**  
**million**

adults have prediabetes  
a risk factor for heart disease,  
stroke, and type 2 diabetes

Partners across the Panhandle are ready to lead you on the journey to a healthier you through evidence-based programs.

*National DPP* continues to see success and has helped over 1,000 Panhandle residents lose over 9,866 pounds! Join this year-long program to reduce your risk of developing type 2 diabetes.

Making modest lifestyle changes like eating healthier, being more active, and managing stress improve your health, and may help you avoid having to manage type 2 diabetes for the rest of your life.

*Living Well* is a new program in the Panhandle. It is made up of 6 interactive workshops that help people learn real-life skills for living a full, healthy life. Participants learn how to take small steps toward positive changes and healthier living.

The program is suitable for people who live with long-term health conditions or for those caring for someone with a long-term condition.

*Health and Wellness Coaching* provides support for a healthier lifestyle and assistance with goal-setting to help you succeed.

*“The skills you develop  
will empower you to  
make a change for life.”*



**Cheri Farris**  
Community Health  
Educator

# *Walkable Communities Take Focus*

Picture the following:

- A mom pushing a double stroller with another child riding a bike next to her on a busy street
- An elderly man walking to the post office in the street because trash cans are blocking the sidewalk
- A lady riding to work on her bike because it's the only transportation she has
- A middle-aged woman in an electric wheelchair shopping in the downtown stores
- A visually impaired high school student crossing one of the busiest community intersections

All are real-life examples of walkability challenges heard by the Tri-City Active Living Advisory Committee (ALAC) in Scottsbluff, Gering, and Terrytown. The ALAC is made through a resolution from the three city councils and is assisted by PPHD. The group meets monthly and provides input to several city departments and elected officials about improving the existing community design and future design plans to make streets safer and better for all users to get around.

Recent walk audits provided input to help the Scottsbluff Public Works Department refine the new Accessible Pedestrian Signals. Disability Rights Nebraska and the Nebraska Commission for the Blind and Visually Impaired—both active members of the coalition—organized a group of residents to perform the walk audits.



These audits are part of the Tri-City's efforts to improve sidewalks and intersections, calm traffic, and expand the network of bike routes and walking trails. The ALAC is a resource and liaison among all groups seeking to provide input and have representation.

Their goals include:

- Safe active transportation on all travel ways
- Creating collaborative community ownership
- Complete streets: Planning for a safer, more connected, healthier community

***The Tri-City ALAC serves as a model for sustainability in communities looking to implement strategies from the Surgeon General's "Call to Action to Promote Walking & Walkable Communities."***



## **Good, Healthy Life: Worksite Wellness and Community Partnerships**

The work of PPHD and area partners was featured in a 30-minute episode which aired on NETV in November and can also be viewed online. [http://www.pphd.org/Pages/published\\_work.htm](http://www.pphd.org/Pages/published_work.htm)



The segment highlighted how the PPHD uniquely engages and partners with area hospitals and communities on community health improvement planning and implementation to increase and enhance active living opportunities.

- Regional West Health Services featured opportunities for employees to engage and maintain a physically active lifestyle.
- Box Butte General Hospital featured their employee health and wellness efforts, National Diabetes Prevention Program coordination, and their Rehab and Wellness Center.
- The Tri-City Active Living Advisory Committee was highlighted for their community work to make the Tri-Cities safer to walk and bike.

### **Kimball Working to Create Safer, More Accessible Opportunities For Walking and Biking**

Creating access to exercise opportunities through trail access, safer streets and sidewalk conditions, and deterring speeding in residential areas are key steps to making Kimball more walkable and bikeable.

"We'd like to see our citizens improve their health, fitness, and quality of life through daily physical activity," said Kerry Ferguson, KHS Director of Community Relations. "Active living is a key strategy Kimball Health Services has been committed to through their hospital Community Health Improvement Plan."

This work aligns with the Kimball Area Foundation Fund's vision, "The Trail to a Better Community." A community trail was added in 2018 providing a beautiful, traffic-free area for walking, running, and biking. The committee looks forward to trail upgrades in 2019.

Top priorities from a recent assessment of the ability to walk and bike around the community show the need to add sidewalks, trails, and bikes lanes. The Kimball Active Living Advisory Committee will put strategies in place for the community to benefit for years to come.



**Support during pregnancy and as your child grows**

“I am developing better parenting skills so that my children will have a greater feeling of self-worth.” -Nebraska Panhandle Client

**Guidance through this confusing time to find resources**

“My parent coach listens to me; she helped me through a difficult pregnancy and taught me that I can support my family in a better way—both financially and emotionally.”  
 -Nebraska Panhandle Client

***Through consistent home visitation, parent coaches nurture the relationship between parents and child.***

**Home visits focus on:**

- Building healthy brains
- Reading the cues of children
- Understanding child development
- Learning about secure attachment

**Who we serve:**

- We accept clients from prenatal to three months post-natal
- Service is offered until the child reaches 3 years of age
- All types of families, English and Spanish speaking, mothers and fathers included



For more information, call us at 877-218-2490, or email one of our staff below



Linda Anslie  
 lmainslie@pphd.org



Alma Alarcon  
 aalarcon@pphd.org



Myrna Hernandez  
 mhernandez@pphd.org



Jennifer Buxbaum  
 jbuxbaum@pphd.org



Sarah Bernhardt  
 sbernhardt@pphd.org  
 Program Supervisor, Manager

~~~~~ Parent Coaches | Intake Specialists ~~~~~

Promoting child well-being by helping families with the building blocks of attachment.

Free service in Scotts Bluff, Morrill, and Box Butte counties.



## All parents wish children came with instructions.



It often feels like we're just making it up as we go along, never sure if we're getting it right. You're not alone. We've all felt that way.

**Parenting coaches are trained to help.** All coaches are also facilitators of Circle of Security.

**Circle of Security® -Parenting™** is a parenting program based on years of research about how to build a strong relationship with your child. It is designed to help you learn how to respond to your child's needs in a way that enhances your connection with him or her.

It helps parents give their children a feeling of security and confidence so they can explore, learn, grow, and build positive relationships; all essential skills for life-long success.

## PPHD USES PERFORMANCE MANAGEMENT & QUALITY IMPROVEMENT TO DRIVE OUR WORK

### HOW DOES PPHD USE DATA?



It involves:

- All employees
- Measuring performance over time and making improvements
- Setting performance objectives based on organization's mission and goals

### WHY DO PERFORMANCE MANAGEMENT?



- Establish performance standards
- Follow that path by tracking performance measures
- Stay focused on reporting progress
- Keep getting better through Quality Improvement

### WHAT IS QUALITY IMPROVEMENT?

A continuous and ongoing effort to achieve measurable improvements in the efficiency, effectiveness, performance, accountability, outcomes, and other indicators of quality in services or processes which achieve equity and improve the health of the community



### HOW DOES PPHD APPROACH QI?

- PLAN: Making a plan to test the change
- DO: Carrying out the test
- STUDY: Observing and learning from the consequences
- ACT: Determining what changes should be made to the test

**GOAL OF PERFORMANCE MANAGEMENT & QI:** To complete activities that are responsive to community needs and ultimately improve population health.



# PANHANDLE PREVENTION COALITION

**Vision: Healthy and Safe People Across the Lifespan**

**Mission: Enhance and Sustain a Collaborative Prevention System**



***The Panhandle Prevention Coalition is made up of a group of coalitions united to reduce the impact of substance use and abuse while promoting and supporting mental and emotional health for all in the Panhandle.***

We do this by:

1. Seeking policy change at the local and state levels to reduce youth access to alcohol, tobacco, and other substances.
2. Collaborating with law enforcement to facilitate, fund, and standardize compliance checks, beverage server training, and sobriety checks.
3. Educating and generating awareness about the dangers of substance use and abuse.
4. Ongoing collaboration between practitioners, experts, and leaders across the continuum of care
5. Promoting the prevention work that is happening through a quarterly newsletter and partnering with the media.

***Together, we are united for change.***

## **Prevention Efforts Sustained Through Braided Funding From:**

- **Region 1 Substance Abuse Prevention Block Grant**
- **Tobacco Free Nebraska**
- **Youth Suicide Prevention**
- **Youth Services (Juvenile Justice/Crime Commission)**
- **Opioid State Targeted Response**
- **Partnership for Success**



We are thrilled to welcome Chelsy Schneringer to the PPHD team. One of her roles will be the Panhandle Prevention Coalition Coordinator. She brings a vast knowledge base to this position from her previous role as Health Educator in Utah. There she worked in the field of Health Promotion, including Prescription Drug Overdose, Tobacco Programs, Personal Responsibility Education, and Community Prevention Coalition Coordination. Thank you to Cheri Farris for moving the work forward over the past year.



In the past year alone,  
**vaping** among  
**high schoolers** has increased

CENTER FOR  
TOBACCO  
PRODUCTS



**78%**

Many teens have  
**dangerous misperceptions**  
that lead them to believe that vaping is harmless.

**Common myths**  
believed about vaping, along with the facts.

**“It’s just  
flavoring.”**

Vapes get their flavors from chemicals. While these flavorings are safe to eat in food, they’re not safe to inhale. Inhaling flavor chemicals can harm your lungs.<sup>11</sup>

Want an example?

Some buttery-flavored vapes like caramel contain diacetyl and acetoin. Inhaling diacetyl has been linked to popcorn lung, a lung disease that doesn’t have a cure.<sup>11</sup>

Some vapes that claim they are nicotine-free are not.<sup>8,17-22</sup>

**“My vape says  
it’s nicotine-free.  
There’s no way  
I’ll become  
addicted.”**

Vaping delivers nicotine to the brain in as little as 10 seconds.<sup>14,15</sup>

A teen’s brain is still developing, making it more vulnerable to nicotine addiction.<sup>16</sup>

**“It’s just  
water  
vapor.”**

**But  
it’s  
not.**

Vaping can expose the user’s lungs to harmful chemicals like formaldehyde, diacetyl and acrolein, as well as toxic metal particles like nickel, tin and lead.<sup>4,8-10,11-13</sup>

**“I don’t have an  
addictive personality  
—I won’t get hooked  
on vapes.”**

**“Nicotine  
isn’t that bad  
for me.”**

Nicotine exposure during the teen years can disrupt normal brain development. It can have long-lasting effects, like increased impulsivity and mood disorders.<sup>23-25</sup>

**“Just because  
I vape doesn’t mean  
I’m going to smoke  
cigarettes.”**

Research shows teens who vape are more likely to try smoking cigarettes.<sup>26</sup>

How much **do you know** about the **epidemic?**

### ***Surgeon General’s Declares Advisory on E-cigarette Use Among Youth***

“I, Surgeon General of the United States Public Health Service, VADM Jerome Adams, am emphasizing the importance of protecting our children from a lifetime of nicotine addiction and associated health risks by immediately addressing the epidemic of youth e-cigarette use. The recent surge in e-cigarette use among youth, which has been fueled by new types of e-cigarettes that have recently entered the market, is a cause for great concern. We must take action now to protect the health of our nation’s young people.”

KNOW THE RISKS. TAKE ACTION. PROTECT OUR KIDS.

# PANHANDLE RESPONSE TO THE OPIOID EPIDEMIC

Opioid abuse is a **national crisis** and a **complex public health issue** that requires more than a single simple solution. After the Panhandle was identified by DHHS as 1 of 5 high burden areas in Nebraska, PPHD got to work finding strategies to reduce opioid use and abuse.

## 1 STRATEGY | Increase safe storage or prescription medication

38% of childhood poisonings involving grandparents medication<sup>1</sup>  
1 in 5 teens admits to abusing pain pills

0  
2017



1,330  
2018

Lock Box Distribution



Developing Partnerships  
Developing Webpages  
Social Media Reach  
News Releases  
Health Fairs

## Raise awareness of prescription drug use and abuse

Media promotion  
Community events  
Include opioid work in prevention coalition

STRATEGY 2

3 STRATEGY

## Increase number of first responders that carry Naloxone

Law Enforcement | EMS | Behavioral Health  
Access >> Training >> Standing Order >> Order >> Carry

0 Available  
371 Requested

482 Available

120 Carried

2018 >> July - Aug. - Sept. - Oct. - Nov. - Dec



## Increase safe disposal of expired or unused prescription drugs

6  
2017



17  
2018

Every Community has a drop off location  
Law Enforcement | Pharmacy

Everyday is Drug Takeback Day in the Panhandle

STRATEGY 4



5 STRATEGY

## Increase clinical policies and practices to address opioid use and abuse

Behavioral Integration in Medical Assessments  
Medical Assisted Treatment Planning  
Nebraska Pain Management Guidance Document Promotion

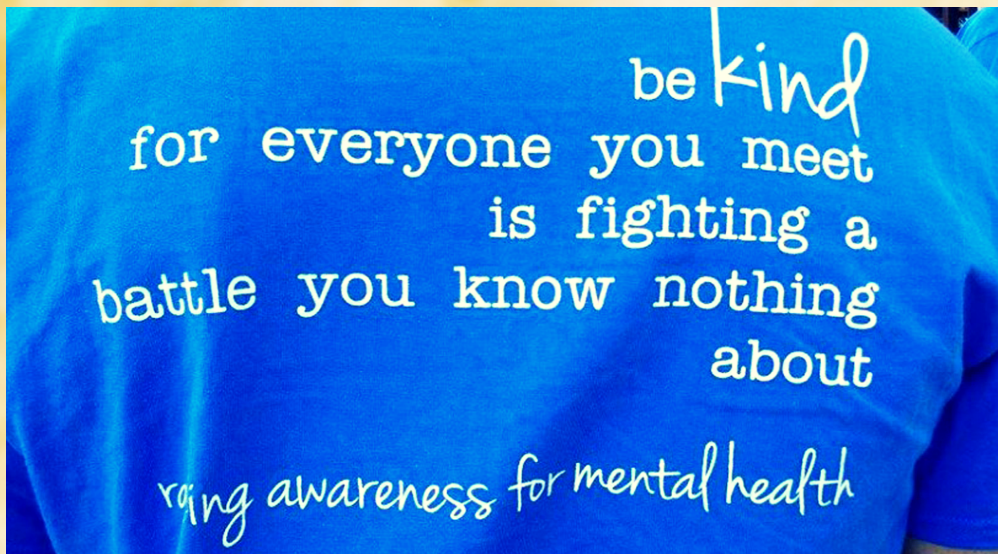
89%  
of hospitals  
participating  
in assessment

**"The goal is to save lives, decrease opioid use disorder, and help residents in the Panhandle achieve lifelong recovery from addiction."**



**Tabi Prochazka**  
Health Promotions Coordinator

1. [www.nebraskameds.org](http://www.nebraskameds.org)  
Regional Data collected by PPHD.



## JOIN THE FIGHT AGAINST SUICIDE

PPHD works with Region 1 Behavioral Health Authority to raise awareness and help residents, support suicide survivors, and reduce the number of suicides across the Panhandle. We do this in several ways:

1. Build support for suicide survivors through the development of Local Outreach to Suicide Survivors (LOSS) teams and support for Out of Darkness Walks.
2. Raise awareness of the facts around and warning signs of suicide, and the availability of no cost trainings such as QPR (Question. Persuade. Refer.).
3. Increase the proportion of primary care physician office visits where adults are screened for depression.
4. Donate a gun safe to Ducks Unlimited and Pheasants Forever chapters to raise awareness of the steps we can take to prevent suicide. Safely storing firearms is the number 1 way to help prevent misuse, accidents, and thefts.

Contact with a LOSS team **drastically reduces** the time before individuals surviving a suicide seek out additional supports from 4.5 years to 45 days, on average.

## JOIN THE EFFORTS ACROSS THE PANHANDLE



Question. | Persuade. | Refer.

Three steps anyone can learn to help prevent suicide.

Just like CPR, QPR is an emergency response to someone in crisis and can save lives. QPR is the most widely taught Gatekeeper training in the world. Trainings are offered at no cost across the Panhandle.

**CRISIS TEXT LINE |**

**Text HELLO to 741741**  
Free, 24/7, Confidential

Contact Tabi to get involved locally.

# How to Prevent Cancer or Find it Early



## SCREENING TESTS

Regular screenings may find breast, cervical, and colorectal (colon) cancers early, when treatment is likely to work best. Lung cancer screening is recommended for some people who are at high risk.



## VACCINES

Vaccines (shots) also help lower cancer risk. The human papillomavirus (HPV) vaccine helps prevent most cervical cancers and several other kinds of cancer. The hepatitis B vaccine can help lower liver cancer risk.



## HEALTHY CHOICES

You can reduce your risk of getting cancer by making healthy choices like keeping a healthy weight, avoiding tobacco, limiting the amount of alcohol you drink, and protecting your skin.



**1-800-QUIT-NOW (784-8669)**

**1-855-DÉJELO-YA (335-3569)**

## Confused about when to screen?

### BREAST<sup>1</sup>

- Women 40 to 44 have the option to start screening with a mammogram every year.
- Women 45 to 54 should get mammograms every year.
- Women 55 and older can switch to a mammogram every other year, or they can choose to continue yearly mammograms.

### CERVICAL<sup>2</sup>

- Women 21 to 29: Every 3 years with Pap testing, regardless of age of onset of sexual activity or other risk factors.
- Women 30 to 65: Every 5 years with Pap + HPV test OR every 3 years with cytology.

### COLORECTAL<sup>2</sup>

- Men and Women age 50 to 75
- Yearly when testing with a stool test kit from the comfort of your home.
- Colonoscopy every 10 years

FREE Colon Cancer Screening Kit

Did You Know?

Over 900 Nebraskans are diagnosed annually. Don't get left behind. Begin screening at age 50.



**Uninsured? Need help scheduling your appointment?**

Contact Cheri  
308-220-8020  
cfarris@pphd.org

1. American Heart Association 2. Center for Disease Control and Prevention

# LEAD POISONING

There is no safe blood lead level in the body. Children are at the highest risk of lead poisoning. Blood lead tests are recommended for children at 12- and 24-months. PPHD provides education to families of children with high blood levels about lead hazards in their environments. We also teach them how to help their child and reduce lead in the body.

## LEAD...

- Is a naturally occurring element
- Must be ingested or inhaled to cause lead poisoning

## LEAD POISONING...

- Can damage the brain, nervous system, and other parts of the body
- Can cause delayed growth and development, learning disabilities, decreased intelligence, and hearing damage
- Can lead to behavioral problems
- In extreme cases, can lead to severe coma and death
- Increases risk for premature and low-birth-weight newborns in pregnant women

## IMPORTANT FACTS...

- Lead exposure can be related to cultural practices, like traditional medicines such as greta, azarcon, or pay-loo-ah, as well as imported ceramic dishes, spices and candies.
- Many homes built pre-1978 contain lead paint on both interior and exterior walls.
- Lead exposure can happen during work or hobbies, in jobs such as construction work, manufacturing, automotive work, work with firearms, and making leaded fishing sinkers.

**CHILDREN 6  
AND UNDER  
ARE MOST  
VULNERABLE**



**ALL PEOPLE ARE  
VULNERABLE IF THEY:**



Live in or visit a house built pre-1978 or has been renovated or remodeled within the last year

Have a sibling or playmate with lead poisoning



Live with a family that uses home remedies or cultural practices that may contain lead

Are in a special population group, such as foreign adoptees, refugees, migrants, immigrants, and foster care





RECEIVE ALERTS



TEXT | CALL | EMAIL

EMERGENCY NOTIFICATION SYSTEM

# PANHANDLE ALERT

PPHD and Emergency Management Regions 21, 22, and 23 are registering the public with Panhandle Alert. **Panhandle Alert is the official emergency notification system of the Nebraska Panhandle.** Participants receive emergency notifications and can let responders know their health care needs in case of an emergency.

Promotion of Panhandle Alert began in early 2018. Promotion efforts focus on rural, aging, and low-income peoples, which may be difficult to reach in emergency situations. Consistent messaging through brochures, news releases, social media, and direct mailing have proven to be successful. Over 1,700 residents have joined Panhandle Alert so far!

Many area hospitals use Panhandle Alert for emergency preparedness activities, such as monthly tests, drills, and exercises, and in day-to-day work such as trauma alerts, filling shifts, and employee recall. Hospitals find that Panhandle Alert makes it easier to communicate to staff when there are emergencies.

We are excited for the partnership between public health and emergency management to continue in 2019, as more people sign up for Panhandle Alert.

## Enroll Today

It only takes 3 minutes.



What if I need help?  
You can call us at  
(308) 262-2217

[www.panhandlealert.org](http://www.panhandlealert.org)

**"Public Health has been the shepherd for this partnership, developing and hosting our webpage and pulling us together to form one regional message."**

*Tim Newman,  
Region 22 EM Director*





# Panhandle Region Medical Response System

Recognized for  
Thinking Outside the Box

Anything can happen when you think outside the "box". PPHD teamed up with the Center for Preparedness Education to do just that, and was recognized in their magazine, "UNCENTERED: Spring Edition."

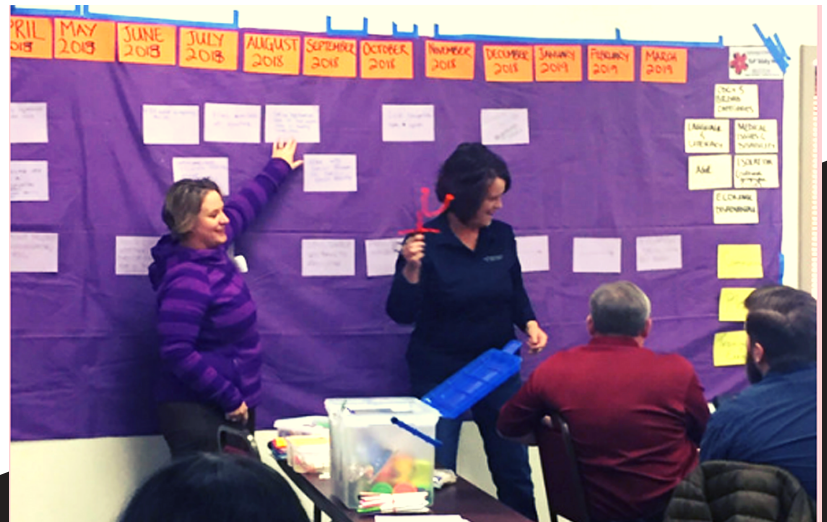


The goal of the workshop was to update the functional and access needs plan within the Panhandle Region Medical Response System. But that sounded like just another meeting, and a boring one at that!

So, we used the Do-Tank process to create momentum and energy in the Panhandle. Harnessing that energy through hands-on learning, we created plan updates, an all-hazards go-kit, and future training ideas that participants of PRMRS could get behind!

Attendees heard firsthand from Linda Redfern (Region 1 Office of Human Development) who spoke to the needs and resources in the area, and by Melody Leisy (PRMRS Coordinator) who shared real-time data from across the Panhandle. The group then began creating!

The pictures show a participant using everyday tools to help create a tornado go-kit and the use of the sticky wall to generate planning ideas.



Attendee Feedback:

*"The Do-Tank exercise was fabulous."*



*"Good Job Mel!"*



**Melody Leisy**  
PRMRS Coordinator

## **PRMRS Mission**

*To create and maintain a system for responding to public health emergencies by enhancing existing local planning efforts for resources, expertise, communication and personnel, in order to increase the capabilities to manage a large number of casualties and/or disruption of service.*

# Mosquito Bite Prevention

Protect yourself and your family from mosquito bites by following these simple tips:



## 1. Use Insect Repellent

Use an Environmental Protection Agency (EPA) registered insect repellent with the following active ingredients:  
DEET | Picardin | IR3535  
Oil of lemon | Eucalyptus

## 2. Mosquito-Proof Your Home

Use or fix screens on windows and doors and use air conditioning when available. Empty, turn over, or throw out items that can hold water such as tires, bird baths, and trash cans.



## 3. Use Caution Outdoors

Avoid going out at dawn and dusk when mosquitoes are most active. Wear long pants and shirts if hiking in areas of tall grass.



There were West Nile virus positive mosquitoes found across the Panhandle in 2018. We urge you to follow these simple steps to protect yourself and your family.



*Melissa Haas  
Environmental  
Health Coordinator*

# Disease Surveillance

Our disease surveillance staff work with local hospitals, labs, and Nebraska DHHS Epidemiology to conduct surveillance of reportable diseases, detect outbreaks, and help prevent and control the spread of disease in the Panhandle.

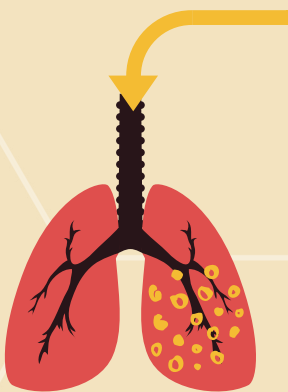
## 2018 Disease Report

| PPHD                                                  | 2018       | 2017       |
|-------------------------------------------------------|------------|------------|
| Anaplasma phagocytophilum                             | 0          | 1          |
| Animal Exposure (bite or nonbite)                     | 3          | 8          |
| Aseptic meningitis                                    | 0          | 8          |
| Campylobacteriosis                                    | 43         | 33         |
| Cryptosporidiosis                                     | 9          | 7          |
| Cyclosporiasis                                        | 1          | 0          |
| Enteropathogenic E. coli                              | 61         | -          |
| E. coli (STEC) gastroenteritis                        | 18         | -          |
| Giardiasis                                            | 9          | 7          |
| Group A Streptococcus, invasive                       | 0          | 4          |
| Group B Streptococcus, invasive                       | 2          | 0          |
| Haemophilus influenza, invasive                       | 1          | 1          |
| Hantavirus pulmonary syndrome                         | 0          | 1          |
| Hepatitis A, acute                                    | 2          | 0          |
| Hepatitis B, chronic (probable and confirmed)         | 3          | 7          |
| Hepatitis B, acute                                    | 1          | 0          |
| Hepatitis C, chronic or resolved                      | 39         | 44         |
| Hepatitis C, acute                                    | 1          | 2          |
| Hepatitis E, acute                                    | 1          | 0          |
| Histoplasmosis                                        | 1          | 0          |
| Lead Poisoning (child/Adult)                          | 18/1       | 13         |
| Legionellosis                                         | 3          | 2          |
| Lyme Disease (confirmed, probable)                    | 1          | 1          |
| Mumps                                                 | 1          | 1          |
| Noroviruses                                           | 5          | 5          |
| Pertussis (confirmed, probable, suspect)              | 1          | 3          |
| Q Fever, acute                                        | 0          | 1          |
| Q Fever, chronic                                      | 1          | 0          |
| Rabies, animal                                        | 2          | 1          |
| Rocky Mountain Spotted Fever (confirmed and probable) | 2          | 1          |
| Salmonellosis (confirmed, probable, suspect)          | 19         | 17         |
| Shingellosis                                          | 1          | 2          |
| Streptococcus pneumonia, invasive disease (IPD)       | 3          | 3          |
| Active Tuberculosis                                   | 0          | 1          |
| Streptococcal toxic-shock syndrome                    | 1          | 0          |
| Varicella (chickenpox)                                | 5          | 2          |
| West Nile virus disease, neuroinvasive                | 3          | 5          |
| West Nile virus disease, nonneuroinvasive             | 5          | 12         |
| Yersiniosis (non Plague)                              | 2          | 5          |
| <b>Total confirmed, probable, and suspect cases</b>   | <b>269</b> | <b>206</b> |



# Keep Your Home Safe from Radon

- 1 in every 2 homes in Nebraska has elevated radon levels.
- The average radon level in a Nebraska home is 5.6 pCi/L. A level of 4.0 pCi/L is considered hazardous.
- Radon is found in all counties in the Panhandle.



- Radon is inhaled through the lungs.
- Radon decays in the lungs and releases energy.
- Damage to tissue over time can cause lung cancer.

## Request a FREE radon test kit today!\*

Mail this coupon to Panhandle Public Health District, PO Box 337, Hemingford, NE 69348, call (308)487-3600 ext. 108, or email [mhaas@pphd.org](mailto:mhaas@pphd.org) to get your free kit.

Name: \_\_\_\_\_

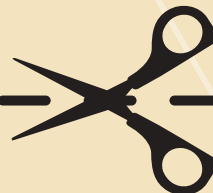
Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Age: \_\_\_\_\_

*By accepting this free kit, I give my permission for results to be reported to myself and PPHD.*

Signature: \_\_\_\_\_



\*Must reside within the Nebraska Panhandle to receive kit.

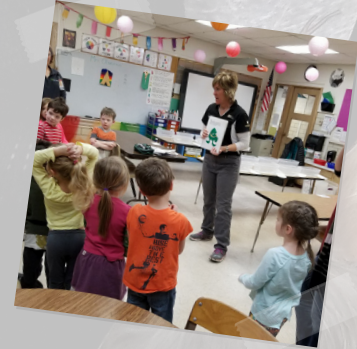
# Children's Health

## Kids Fitness and Nutrition Day...

Is an annual event for area third-graders to learn about fitness and nutrition. Activities at the events include both noncompetitive physical activity and nutrition stations. In 2018, there were:



4 Kids Fitness and Nutrition Days  
29 schools participated  
846 children participated



## Dental Days...

Were held in June for the fifteenth year in a row. Students from the University of Nebraska Medical Center (UNMC) College of Dentistry and Dental Hygiene made the trip to the Panhandle to be a part of Dental Days.



About 200 children received dental care in 3 communities with the help of:

46 students studying dentistry and dental hygiene,  
6 dental residents, and  
6 faculty members

from the UNMC College of Dentistry and Dental Hygiene.

## Scrub Club...

Is aimed at preschool and kindergartners to teach the importance of proper handwashing. This simple act learned at a young age can prevent many illnesses, from the common cold to serious staph infections.



- Wet your hands with warm water
- Lather with a squirt of soap
- Scrub tops, bottoms, in between fingers and fingernails
- Rinse all the soap off
- Dry your hands with a towel

## Pool Cool...

Promotes sun safety through policies at swimming pools to establish sun protection standards. Pool staff receive training to teach and promote sun safety, and are encouraged to model sun safe practices.



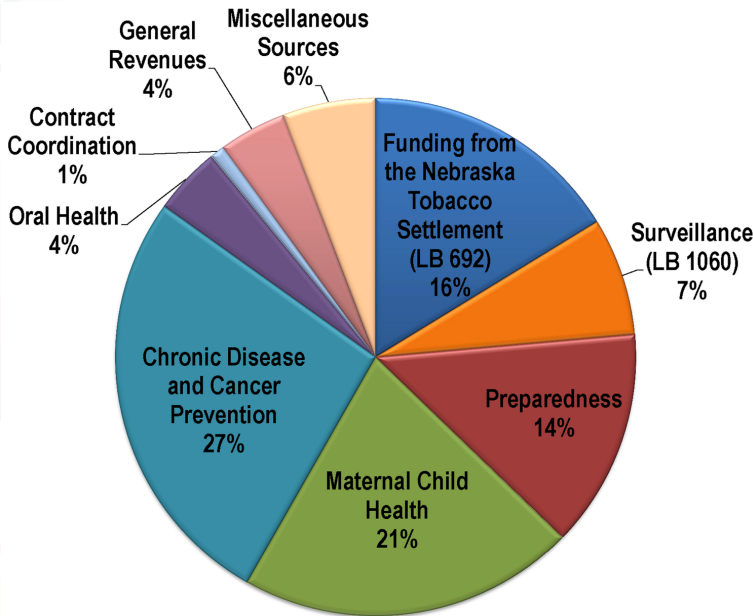
*Janelle Visser  
Health Educator*

# Financial Statement



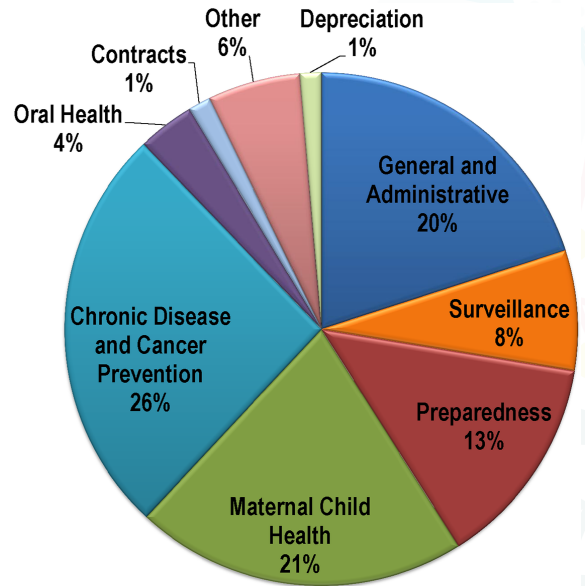
Where does the money come from?

## Program Revenues:

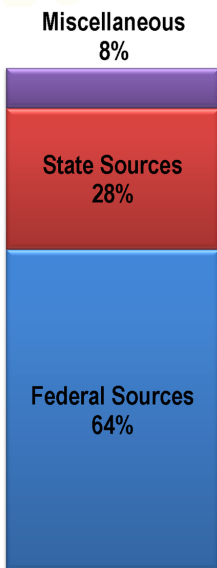


Where does the money go?

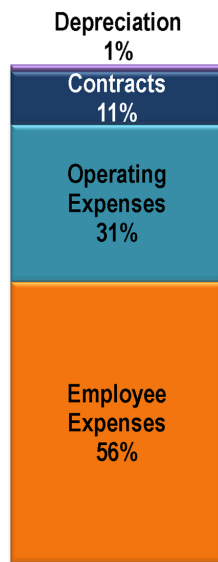
## Program Expenses:



## Revenues by Source:



## Expenses by Type:



## Balance Sheet

As of June 30th, 2018

### Assets

|                                                |                  |
|------------------------------------------------|------------------|
| Cash and equivalents                           | \$91,485         |
| Accounts receivable                            | \$387,086        |
| Inventory                                      | \$22,094         |
| Certificate of deposit                         | \$125,497        |
| Property and equipment,<br>net of depreciation | \$68,920         |
| Deferred outflows of resources<br>for pensions | \$50,097         |
| Net pension asset                              | <u>\$138,585</u> |
| <b>Total Assets</b>                            | <b>\$883,764</b> |

### Liabilities

|                                               |                  |
|-----------------------------------------------|------------------|
| Accounts payable                              | \$40,699         |
| Accrued payroll liabilities                   | \$55,540         |
| Deferred inflows of resources<br>for pensions | <u>\$117,249</u> |
| <b>Total Liabilities</b>                      | <b>\$213,488</b> |

### Net Position

|                            |                  |
|----------------------------|------------------|
| Invested in capital assets | \$68,920         |
| Unrestricted               | <u>\$601,356</u> |
| <b>Total Net Position</b>  | <b>\$670,276</b> |

**Total Operating Revenues**  
**Total Operating Expenses**

**\$1,819,487**  
**\$1,823,381**



**Sara Williamson**  
CFO, Accreditation  
Coordinator



**Erin Sorensen**  
Office Manager,  
HR Coordinator



**THE PPHD TEAM**

Kim Engel, MBA, Director 308-760-2415

**Hemingford Office**

P.O. Box 337  
 808 Box Butte Avenue  
 Hemingford, NE 69348  
 Phone 308-487-3600  
 Toll Free 866-701-7173  
 Fax 308-487-3682

Jessica Davies, *Assistant Health Director*  
 Melissa Haas, *Environmental Health Coordinator, Worksite Wellness Assistant*  
 Tabi Prochazka, *Health Promotions Coordinator*  
 Chelsy Schneringer, CHES, *Health Educator*  
 Erin Sorensen, *Office Manager, HR Coordinator*  
 Janelle Visser, *Health Educator*  
 Sara Williamson, *Chief Financial Officer, Accreditation Coordinator*

**Scottsbluff Office**

1930 East 20th Place, Suite 400  
 Scottsbluff, NE 69361  
 Phone 308-633-2866  
 Toll free 877-218-2490  
 Fax 308-633-2874

Alma Alarcon, *Parenting Coach and Intake Specialist*  
 Linda Ainslie, *Parenting Coach and Intake Specialist*  
 Sarah Bernhardt, MA, LIMHP, LPC, *Healthy Families Nebraska Panhandle Manager, Supervisor*  
 Jennifer Buxbaum, *Parenting Coach and Intake Specialist*  
 Myrna Hernandez, *Parenting Coach and Intake Specialist*  
 Kelsey Irvine, MPH, CPH, *Community Health Planner, Performance Management Coordinator*  
 Kendra Lauruhn, RDH, *Dental Health Coordinator and Disease Surveillance Coordinator*

**Bridgeport Office**

P.O. Box 1115  
 122 East 10th  
 Bridgeport, NE 69336  
 Phone 308-262-2217  
 Toll Free 855-227-2217  
 Fax 308-262-1317

Cheri Farris, CHES, *Community Health Educator*  
 Melody Leisy, RN, *PRMRS Coordinator, Public Health Nurse*



Local health departments act as communities' Chief Health Strategists by assuring that the health and well-being 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.



**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 well-being of Nebraskans.



*Kim Engel  
Director*

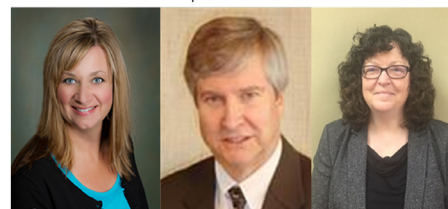
In the Panhandle, we do these three core functions through the Community Health Assessment and Community Health Improvement Plan, in coordination with the area hospitals in the Rural Nebraska Healthcare Network. Our common goals are aligned to create collective impact toward better health outcomes. Other vital partners we work with for improved health are members of the Panhandle Partnership, schools, businesses, local government, and area economic development. Decisions are made based on the assessment data and proven strategies are chosen for implementation.

Chances are you may have been involved in the strategies that are implemented. You may have:

- attended a Diabetes Prevention Program or Living Well Class
- participated in a walkability group in your community
- had a child or grandchild that attended Kids Fitness and Nutrition Day
- had a child receive dental fluoride varnish or sealants at school
- signed up for Panhandle Alert
- participated in Healthy Families home visitation program
- requested a free radon test kit
- enjoyed a tobacco free environment while at your local park or ball field
- benefited from health coaching
- learned how to monitor your blood pressure
- worked somewhere that has a worksite wellness program

These are just a few of the many ways that Panhandle Public Health District touches your life. All of us work together at the local and regional level to improve the health of our Panhandle communities. Thank you for taking the time to read our annual report. Please reach out to me if you have any questions.

*Rural Nebraska Healthcare Network Board of Directors  
Member Hospital's Chief Executive Officer*



Lori Mazanec, BBGH      Allen Gamble, CCH      Doris Brown, GMH



Ken Hunter, KHS      Robin Stuart, MCCH      Neil Hilton, PCHS



John Mentgen, RWMC      William Giles, RWGC      Jason Petik, SRMC

## Help us share what public health looks like in the Panhandle!

Take pictures of examples of public health in action in your community and tag your photos with *#ThisIsRuralPublicHealth* on Facebook and Instagram and next year your picture could be featured right here in our Annual Report.



**#ThisIsRuralPublicHealth**

### Thank you to our funders:

Initiatives in this publication were funded, in part, by: the National Bioterrorism Hospital Preparedness Program, Public Health Emergency Preparedness Program, CFDA 93.074, TP17-17010201SUPP18HPP and PHEP Cooperative Agreement, Award NU90TP921891; the Cancer Prevention and Control Programs for State, Territorial, and Tribal Organizations; Well Integrated Screening and Evaluation for Women Across the Nation, CFDA 93.898 and 93.094, Cancer Prevention and Control Programs for State, Territorial, and Tribal, Wisewoman, Award 1NU58DP006278-01-00 and 6NU58DP004863-04-02; the Preventive Health and Health Services Block Grant 201 CFDA 93.991, Award NB01OT009200; the Nebraska Division of Public Health Tobacco Free Nebraska Program, Substance Abuse Block Grant, CFDA 93.959, Substance Abuse Prevention and Treatment Block Grant, Grant T1010034-17; the Maternal, Infant, and Early Childhood Home Visiting Program Formula, CFDA 93.870, Award X10MC31154; the Substance Abuse Prevention and Treatment Block Grant, CFDA 93.959, Award T1010034-17; Nebraska's Targeted Response to the Opioid Project, CFDA 93.788, Award T1080263; the Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) – Building and Strengthening Epidemiology, Laboratory, and Health Information Systems Capacity in State and Local Health Departments, CFDA 93.323, Award 6-NU50CK000418-04-06; the Nebraska Childhood Lead Poisoning Prevention Program, CFDA 93.197, Award NUE2EH001364; Nebraska Preventive Health and Health Services Block Grant, CFDA 93.758, Award 17NB01OT009151B; the State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risk Factors and Promote School Health financed in part by Prevention and Public Health Funding (PPHF), CFDA 93.757, Nebraska's Public Health Actions to Prevent and Control Chronic Disease, Award 5NU58DP005493-04-00; Nebraska Oral Health Workforce Development Program, CFDA 93.236, Award T12HP30315. Funding is made available through the Department of Health and Human Services; Centers for Disease Control and Prevention; Environmental Protection Agency; Health Resources and Service Administration; Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment Services; Nebraska Department of Health and Human Services, Division of Public Health, Office of Preparedness and Emergency Response, Lifespan Health Services Unit, Women's and Men's Health Programs, Nebraska MIECHV Program, Chronic Disease Prevention and Control Program; Region I Behavioral Health Authority; Nebraska Beef Council and University of Nebraska Kearney; and Panhandle Public Health District. Its contents are solely the responsibility of the authors and do not necessarily represent the official view of the Centers for Disease control and Prevention, The U.S. Department of Health and Human Services, the Nebraska Department of Health and Human Services, or Region 1 Behavioral Health Authority.

Cover photos courtesy of  
Jenilee Woltman (front) and Melissa Haas (back).

Local  
Postal Customer

PRSRST STD  
ECRWSS  
U.S. POSTAGE  
PAID  
EDDM Retail