Panhandle Public Health District, Annual Report 2011 — Page 24

Local employers invited to join wellness council, reap tangible rewards

Panhandle employers have a new resource available to assist in employee recruitment and retention—the Panhandle Worksite Wellness Council launched in July 2011 with an abundance of benefits for members.

“Worksite wellness means healthier employees, reductions in absenteeism and increased productivity and morale,” Jessica Davies with Panhandle Public Health District said. “Employees want to work for someone who values their health and provides benefits that affect their quality of life.”

Davies is a certified worksite wellness coordinator at Panhandle Public Health District. She guided PPHD to become a Governor’s Excellence in Wellness Award winner in 2010. Martha Strickler, nurse manager with Scotts Bluff County Health Department has more than 10 years of worksite wellness experience. Together they will work directly with businesses in all 11 Panhandle counties providing technical assistance and guidance.

The council provides tools and consultation for members, training and networking opportunities and ready-to-use services such as employee newsletters and bulletins, screening, testing and wellness kits, resource lists, podcasts, and customizable policies and behavior change programs, all updated on a frequent basis. Ongoing technical assistance in following worksite wellness processes and alignment with the Governor’s Excellence in Wellness Award criteria is another service for members. (see article at left for 2011 award winners).”

“Council members will receive free state-of-the-art health risk appraisals to determine their company’s primary health concerns,” Davies added. “In addition, we can create an electronic outreach survey, customized to the company’s work culture, to work with the employer to write an annual wellness plan.”

The mission of the council is to build employer’s capacity to create a culture of wellness for employees through environmental and policy changes by providing evidence-based training, resources and ongoing support with promotion initiatives. A member benefits informational overview is coming to a Panhandle community near you. There is no fee to attend and an incentive will be provided to all that come! The dues structure and more information are available online at [www.pchwcc.html](http://www.pchwcc.html). —to page 21

Healthy Families America visits new moms

In January, 2012, Panhandle Public Health District begins implementation of Healthy Families America, an evidence-based home-visitor program promoting positive parenting skills and improved child health and development. Healthy Families America aims to continue outreach efforts already provided in the community.

“Programs that engage parents meaningfully on early child health are most successful in achieving their outcomes,” HFA program manager/clinic supervisor Betsy Walton, RN, said. Walton added new parents are eager and excited to learn how to care for their babies.”

A child’s critical brain development occurs during the first five years of life so having our home visitors involved with families during this period enables us to really focus on positive parenting practices that stimulate brain development and reinforce the creation of strong parent-child relationships,” she added.

All expectant parents and parents of newborns have common questions about their child’s development. A new baby can be both a welcome addition and a stressful time for families. HFA home visitors assist parents in finding solutions to their questions on how to connect with primary healthcare providers, understand and monitor their child’s development, strengthen parent-child bonds, reduce stress or social isolation, and gain access to community resources. “Home visitors develop a trusting relationship with parents and help them to be more emotionally available to their child,” she added.

Staff members include Walton and Parenting Coaches/Intake Specialists Linda Ainslie, Bernadette Sanchez, Rachelle Alman, Melona Galloway and Myrna Hernandez. They are located in the Scotts Bluff, Box Butte and Morrill counties to serve families in the HFA program.

—turn to page 15

Where the money comes from . . .

Where the money goes . . .

Balance Sheet, June 30, 2011

<table>
<thead>
<tr>
<th>Assets</th>
<th>Liabilities</th>
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<td>Total Operating Expenses</td>
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PPHD Financial Statement

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<tr>
<td>Total Operating Revenues</td>
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<tr>
<td>Total Operating Expenses</td>
<td>$1,184,456</td>
</tr>
<tr>
<td>Net Assets</td>
<td>$545,992</td>
</tr>
</tbody>
</table>

Sara Sulzbach
Office Manager

Panhandle Public Health District, Annual Report 2011
Tuberculosis, continued —from page nine

active, untreated TB germs in the lungs or throat spread those germs into the air by coughing, sneezing or speaking. Only people who breathe those germs into their lungs can become infected. "Usually people who have had very close, day-to-day contact with the infected person are the only persons who are at a higher risk of contracting the illness," Content said. "TB is less contagious than mumps,麻疹, chickenpox and influenza.

Panhandle Health District worked closely with the PBH Program in the management of two cases of active TB in 2011. In February 2011, a student atconditions that brought TB to Lincoln were treated and is expected to fully recover.

Radon, continued —from page 17

The Radon Business of the Year in 2011 by Panhandle Public Health District Wellness Coordinator Jessica Devices for the Panhandle Wellness Coalition, a regional program for women—be an outlet from cancer taking over her life.

Paris stressed the importance of regular screenings, avoiding processed and fast foods and staying active and involved. Over the course of the past year she has served on the Regional Cancer Coalition that distributed colon cancer screening kits to Panhandle residents along with other cancer prevention messages.

Panhandle Public Health District, Annual Report 2011 — Page 23

Paris battles breast cancer, continued —from page 21

wig came with a hairnet, so I garnished the name “Lola the Lunch Lady.”

Near the end of her treatment, her family and friends gathered and planned a party in her honor. This has become a spring tradition, with participants purchasing t-shirts and all proceeds benefiting the Festival of Hope.

The theme of the first year’s event was “Support Second Base.” The second year’s theme was “Team Tough Times,” and the most recent, “Help Fight the War in My Rack.” The light-hearted gatherings not only reinforce the importance of getting preventative screenings—especially for breast cancer—but they also provide a program for women—be an outlet from cancer taking over her life.

They have also come to honor a dear friend of Paris’, Mary Manion, who was diagnosed with colon cancer, nearly one year to the day after Paris’ diagnosis. Sadly, Manion lost her battle with cancer within a year of her diagnosis.

Paris stated the importance of regular screenings, avoiding processed and fast foods and staying active and involved. Over the course of the past year she has served on the Regional Cancer Coalition that distributed colon cancer screening kits to Panhandle residents along with other cancer prevention messages.

Overall, Paris concluded, “Life is good.”

Preventing, Promoting, Protecting

Assessment, Assurance, Policy Development

2011 Board of Directors

Banner County: Darrell County: Cheyenne County: Enid Smith, County Commissioner Chad Smith, County Commissioner Harold Winkelman, County Commissioner

Box Butte County: Mary Egan, County Commissioner Cody Smoker, Community-Spirited Citizen

Butte County: Bob Hall, County Commissioner

Cherry County: Merrill County: Gordon County: Sarah Barnes, County Commissioner David Kroe, County Commissioner Kay Andrews, County Commissioner

Douglas County: Larry Burks, County Commissioner

Jeff Armitage presented the MAPP Community Health Status assessment and county health rankings. The group was concerned to find four of the Panhandle counties in the bottom of the 75 Nebraska counties ranked “There are a lot of opportunities for preventative health,” Armitage said. “Everyone in the room is needed to work together to improve the health status of the region,” Panhandle Partnership Resource Coordinator Joan Frances told the group. “Three counties in the Panhandle have been targeted for the implementation of a home visitation program using the Healthy Families America model. Small groups continued discussions on their responses to the data and the impact community health has on their work, voluntary efforts and their community. Other MAPP presentations included Forces of Change and Health and Healthier Thorns and Strengths.

In addition, Colfax Swoeb of the Nebraska Department of Health and Human Services discussed Social Determinants of Health, an effective model for improved change. “Improvement will require commitment, planning, implementation and evaluation,” Swoeb said. “For example, health departments must address root causes of health risks such as high blood pressure and stress.”

“We can’t do it all,” she said. “There will be things that come to the top. At these things we are worked on, other areas will come to the top.”

Community response was led by Dr. Todd Sorensen, CEO of Regional West Medical Center; Jason Strintm, Dean of Business and Industry for Western Nebraska Community College; Roger Wess, a member of the juvenile justice committee with the Nebraska Crime Commission and Sanoma County District Attorney; Mary Moomaw, RN with Box Butte General Hospital and Deidra Conner, executive director for Northeast Nebraska Development Corporation. Key reflections were based on the speaker’s expertise and data identified that day. Innovations or opportunities that might assist the Panhandle in addressing these concerns were brought forward.

Senators Harris, Schlecht and Leadman held a panel discussion on their reaction to the data, and also what legislative opportunities and challenges they anticipated going into the next legislative session.

The day ended with the small groups creating their own to set priorities. “Where should we begin?” Collaborative opportunities were offered, with Frances’ challenge to others to become personally involved.

Collaborative efforts underway include the Healthy, Community Healthy, Youth initiative, funded by Child Wolf. Being funded from the Nebraska Children and Families Foundation, a regional juvenile justice prevention system of care, the Healthy, Community Healthy, America vision program, the longstanding Panhandle Partnership for Health and Human Services, the Panhandle Prevention Coalition (working to reduce substance abuse and access), a regional suicide prevention task force and the Panhandle Workforce Wellness Council, building employer capacity to create a culture of wellness for employees.

Each of the small groups chose a priority area where they will begin to act. You can see the results of the summative at www.pphd.org.

Vision: A coordinated system of public health services that promotes and enhances the health status of the Panhandle-wide community

Serving the Nebraska Panhandle counties of Banner, Butte, Cheyenne, Dawes, Deuel, Garden, Kimball, Morrill, Sheridan and Sioux

Kim Engel, Director

Main Office: P.O. Box 337, Scottsbluff, NE 69361 Phone 308-304-2368, Toll Free 800-222-4788, Fax 308-304-2374

Kim Engel, Director

Scottsbluff Office: 1050 East 20th Street, Suite 402, Scottsbluff, NE 69361 Phone 308-304-2368, Toll Free 800-222-4788, Fax 308-304-2374

Jeff Armitage took the overarching message of health determinants, education, jobs, wealth, housing and behaviors like smoking, eating and physical activity to the people in late fall with a Masterclass in Health for Panhandle.

A combined effort of Panhandle Public Health District, Scotts Bluff County Health Department, and the Panhandle Partnership for Health and Human Services, the summit brought together leaders in community health, business and economic development, education, health professionals, human service agencies and faith leaders.

Youth led much of the day, beginning with a question to all, “What is your hope for the future of the Panhandle?” and ending the day with a surprise TV challenge, “What legacy do you want to leave?”

Teams co-ordinated and record the day’s events, presenting a video of the day to inspire action.

The Panhandle Partnership for Health and Human Services shared recent community health data from the MAPP process to help define the health status of the Panhandle.

Pam Parrish, board member, presented the MAPP Community Health Status assessment and county health rankings. The group was concerned to find four of the Panhandle counties in the bottom of the 75 Nebraska counties ranked “There are a lot of opportunities for preventative health,” Armitage said. “Everyone in the room is needed to work together to improve the health status of the region,” Panhandle Partnership Resource Coordinator Joan Frances told the group. “Three counties in the Panhandle have been targeted for the implementation of a home visitation program using the Healthy Families America model. Small groups continued discussions on their responses to the data and the impact community health has on their work, voluntary efforts and their community. Other MAPP presentations included Forces of Change and Health and Healthier Thorns and Strengths.

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Teens urged Just Drive, distracted leading cause of crashes

Two teens cruise carelessly down a rural road, listening to music and texting their friends about plans for that evening. With both hands on the keyboard, as well as the steering wheel, the driver moves across the center line occasionally, but corrects himself and goes back to eating time with his friend. Within minutes however, the car hits the tree and rolls several times, erupting in flames and killing both occupants.

The above scenario was a key component of a Hemingford High School video for fellow students showing the potentially fatal results of texting while driving. The team presented the powerful video to a student assembly in Hemingford, as part of a local JUST DRIVE (JST DRV) promotion. To see the video, go to http://www.pphd.org/JSTDRV.html.

Ben Butte County teens are among the highest in the state for vehicle accident due to distracted driving (texting). As an incentive to help teens quit texting while driving, students were asked to sign the pledge, view student-created podcasts and track the pledge data through the PPHD website and a Facebook JST DRV fan page.

Among all age groups, teens drive are at the greatest risk. Per mile driven, teen drivers are four times more likely than adult drivers to crash. Mimic vehicle crashes are the leading cause of death for teens. Contributing factors to teen crashes include speeding, alcohol, distracted driving, nighttime driving, not wearing seat belts and distracted driving.

Teen drivers are four times more likely than adult drivers to crash.

To help keep teens safe on the road, the Centers for Disease Control & Prevention recommends graduated driver licensing policies, prohibiting cell phone use for teen drivers, primary enforcement of seat belt laws and vigorous enforcement of the zero tolerance policies for underage drinking and driving. "It is the dynamic combination of law enforcement, education that has proved effective in changing behavior," reports the National Highway Traffic Safety Administration.

"Teens urged Just Drive, distracted driving leading cause of crashes. The photo accompanying this article is reprinted by courtesy of the Bridgeport News-Blade. The article’s author is Carrie Wiggins.

Drug take back, continued

According to the Centers for Disease Control and Prevention, enough prescription painkillers were prescribed in 2010 to medicate every American adult around-the-clock for one month. Often, some of these medicines linger in the home and are highly susceptible to diversion, misuse and abuse. Rates of prescription drug abuse in the U.S. are alarmingly high—more Americans currently abuse prescription drugs than the number of those using cocaine, hallucinogens, heroin, and inhalants combined, according to the 2010 National Survey on Drug Use and Health. Studies show that the majority of teens who abuse prescription drugs obtain them from family and friends for free, including from the home medicine cabinets. Many Americans simply do not know how to properly dispose of their unused or expired medicine, often flushing it down the toilet or throwing it away. These methods can pose both safety and environmental hazards.

Purging America’s home medicine cabinets of unwanted or expired medications is one of four action items outlined in the strategy for reducing prescription drug abuse and diversion. The other action items include education of health care providers, parents, patients and youth, developing policy, and conducting prescription drug monitoring programs in all the states. The Preventing Opioid Misuse: An Intervention to address ‘doctor shopping’ and pill mills.

Youth prepared for disaster, continued

The family spent time evaluating what essential items would be needed in the case of an emergency. The Wiggins took into consideration what could happen in an event, and what would be needed to survive.

Bottles of water, granola bars, peanuts, flashlight, extra batteries, candles, lighter, tissues, hand sanitizer, Band-Aids, wipes and towels are packed in their kit. Sleeping bags and a hand crank radio are also available in the safe station area. The 4-H safety project also provided a list of recommended supplies.

Dawson’s family emphasized the importance of being organized ahead of time with supplies and a disaster kit. It is less stressful in a “take cover” situation to already have the supplies instead of scrambling at the last minute. With their supplies already in place, all the Wiggins family has to worry about is getting to safety.

Last summer was a learning experience for the whole family on how to stay safe and the role each member plays in the family. Dawson believes to “be prepared so you don’t get hurt.”

The photo accompanying this article is reprinted by courtesy of the Brantepo News-Blade. The article’s author is Carrie Wiggins.
Three Panhandle businesses were honored by the governor in October for their high levels of participation, leadership support and behavior change in their individual agencies.

Box Butte General Hospital, Chadron Community Hospital, and South Platte Natural Resource District were each honored with the Governor’s Excellence in Wellness Awards at a Governor’s Level.

Governor Dave Heineman and Dr. Joann Schaefer, chief medical officer of the Nebraska Department of Health and Human Services, presented the awards at the first Panhandle Worksite Wellness Council Awards Luncheon in Gering on October 6, 2011.

Box Butte General Hospital was cited for a variety of programs to increase physical activity and overall wellness, addressing numerous topics such as safe drinking water, tobacco, reducing colorectal cancer and childhood obesity. BIGH’s Chief Executive Officer Dan Griess and eight members of his Wellness Champions Team accepted the award from the governor and Dr. Schaefer.

Chadron Hospital CEO Harold Krueger, NRD also hosts ongoing lunch ‘n learns, with regional and statewide wellness initiatives on topics like colorectal cancer and walking. They have also begun an annual employee (wellness) recognition ceremony.

Receiving the award on behalf of the NRD was Keith Eisenbarth, chair of the board of directors and Linda Suhr, wellness coordinator.

In addition, eleven organizations from the region were named visionaries for their commitment to a regional, full-service worksite wellness council. Visionaries and their designated representatives on the council are:

- Box Butte General Hospital in Alliance (Mike Netland)
- Chadron Community Hospital (Diana Lecker)
- City of Chadron (Lydia Martin)
- City of Gering (Carrie Havranek)
- Panhandle Public Health District (Beth Freyen)
- Panhandle Public Health District (Shelley Bogin, Council Executive Chair)
- Panhandle Public Health District (Tammie Braunke)
- Panhandle Public Health District (Karen Englehardt, Council Executive Secretary/Treasurer)
- Panhandle Public Health District (Angela Hans)
- Western Nebraska Community College (Linda Roelle)
- Gordon Memorial Hospital (Staley Bogin)

A third award presented at the luncheon was the Safe Community designation (see page 29 for more information on Safe Communities.)

Panhandle Public Health District, Annual Report 2011 — Page 4

Panhandle Public Health District, Annual Report 2011 — Page 21

Free cancer screening tools available locally

If detected early, 90% of colon cancer cases are curable. However, because it may have no symptoms, many people do not get checked for this common illness. Your risk of having colon cancer is one in 10 — if you want to stay in the Game, you are urged to take a simple at-home test using a free test kit available from the Panhandle Cancer Coalition and the Nebraska Colon Cancer Screening Program.

Individuals age 50 and older make up more than 90% of Nebraska’s nearly 1,000 annual colon cancer diagnoses. Colon cancer is the second leading cause of cancer death in the country and Nebraska has one of the highest rates of death due to colon cancer in the United States.

The first fecal occult blood test (FOBT) checks for hidden blood in the stool. The at-home kit involves placing a small amount of stool on a card and sending it to a laboratory where it is checked for blood. The lab will send results from the FOBT kit to you and your physician.

“It’s simple, free and is an important step in preventing cancer,” said Kelly Dean, coordinator of the Panhandle Cancer Coalition. “If the lab finds blood, guidelines recommend a follow-up colonoscopy.”

“For people who take the time to complete the FOBT and screening in the Panhandle and reduce colon cancer risk,” the manual says.

“We urge people to arrange for follow-up testing if necessary.”

“The goal is to increase awareness and screening in the Panhandle and reduce colon cancer risk.”

To receive a free test kit, see coupon at (right). Also, kits will be available at local participating pharmacies.

Possible symptoms of colon cancer

- Blood in or on the stool
- A change in bowel habits
- General, unexplained stomach discomfort
- Frequent gas, pain, or cramps
- Unexplained weight loss
- Chronic fatigue

Risk Factors for Colon Cancer

- Eating a low-fiber, high fat diet
- Being overweight
- Smoking
- An inactive lifestyle
- Certain hereditary conditions, such as the tendency to have many colon polyps
- A family history of colon cancer, especially parents or siblings
Panhandle receives international Safe Communities designation

It is no surprise to those who live in western Nebraska; this is one of the safest places to live. But now, the World Health Organization (WHO) has recognized the Panhandle as a “Safe Community.” The WHO and UNCHS awarded the special designation in October at a ceremony at the Gering Civic Center.

The Panhandle completed a rigorous examination and application process during the past two years before receiving word that the application was approved.

The emphasis of the Safe Communities approach is on collaboration, partnerships and community capacity building to reduce the incidence of injury and promote injury-reducing behaviors. Only four communities in Nebraska and fewer than 200 worldwide have received this prestigious designation.

“The importance of this plan is the Panhandle welcomes youth and the youth see the region as a place they want to live and work in,” Frances said.

Rama nominations, continued

In its infant stages, the plan allows for county attorneys across the Panhandle to work together to create a common diversion program for juvenile offenders. This is a longstanding request of many prosecutors involved in prevention.

“The importance of this plan is the Panhandle welcomes youth and the youth see the region as a place they want to live and work in,” Frances said.

Comprehensive juvenile plan, continued

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“The importance of this plan is the Panhandle welcomes youth and the youth see the region as a place they want to live and work in,” Frances said.

Prescription drug assistance available through PPHD and WCHR

Most drug companies offer discount programs for people who cannot afford their prescription drugs, said Tami Beal of Western Community Health Resources, but often the paperwork and guidelines are too much for the average person to handle.

The drugs obtained through the assistance program are provided by the drug manufacturer and sent directly to the doctors, Beal said. She said the program does not meet an immediate need for a prescription that day. Instead, the drugs take four to six weeks to arrive in the first shipment and are refilled over the long term.

Contact Panhandle Public Health District at 308-487-3600 or 866-701-7173 for more information on prescription drug assistance.

Prescription drug assistance available through PPHD and WCHR

Most drug companies offer discount programs for people who cannot afford their prescription drugs, said Tami Beal of Western Community Health Resources, but often the paperwork and guidelines are too much for the average person to handle. Instead, Panhandle Public Health District provides WCHR with a portion of the funds to administer the program. This is available through WCHR in Sioux, Dawes, Sheridan and Box Butte counties.

Beal said the income guidelines are not overly restrictive and the programs can provide a wide variety of name brand prescriptions and even a few generic drugs through the drug companies’ charitable program. The drugs obtained through the assistance program are provided by the drug manufacturer and sent directly to the doctors, Beal said. She said the program does not meet an immediate need for a prescription that day. Instead, the drugs take four to six weeks to arrive in the first shipment and are refilled over the long term.

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Wellness council awards, continued

Members also are allowed to have unlimited representatives attend regional workshops at several Panhandle locations, biannual regional trainings with nationally-recognized health and wellness experts, quarterly face-to-face networking opportunities with other workplace wellness locations, a members-only online networking forum and ongoing communications regarding workshops, conferences and other events nationwide.

For additional information about workplace wellness, visit the website or call Davies at 308-647-3600, ext. 101 or jdavies@pphd.org or Stricker at 308-630-1559 or strickm@rwmc.net.

— from page 12

Council Annual Dues Structure

| 1-10 employees | $ 90 |
| 11-25 employees | $125 |
| 26-50 employees | $200 |
| 51-100 employees | $275 |
| 101-249 employees | $350 |
| 250 or more employees | $415 |

Dues will be prorated according to the month the worksite joins the council, with annual renewal in January.

Wellness council awards, continued

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Panhandle Worksite Wellness Council Advisory Board

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Wellness council awards, continued

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Panhandle Worksite Wellness Council Advisory Board

Shelby Beggs
Nicole Fernandez
Karen Eisenbarth
Mike Horlick
Dana Loker
Carrie Horvath
Tamara Blankow
Angela Haug
Linda Roule

Executive Chair
Executive Vice Chair
Executive Secretary Chair

Contact Panhandle Public Health District at 308-487-3600 or 866-701-7173 for more information on prescription drug assistance.

Visions: All Panhandle worksites create, sustain and recognize a culture of lifestyle wellness for a health, productive community.
Smoke free policies keep everyone healthy

According to the 2010 Surgeon General's Report, secondhand smoke contains more than 4,000 chemicals, including at least 68 carcinogens. There is no safe level of exposure to tobacco smoke. Only smoke-free laws provide effective protection from secondhand smoke.

"Smoke is not a protected liberty," Prochazka added. "Schools, businesses, landlords, all have a right to prohibit smoking in their properties as they please; their staff and their residents.

SMOKE-FREE MULTI-FAMILY HOUSING

Tobacco Free in the Panhandle joined the Panhandle Prevention Coalition in December 2010. In their first year, Coordinator Tabi Prochazka, with the assistance of Janelle Hansen have helped several landlords make their properties more desirable by creating smoke-free, public and private multi-family housing units easily available. A list of such units is available on the TPP website at www.npah.org/preventing-smoke-free.pdf to link tenants looking for smoke-free facilities with landlords.

Prochazka said landlords are quick to recognize the benefits of going smoke-free – they know smoke doesn't stop at their neighbor's front door and is often present in the heating and cooling systems. Many are willing to pay a premium for better health and cleaner living environments.

The Panhandle Prevention Coalition encourages landlords to participate in the Great American Smokeout, an annual event established by the American Cancer Society, to take a stand and encourage smokers to make a plan to quit. By quitting, smokers are taking an important step toward a healthier life – one that can lead to reduced cancer risks.

"While the Nebraska Clear Indoor Air Act protects workers, there is still work to be done to protect against the dangers of secondhand smoke exposure," Prochazka said. "Adopting policies at multi-unit housing and 15-foot door restrictions at businesses have proven effective in reducing exposure;" Prochazka said. "Setting policies is a way of changing cultural norms, making it easier for people to quit smoking.

Prochazka is available to assist multi-unit housing and businesses to adopt such policies by contacting 308-487-3600, ext. 107 or by emailing tprochazka@pphd.org.

On the second Saturday of November each year, survivors of suicide come together at headquarters of local healing conferences in cities around the world and online for mutual support and practical guidance on coping with grief. In the Panhandle, PFPD through the Panhandle Suicide Prevention Task Force hosted a National Survivors of Suicide Day in Alliance, Saturday, November 19. The event was open to anyone in the Panhandle. The program included a panel of other survivors and mental health professionals.

Every 41 seconds, someone in the United States is lost to suicide. Every 41 seconds, someone is left to make sense of it.

The Panhandle Out of the Darkness Walk was one of nearly 220 Out of the Darkness Community Walks held nationwide, from September through December. The walks are expected to raise more than 50,000 walkers and around $1 million for American Foundation for Suicide Prevention. Provided are five core strategies of the AFSP and fundraising research offers educational programs for professionals that educates the public about mood disorders and suicide prevention.

"We are committed to policies and legislation that impact suicide and prevention," said Tabi Prochazka, coordinator for Tobacco Free in the Panhandle.

"According to the 2010 Surgeon General's Report, secondhand smoke contains more than 4,000 chemicals, including at least 68 carcinogens. There is no safe level of exposure to tobacco smoke. Only smoke-free laws provide effective protection from secondhand smoke.

"Smoke is not a protected liberty," Prochazka added. "Schools, businesses, landlords, all have a right to prohibit smoking in their properties as they please; their staff and their residents.

SMOKE-FREE MULTI-FAMILY HOUSING

Tobacco Free in the Panhandle joined the Panhandle Prevention Coalition in December 2010. In their first year, Coordinator Tabi Prochazka, with the assistance of Janelle Hansen have helped several landlords make their properties more desirable by creating smoke-free, public and private multi-family housing units easily available. A list of such units is available on the TPP website at www.npah.org/preventing-smoke-free.pdf to link tenants looking for smoke-free facilities with landlords.

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**Dental Days 2011: free care for more than 200 children**

Panhandle Public Health District

**Good smoke-free-entryway policies make good neighbors**

Panhandle Public Health District, Annual Report 2011 — Page 11

**Scrub Club: hand washing savings for schools, day-care providers**

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Panhandle Public Health District, Annual Report 2011 — Page 11

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Panhandle Public Health District
New sunscreen regs make protection, tanning safer

Sunscreen is just one of several protective measures for sun safety.

Sunscreen SPF 15, 30 or 40? Ultraviolet A or B rays? Broad spectrum? Reading a sunscreen package label is like translating a scientific journal—nearly as confusing and sadly inadequate. But new federal legislation, enacted in June 2011, should make sunscreen labeling easier for everyone.

For years, sunscreens were known to protect against ultraviolet A (UVA) rays that cause skin cancer. But more recently, manufacturers added protection against ultraviolet B (UVB) rays that cause skin cancer and early skin aging. Products with protection against both UVA and UVB are called broad spectrum and must now pass federal guidelines to include that label on their packages.

“Those invisible rays can cause skin cancer,” Janelle Hansen, health educator with Panhandle Public Health District, said. “Some skin cancers can cause death if not found and treated early.”

Hansen said people of all skin colors can get skin cancer from the sun’s UV rays. Those who are most likely to get skin cancer from these rays have:

- lighter natural skin color
- skin that burns, freckles, gets red easily or blue or green eyes
- a family member who has had skin cancer.

“Beginning in the summer of 2012, labels will look different,” Hansen continued. “Many common phrases used now, such as “sunblock,” "waterproof,” “preserves skin” will no longer be permitted. Maybe the packaging will change, but you shouldn’t stop using your current products in the meantime.”

Hansen said the FDA is not advising consumers to throw away their current sunscreen products. “Sunscreens on the shelf today may have varying levels of UVA protection. But by next year, sunscreens on the shelf today may have varying levels of UVA protection.”

For more information on sun safety, contact Hansen at 308-687-1860, ext. 105, 886-701-7173 or email hansenj@pphd.org.

Panhandle Public Health District, Annual Report 2011 — Page 8

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Dr. Ann, motivational lifestyle speaker, engages audiences

"I know the unavoidable pain and misery that is where a lot my passion stems from." "I am extremely empathetic to a fault, I feel people’s pain. I get devastated when I know someone I am talking to is devastated. I get devastated when I know someone is devastated. I saw so much preventable misery, loss of life — premature loss of life — in my clinical practice. I couldn’t bear it any longer. It didn’t have to be happening.”

"People don’t have to get Type II diabetes. Ninety plus percent of Type II diabetes is preventable. Cardiovascular disease, 80 plus percent is preventable through diet and lifestyle. I just couldn’t take it any longer.”

"When you watch a grown man dissolve before your eyes — when you watch a woman die of heart attack at age 40, I mean it’s just, those things, just made such an indelible impression on my heart that I basically think that is where a lot my passion stems from.”

Less of a focus on caloric restrictions or Dr. Ann’s presentation is better described as the knowledge of, “Simply being mindful of the foods that cross our lips,” can help people improve quality of life. She recommends “making one and never more then three changes at a time.” If you can “conquer your carbs,” according to Dr. Ann, “it will aide in weight loss and weight control. Reduce your hunger. Lower your cardiovascular risks. Provide benefits of physical activity. Reduce the risk of vision loss.”

This article is reprinted courtesy of the Alliance Times-Herald and author Kristi Hulsey.

"It’s not enough to tell people do this and don’t do that, what motivates people to change their behavior is making sure they understand the why behind the directive. "I am extremely emphatic to a fault, I feel people’s pain. I get devastated when I know someone I am talking to is devastated. I saw so much preventable misery, loss of life — premature loss of life — in my clinical practice. I couldn’t bear it any longer. It didn’t have to be happening.”

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Tuberculosis controlled at local college

Tuberculosis (TB) is an infectious disease caused by the bacterium Mycobacterium tuberculosis, and is one of the leading causes of death in the world. In the United States, TB was the leading cause of death in 1900. With the advent of effective treatment in the late 1940s, the U.S. experienced a steady decline in cases of TB. However, the emergence of TB occurred at that time, with the incidence of cases rates peaking in the early 1990s.

Through extensive public health interventions at the national, state and local levels, tuberculosis is once again on the decline nationally. There were 11,181 TB cases reported in the U.S. in 2010 for an incidence rate of 3.6 per 100,000 which is the lowest recorded rate since national TB surveillance began in 1953. Nebraska also continues to see a decrease in cases. There were 23 cases reported in 2011 compared to 27 reported cases in 2010 and 22 as of 2009.

TB usually affects the lungs, but it can also affect other parts of the body, such as the brain, kidneys, or spine. TB can be fatal without the proper treatment. Public Health Nurse, Becky Corman, says: “There are two types of TB, latent TB and active TB. A person with latent TB infection has no symptoms and is not contagious, but that at some time in the past has been exposed to a case of active TB.”

"People with latent TB can take medication to reduce their risk of becoming ill with active TB.”

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Special Needs Registry helps prepare for emergencies

The challenge: Preparing for a disaster or serious local emergency is especially important for persons who are frail, homemaded, disabled, or medically fragile.

The answer: The Panhandle Special Needs Registry enables persons who are medically fragile and require special care and attention. The Panhandle Special Needs Registry helps persons who are frail, homemaded, disabled, or medically fragile.

The registry now includes nearly 200 individuals across the Panhandle.

Who should register:

> Persons relying on homemaking, personal care or nursing services to maintain independence in their home or apartment
> Persons requiring life-sustaining equipment and uninterrupted electrical service
> Persons who are medically fragile and require special care and attention

For more information about the Special Needs Registry, contact Becky Corman, ERC Coordinator at PPHD, 308-262-2217, toll-free at 855-227-2217 or email brcorman@pphd.org.
Panhandle youth prepares family, neighbors for disaster

In the summer of 2011, the National Weather Service issued more than 629 severe thunderstorm warnings in the Wyobraska area. The media do a very good job at letting people know a storm is on the way and when cover should be taken.

Dwayne Wiggins is one local youth who put preparedness into action last summer. With the high number of severe storms in the area, Wiggins decided to get prepared, led by his eighth-grade son Downon.

While traveling to a neighboring town for a weekly baseball game, the Wiggins family encountered a fast-moving storm system that forced them to take cover. In the basement of a local church, they waited out the storm. It did cause them, however, to want to become prepared in their home, in the event of a storm.

Dwayne began expressing an interest in the weather and became the family weatherman, giving his family updates on each upcoming weather event. With an eye on the sky, an active weather alert hanging on the wall and checking weather radar online, his family is well informed of impending thunderstorms.

As a first year 4-H member, he caroused in the safety of the boy’s basement and how to make a tornado kit. He exhibited his tornado kit at the Morrill County Fair.

Dwayne assembled the family kit with enough supplies for four people in a large plastic container with a handle. Supplies in a preparedness kit should be replenished or replaced yearly to ensure supplies are ready for an emergency. Dwayne has also set up a safe station in the family basement with enough chairs for each member of the family, toys or activities to pass the time and a special place for the “Tornado Kit” and supplies.

The family spent time evaluating what essential items would be needed in the case of an emergency. The Wiggins took into consideration what could happen in an event, and what would be needed to survive.

Flooding in Garden County prepares community, providers

Those attending public health often develop exercises to test their ability to withstand natural emergencies, manmade disasters and other problems that might create a disruption to our health. But in the spring and summer of 2011, Mother Nature offered a different “test” that tested Garden County’s ability to respond far beyond the hypothetical.

Jim Hansel is the CEO of Garden County Health Services, including Riverview Assisted Living in Lewellen.

“The river view” became more than just window dressing and the apartment residence name, when rising waters threatened the village and the assisted living home for 19 individuals.

Hansel said early on, the county and CSCS formed a team of professionals, including Melody Leisy, Panhandle Regional Medical Response System Coordinator for Panhandle Public Health District.
Public health nurse assures access to health care

Finding a doctor or dentist isn’t always easy, especially in a rural area where there may be a shortage of healthcare professionals. Often, there are other roadblocks to finding the right physician for special situations. Overcoming barriers is a specialty for Public Health Nurse Kelly Dean. Dean makes it her business to keep an updated list of community resources and to assist rural Panhandle residents seeking medical, dental or vision help.

“In the Public Health Nurse program, the aim is to assure access to health care and support rural needs. The focus is to help families and individuals increase their awareness of healthcare resources and providers and dentists.” This includes those who are new to the area and those with Medicaid. Dean said she can also perform a health assessment on each client/ family to determine if further care is necessary.

“Having a medical home is important to a family’s ongoing healthcare,” Dean said. She should see the same provider for their well-child visits, illnesses and enough annual exams. This reduces medical costs and promotes continuity of care. It is also important to examine regular visits with the same dentist and eye doctor.”

Dean said she receives referrals from physicians’ offices, state Medicaid applicants, Nebraska Health and Human Services and hospital emergency rooms. In some cases, there are language and transportation barriers. Dean links with community resources, such as county hand-handouts and language translators to overcome these barriers.

Another service offered by the public health nurse is to healthcare providers themselves. If the hospital or clinic is having difficulty with a client who is often late or misses appointments, the public health nurse can work with the patient to resolve the problem.

Often times, patients misuse the emergency room for minor medical problems or sicknesses. Dean said, “We educate patients regarding the appropriate use of the emergency room versus visiting their primary care provider.”

Over the years, the Panhandle Medical Reserve System (PRMRS) has developed a partnership with the Strategic National Stockpile to provide emergency supplies when necessary. In the event of a national emergency, the Centers for Disease Control and Prevention have large quantities of medicine and medical supplies to protect the American public.

In November the PRMRS partners traveled to Omaha for the Nebraska Medical Reserve Corps annual conference and training. In July of 2011, PRMRS members gathered in Bridgeport for a First Responders training, offered by the Nebraska Emergency Management, where hospitals had the chance to learn and practice new skills for decontamination and triaging patients that will show up at their doors if there was a disaster.

Melody Leisy, PRMRS Coordinator, said PRMRS is always looking for cutting edge equipment and ideas that are practical and useful in everyday medical situations. As a spring training, personnel test the Med Sled, for emergency evacuation of patients. The sled is useful for moving patients up and down stairs and across rubble in a disaster situation.

PRMRS is always recruiting volunteers to work in emergency preparedness. Those volunteers might include doctors, nurses and EMTs – but also nonmedical personnel to answer phones and manage paperwork when a disaster strikes.

For more information on the Panhandle Medical Reserve Corps, call Leisy at 308-262-2217 or toll free at 855-227-2217. You may also email Leisy at mleisy@pphd.org.

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PRMRS is a partnership of not only hospitals, but also emergency medical services, emergency managers, Region I mental health providers, CAPWR Health Center and public health.

Leisy is a registered nurse with Panhandle Public Health District.

PRMRS is always recruiting volunteers to work in emergency preparedness. Those volunteers might include doctors, nurses and EMTs – but also nonmedical personnel to answer phones and manage paperwork when a disaster strikes.

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Comprehensive juvenile services prevention system developed to serve ALL youth: Braid existing plans with new ideas to improve status of youth

Juvenile services for youth ages 10-17 in the Panhandle focus on prevention, with four task forces inside the Panhandle Partnership for Health and Human Services leading a comprehensive group of strategies aimed at creating a culture where ALL youth are valued and thrive.

One PPC partner described prevention as a plate of spaghetti, where problems youth face are the pasta and substance abuse is the sauce, touching every strand of their lives. Another partner, working in juvenile services in the Panhandle, said 80% of the youth she sees as juvenile offenders were previously in the system as the victims of abuse or neglect. And so, the cycle continues.

In 2011, the Partnership has expanded and enhanced the coalition’s prevention work to strengthen existing programs and eliminate duplication of services. By creating a comprehensive prevention plan for juvenile prevention, the Partnership will coordinate efforts and create a comprehensive service in all areas of the Panhandle.

The Comprehensive Juvenile Services System and Plan began with assessment and planning in 2011, led by Coordinator Joan Frances and Julie Rogers, with the Juvenile Justice Institute at the University of Nebraska at Omaha. A Comprehensive Juvenile Services and Violence Prevention Coordinator is in place.

Life of an Athlete extends beyond the court: healthy lifestyle, behavior and leadership key

Athletes at all levels – high school, college and pro – are always looking for ways to improve performance. Jered Dean knows the answer; at least for students in Panhandle high schools, he’ll have to say yes.

Pure Performance and the Life of an Athlete are scientifically proven, not only to improve athletic performance, but also academic performance, leadership ability and offer quicker recovery, better muscle development and a larger gain with training effort. In addition, they decrease the frequency of disciplinary problems, criminal activity, accidents and deaths (due to alcohol). Former Olympic athlete turned sports scientist, John Underwood, lends his expertise to the PPHHS Life of an Athlete Program.

Dean, the football coach at Bridgeport High School, was an athlete in high school and college. “Honestly, I didn’t drink,” Dean said. “But this much research was too good for the effects of underage drinking on an athlete.”

Dean now invites to Lake Placid, New York (former Olympic training grounds) to attend the American Athletic Institute’s Life of an Athlete program in the summer of 2009. Also attending from the Panhandle were Mitchell Peters and Chad Knetochou of Mitchell High School, Rick Berry of Crawford High School and former CSC head Volleyball Coach Amy Spradlin Shows that many Panhandle coaches and administrators have attended the Lake Placid training. Training for the program is part of the Panhandle Partnership Prevention Coalition.

Dean describes Life of an Athlete as a proactive approach to empowering the athlete’s performance on and off the field. In addition to the education provided through the program to athletes, coaches and parents, LGA is heavily publicized via e-mail and social media.

Many schools, Dean’s included, have alcohol policies for student-athletes that include punishment based on the number of times the athlete is caught involved with alcohol in one year. The AFLA, the other side of “those strikes and just one win,” policies itself each year, as the student is promoted to a new class, but the effects of alcohol are cumulative and carry over from year to year. That is the reason, Dean said the discipline policy should also vary over and includes resources like education, counseling and trained coaches with the support of their administration.

Dean has received national support as he and fellow coaches carried the LOA message to the schools. Some schools are on board; others in the community may or may not support the policy idea. Some simply don’t see a problem with the status quo. Dean disagrees.

“My interest was really turned on, knowing how to improve performance, Dean said. “There are good athletes who partake in underage drinking and are still able to perform, to a degree. But, think how much better you could be if alcohol was not a factor.”

Life of an Athlete extends beyond the court: healthy lifestyle, behavior and leadership key

Jane Gehrke is part of the solution.

Drake-Boys youth football coach Jerod Dean has received national recognition of alcohol merchants who exhibit best practices in preventing underage alcohol sales through consistent compliance of beverage control regulations, comprehensive management policies and ongoing employee training programs.

Award selection criteria are based on business practices known to reduce the sale of alcohol to underage youth. They include:

1. Model business and management policies.

2. Participation in employee training programs such as the Panhandle Prevention Coalition operated Responsible Beverage Service Training.

3. Education and training practices.

4. Compliance check pass rate.

5. Store layout, including signage and window coverings.

6. Advocacy for a positive and healthy environment.

The importance of this plan is the Panhandle welcomes youth.”

Panhandle Public Health District, 2011 Annual Report – Pages 12 and 13

Plan, completed with funding from the state awarded to Panhandle County, was adopted by the board of commissioners in each of the 13 Panhandle counties.

Child Wellbeing indicators show Panhandle alerts in 12 areas, comprehensive strategies address highest needs

RAMA nominations sought

Do you know of a business that goes above and beyond to make sure that local youth do not have access to alcohol?

The Panhandle Prevention Coalition is currently accepting Responsible Alcohol Merchant Award nominations for their RAMA recognition program. The RAMA recognizes alcohol merchants who are actively involved in promoting a positive, healthy community in western Nebraska by restricting youth access to alcohol.

The RAMA program offers both local and regional recognition of alcohol merchants who exhibit best practices in preventing underage alcohol sales through consistent compliance of beverage control regulations, comprehensive management policies and ongoing employee training programs.

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6. Advocacy for a positive and healthy environment.

Drug Take-Back event collects 188.5 tons

October marked the second time residents of the Panhandle partook in the U.S. Drug Enforcement Administration’s National Prescription Drug Take-back Day on October 29. More than 400 pounds of unwanted or expired medications were collected for safe and proper disposal at the 11take-back sites available across the Panhandle.

There were a total of 29 sites open across Nebraska with a state-wide total of 2,922 pounds of medications collected. The first time a DEA National Drug Take-back Day was hosted in the Panhandle, only two sites were open, which demonstrates the collective effort of the community to reduce the amount of unwanted and unused medications in their homes.

Regional prevention coalition coordinator, Jami Lawler said the Panhandle Prevention Coalition worked diligently with local prevention coalitions as soon as the DEA released the drug take back dates. “PPC staff supported the region wide efforts by bridging communications across western Nebraska and embrace this opportunity to support a national campaign. Through collaboration with local law enforcement individuals, the program was more successful than it would have been if approached individually.

Americans turned in more than 777,886 pounds (183.5 tons) of unwanted or expired medications for safe and proper disposal at the 3,527 take-back sites that were available in all 50 states and U.S. territories. When the results of the three Take Back Days to date are combined, the DEA and its state, local, and tribal law-enforcement and community partners have removed 995,185 pounds (498.5 tons) of medication from circulation in the past 13 months.

Note: Crushed rates are not calculated for 2002 because since the rate will be the same for each time, the rate will be the same due to crush rate.

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Regional prevention coalition coordinator, Jami Lawler said the Panhandle Prevention Coalition worked diligently with local prevention coalitions as soon as the DEA released the drug take back dates. “PPC staff supported the region wide efforts by bridging communications and offering resources, as needed. With the support and resources from the DEA, regional prevention groups had the opportunity to increase support to the local communities.”

Lawler said coalition member John Argyle,physician at Ben Butte General Hospital, supplied the passion and drive to see the communities across western Nebraska embrace this opportunity to support a national campaign. Through collaboration with local law enforcement, the individuals, the program was more successful than it would have been if approached individually.

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