

live, learn, work, and play



Annual Report

Vision: We are a healthier and safer Panhandle community.

2 0 1 5

For a Healthier Panhandle

Panhandle

Public Health District



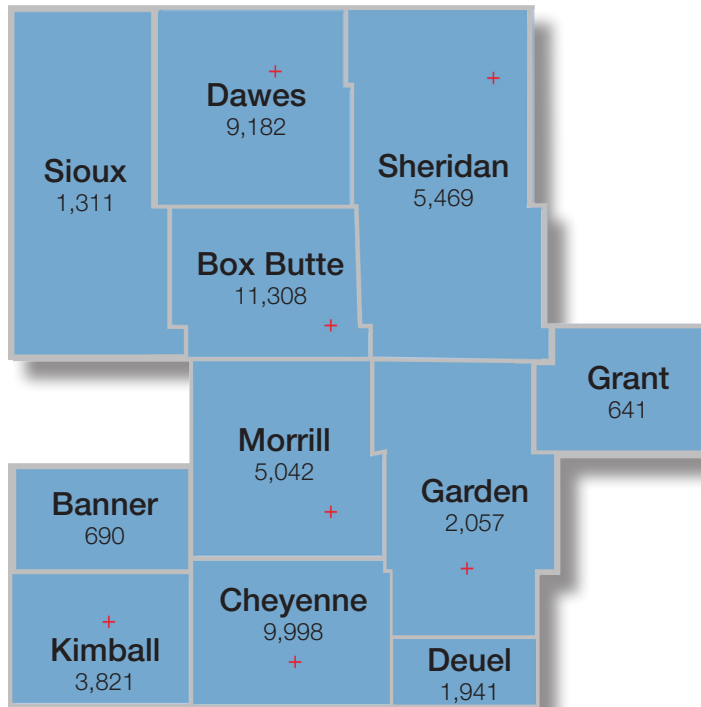
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Message from the Board President

Panhandle Public Health District's Counties and Population



+ Critical Access Hospitals

Source: 2010 Census

Produced by: Panhandle Public Health District, 2015

Panhandle Public Health District was formed in 2002 through inter-local agreements with participating counties. The map shows the 11 counties that are presently in PPHD. We also collaborate with Scotts Bluff County Health Department, toward our mission, which is:

Working together to improve the health, safety, and quality of life for all who live, learn, work, and play in the Panhandle.



Bob Gifford
PPHD Board
President

The Board of Health is made up of a county commissioner and a community-spirited citizen appointed by the commissioners from each of the 11 counties. We also have a physician, a dentist, and a veterinarian, bringing the total board of health to 25 members. The six governance functions of the board are: policy development, resource stewardship, legal authority, partner engagement, continuous improvement, and oversight.

We hope that you enjoy reading this annual report that highlights the staff and the work they do. As President of the Board of Health for the past couple of years, I would like to thank the other board members for their service, as well as the excellent and dedicated staff. If you have any questions or comments, please do not hesitate to contact us.

Bob Gifford
Board President

2015 Panhandle Public Health District Board of Directors

Banner County

Bob Gifford
County Commissioner
Marie Parker
Community-Spirited Citizen

Cheyenne County

Steve Olson
County Commissioner
Mandi Raffelson
Community-Spirited Citizen

Deuel County

Bill Klingman
County Commissioner
Judy Soper
Community-Spirited Citizen

Grant County

Brian Brennemann
County Commissioner
Vacant
Community-Spirited Citizen

Morrill County

Susanna Batterman
County Commissioner
Kay Anderson
Community-Spirited Citizen

Sioux County

Hal Downer
County Commissioner
Adam Edmund
Community-Spirited Citizen

Box Butte County

Susan Lore
County Commissioner
Carolyn Jones
Community-Spirited Citizen

Dawes County

Vic Rivera
County Commissioner
Darrel Knotte
Community-Spirited Citizen

Garden County

Randy Doorman
County Commissioner
Terri Gortemaker
Community-Spirited Citizen

Kimball County

Daria Anderson-Faden
County Commissioner
Kenneth Mars
Community-Spirited Citizen

Sheridan County

Dan Kling
County Commissioner
Pat Wellnitz
Community-Spirited Citizen

At Large

Dr. Timothy Narjes, MD
Dr. Brandon Wilcox, DDS
Dr. Richard Jaggars, DVM

Community Health Needs Assessment

In 2014, PPHD, in partnership with the Panhandle Partnership and the eight hospitals in the Panhandle – Box Butte General Hospital, Chadron Community Hospital, Gordon Memorial Hospital, Kimball Health Services, Morrill County Community Hospital, Regional West Garden County, Regional West Medical Center, and Sidney Regional Medical Center – conducted a Community Health Assessment (CHA).

Through review of data and statistics, focus group sessions with residents and meetings with community members, the assessment identified the most pressing health needs of Nebraska Panhandle residents of all ages:

1. Healthy Living – focus on healthy eating, active living and breastfeeding
2. Mental and Emotional Well Being
3. Injury and Violence Prevention
4. Cancer Prevention: Early Detection and Prevention

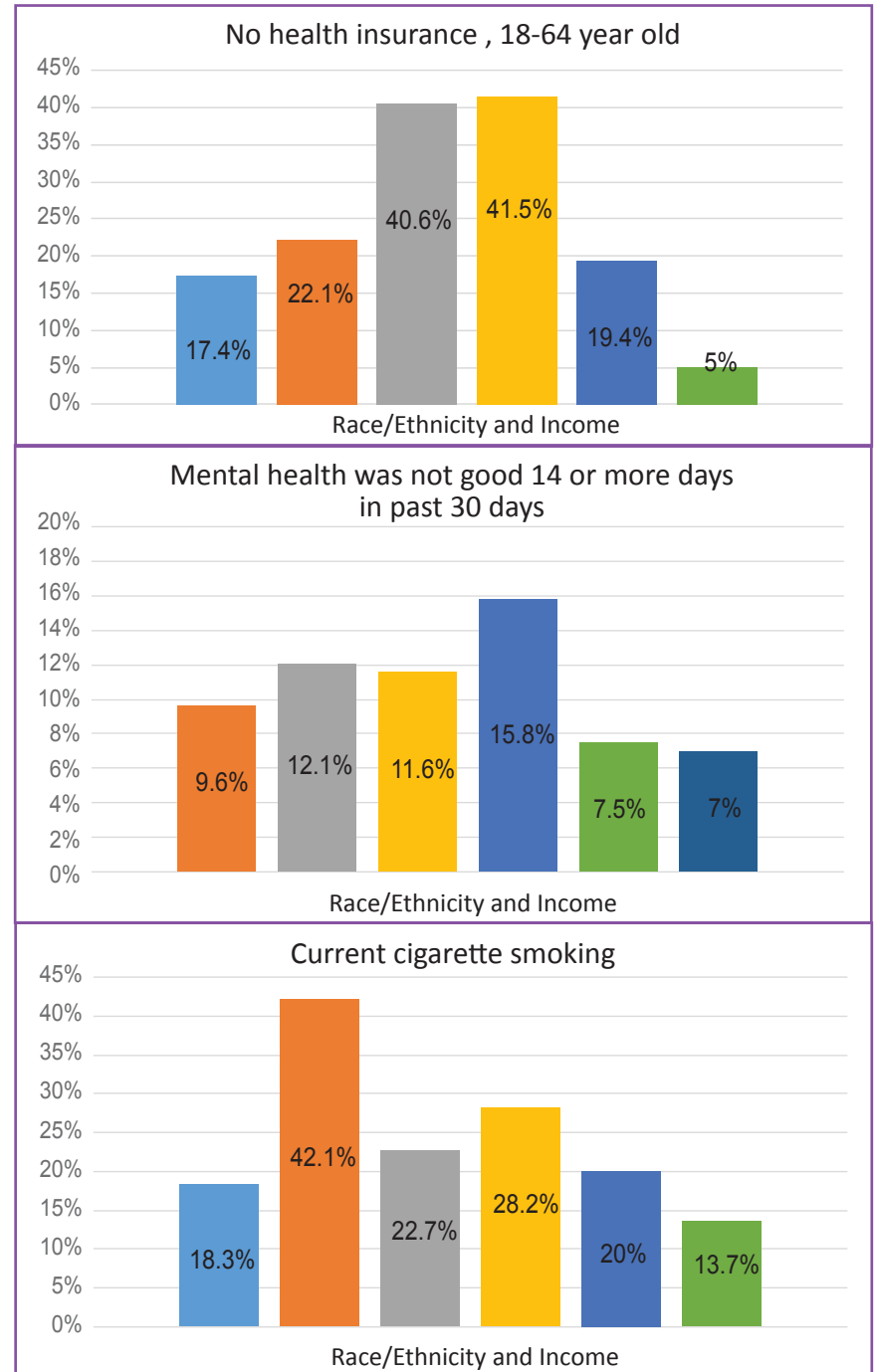
The 2014 assessment also highlighted health disparities in the Panhandle related to race and ethnicity and income. The charts show differences in health indicators between socioeconomic and racial/ethnic groups in the Panhandle.

The results of the CHA are used to develop strategies to improve the overall health of the Nebraska Panhandle community.

To learn more about the community health needs assessment process or to view the full 2014 Nebraska Panhandle CHA report, please visit <http://pphd.org/dataandstatistics.html>.

Legend: ■ White, NH ■ Non-White, NH ■ Hispanic
 ■ < %25,000 ■ \$25-\$49,999 ■ \$50,000 or more

Source: Nebraska Behavioral Risk Factor Surveillance System, 2011-2013



Community Health Improvement

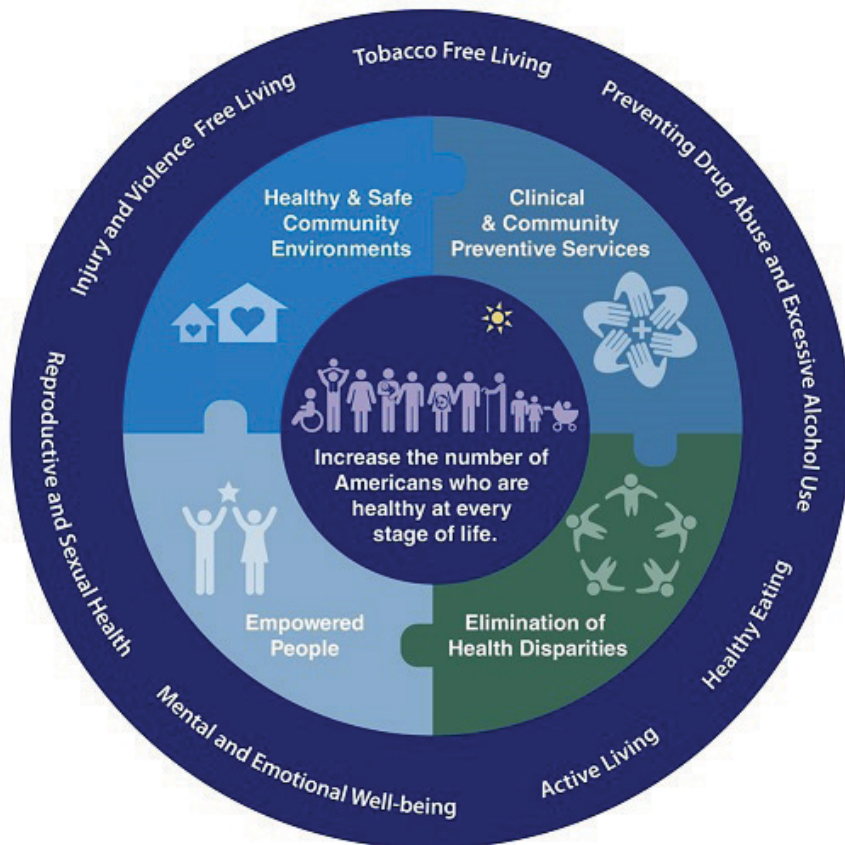
The Community Health Improvement Plan (CHIP) is developed based on the findings from the Community Health Needs Assessment. Once the priorities are determined, strategies are identified that have been proven to be successful based on evidence. The CHIP provides guidance to the health department, its partners, and its stakeholders, on improving the health of the population. The plan is critical for developing policies and defining actions to target efforts that promote health. Partners use the CHIP to coordinate and target resources. The full CHIP is available at <http://www.pphd.org/CHIPIndex.html>.

Each of the hospitals in the Panhandle has also developed a Community Health Improvement Plan based on the joint efforts of the local and regional community health needs assessments. Together we are making an impact and improving the Panhandle community's health.

live, learn, work, and play



For a Healthier Panhandle



The Panhandle CHIP aligns with the Nebraska Public Health Improvement Plan which can be viewed at : <http://dhhs.ne.gov/publichealth/Documents/2014%20SHIP%20Annual%20Report.pdf>

The Panhandle CHIP also aligns with the National Prevention Strategy. The Strategy prioritizes prevention by integrating recommendations and actions across multiple settings to improve health and save lives. <http://www.surgeongeneral.gov/priorities/prevention/strategy/>

PPHD received national recognition in 2014 for the progress it has made in providing technical assistance to worksites through the Panhandle Worksite Wellness Council. This is one of the recommendations noted in the National Prevention Strategy.

Priority Area: Healthy Living Healthy Eating, Active Living, Breastfeeding

Priority Health Area	Goal	Objective	Data	Current Data	Trend
I. Healthy Living	Achieve and maintain a healthy body weight	↓ Adult obesity	% of obese adults	34.0% (2014) ¹	↑
		↓ Youth obesity			
I.a. Healthy Eating	Increase consumption of healthy food	↑ Daily consumption of fruits and vegetables	% of adults who consumed fruits less than 1 time/day	42.1% (2013) ¹	↑
			% of adults who consumed vegetables less than 1 time/day	24.0% (2013) ¹	↑
		↓ Consumption of sugar-sweetened beverage	% of adults who consumed sugar-sweetened beverages 1 or more times/day in past 30 days	30.5% (2013) ¹	
I.b. Active Living	Improve health, fitness and quality of life through daily physical activity	↑ Physical activity among adults	% of adults who met both aerobic physical activity and muscle strengthening recommendations	14.9% (2013) ¹	↓
		↑ Physical activity among youth			
I.c. Breastfeeding	Improve the health and well-being of infants	↑ Breastfeeding of infants	% of infants (0 – 1 year) in the WIC program who are breastfed	23.9% (2014) ²	↑

Data Sources:

¹Nebraska Behavioral Risk Factor Surveillance System, Entire Panhandle Region

²USDA/FNS Supplemental Food Programs Division, WIC Breastfeeding Data Local Agency Report



The information on these two pages represents the performance measures for the goals and objectives of the community health improvement plan.

The arrows to the far right indicate which direction the trend is going. A red arrow indicates a negative trend while a green arrow indicates a positive trend.

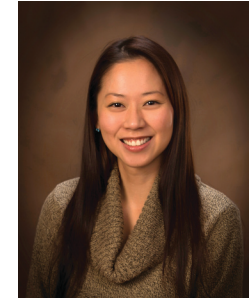
These and other measures will continue to be monitored and can be viewed at www.pphd.org.

Priority Areas: Mental and Emotional Well-Being, Injury and Violence Prevention, Cancer Prevention

PPHD prioritizes the work we do based on the goals of the Community Health Improvement Plan.

The following pages of this annual report go into more detail on initiatives that are taking place to improve the results of the performance measures. PPHD is not alone in working towards these goals.

Area hospitals, schools, community based organizations, law enforcement, economic development and other organizational members of the Panhandle Partnership all play a role in improving the health of our communities and citizens.



Joanna Chua
2015 Community Health Planner

Priority Health Area	Goal	Objective	Data	Current Data	Trend
II. Mental and Emotional Well-Being	Improve mental and emotional health	↓ Depression among adults	% of adults who were ever told they have depression	18.8% (2014) ¹	↓
		↓ Depression among youth			
III. Injury and Violence Prevention	Prevent unintentional injuries and violence	↓ Injuries from violence	Suicide death rate per 100,000	10.0 (2014) ²	↓
		↓ Injuries from motor vehicle accident	Motor vehicle crashes death rate per 100,000	19.5 (2014) ³	↑
		↓ Injuries from falls among seniors	Unintentional fall death rate per 100,000	18.8 (2014) ²	↑
IV. Cancer Prevention	Reduce the number of new cases, illness, disability and death caused by cancer	↓ Youth tobacco use	% of 12th graders who have smoked at least 1 cigarette in their lifetime	36.5% (2014) ⁴	↓
		↓ Adult smoking	% of adults who currently smoke cigarette	20.6% (2014) ¹	↑
		↑ Recommended cancer screening	% of 50-75 year olds who are up-to-date on colon cancer screening	53.0% (2014) ¹	↑
			% of female 50-74 years old who are up-to-date on breast cancer screening	59.8% (2014) ¹	↓
			% of female 21-65 years old who are up-to-date on cervical cancer screening	76.5% (2014) ¹	↓

Data Sources:

¹Nebraska Behavioral Risk Factor Surveillance System, Entire Panhandle Region

²Nebraska Vital Records; National Center for Health Statistics

³Nebraska Department of Roads; Nebraska Office of Highway Safety

⁴Nebraska Risk and Protective Factor Student Survey, Region

Panhandle Worksite Wellness Council

Panhandle Worksite Wellness Council is gaining momentum as it embarked on its fifth year of serving employers of all sizes in the Nebraska Panhandle. We partner with employers to provide training, resources and guidance on developing effective worksite wellness programs. Members have access to a wealth of services and support including employee newsletters and bulletins, customizable policies, and incentive campaigns.

Most importantly, the Council provides personal service and support to ensure worksite wellness programs are strategically positioned for success and recognized an organizational asset that truly impacts employees.

What members say

“Chadron Community Hospital has been with the council since it began. Their guidance on this journey of wellness has led us to receive the Governor’s Wellness Award twice. The council provides a one-stop wellness shop at a lower cost than larger wellness programs. We have attained better employee health with them on our team.”

Diana Lecher
Home Health and Hospice
Director

“The council has provided great support for our employee wellness program. The services and offerings really

add to the betterment of our organization. Having this type of service in the Panhandle is definitely something that is a major asset to the region and provides opportunities that organizations would otherwise not be able to access.”

Lucas Schumacher
Cabela’s Wellness Manager

“Using the challenges and education offered by the council has given us tools to promote health and wellness in a cost effective and interactive way.”

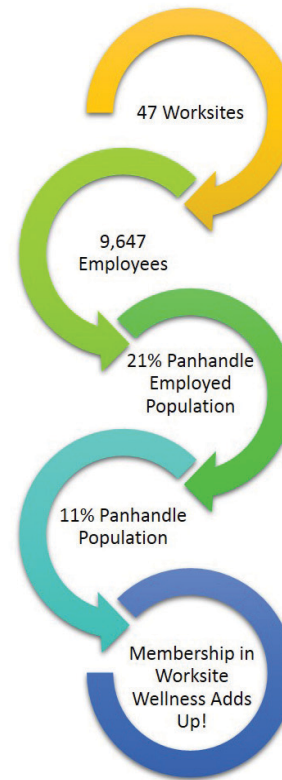
Kendra Dean
Cirrus House Operations
Manager

The Council is an organization’s greatest resource for worksite wellness.

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 provides a **virtual toolbox** with resources members can use to advance their worksite wellness program.
5. As part of the Panhandle Public Health District, the Council provides **evidenced-based programming, training** and **resources**.



Jessica Davies
Panhandle Worksite
Wellness Coordinator



Advisory Committee

The following Advisory Committee Members and businesses graciously give of their time to provide guidance and oversight of the council:

- Chair - Dan Newhoff, Box Butte General Hospital
- Vice Chair - Lucas Schumacher, Cabela’s
- Secretary/Treasurer - Annie Loutzenhiser, FALCO
- Shelley Beguin - Beguin Enterprises, LLC
- Diana Lecher - Chadron Community Hospital
- Kendra Dean - Cirrus House
- Susan Wiedeman - Panhandle Coop
- Crystal Smith - Platte Valley Companies
- Karen Harbach - Northwest Community Action Partnership
- Linda Roelle - WNCC

The Council specializes in supporting employers in the Panhandle region. We recognize that many employers support a diverse and remote workforce and offer innovative ways to overcome the challenge of working with a virtual team. We understand that many of our employers do not have full-time wellness resources and work to provide resources and training to make running a worksite wellness program as easy as possible.

Networking

One of the key benefits to membership includes the opportunities to network with and learn from fellow members. PWWC offers:

- Face-to-face networking opportunities with fellow worksite delegates in Alliance, Chadron, Sidney and Scottsbluff
- “Members only” online networking forum
- Ongoing communications of applicable workshops, conferences and events throughout the nation

Training

PWWC provides ongoing support and training to help members develop and strengthen their worksite wellness programs. The Council hosts regional training events and an annual conference. Training opportunities include foundational training like Worksite Wellness 101 and more advanced topics and trends. In addition to live events, the Council also hosts webinars.

Tools and Consultation

PWWC provides the resources and consultation members need to effectively develop and manage a worksite wellness program.

- Research: We ensure members’ success by providing a Health Risk Appraisal to identify health concerns and an electronic interest survey to understand participant preferences.
- Strategy: Next, we provide free consultation to help write an annual wellness operating plan. We provide ongoing support to ensure worksite wellness programs follow the evidenced-based process that aligns with the Governor’s Excellence in Wellness Award criteria.



Turnkey Service

PWWC helps make your job easier. We offer a number of resources to help you engage and educate your wellness participants. Resources include:

- Communication: two monthly newsletters – one targeting wellness committee members and one produced directly for employees, monthly wellness bulletins, brochures and additional resources
- Resources: access to public health resources for screening and testing such as home radon and colorectal cancer screening kits, samples and templates for environmental change policies
- Incentives: free access to five, customizable behavior change programs annually; and access to two, web-based incentives for an additional, discounted fee
- Education: access to the members-only section of the PWWC website and closed Facebook group
- Programming and Services: The Council provides resources and training for the National Walk @ Lunch Day and National Diabetes Prevention Program. In addition, the Council has a pilot health coaching program available.

Panhandle Safety & Wellness Conference Award Recipients

Five Panhandle businesses were honored with the Governor’s Wellness Award from Governor Ricketts at the September Panhandle Safety & Wellness Conference in Gering. Cirrus House, Educational Service Unit #13, and Western Nebraska Community College all received the Sower Award for sowing the seeds for wellness. Box Butte General Hospital and Chadron Community Hospital received the Grower Award for growing the seeds for wellness within their organizations.

“We are so proud of each of these organizations for their commitment to employee health. They are certainly leaders in the region and we commend them for all of their work.” Jessica Davies, Worksite Wellness Coordinator

Governor Ricketts thanked the recipients for their leadership and relayed the importance of worksite wellness to conference attendees as a key strategy to attract and retain a quality workforce, maintain a great quality of life, and reinforce a healthy lifestyle.

- Box Butte General Hospital and Chadron Community Hospital wellness programs were both honored for producing improved employee health outcomes at the awards ceremony.
 - Box Butte General Hospital offers a number of environmental supports and programming like the National Diabetes Prevention Program to improve health status.
 - Chadron Community Hospital has a 100% tobacco-free campus, decreasing tobacco rates to less than half of Panhandle and Nebraska averages.
- Cirrus House has a unique wellness program as it targets both employees and clients. Their program aims to provide quality wellness supports through increasing physical activity, access to healthier food options that emphasize fruits and veggies, and ongoing efforts to keep high levels of program engagement.
- ESU #13 has found it particularly helpful to offer a number of onsite staff health screenings, publish a monthly staff newsletter focusing on wellness, and include wellness activities for students.
- Western Nebraska Community College has committed to a “Sit Less Initiative,” encouraging employees to try a sit-to-stand desk or walking workstation options.



Western Nebraska Community College

(l-r) – Kathy Ault, Terri Allen, Governor Ricketts, Linda Roelle, Dave Groshans

Don't miss the 2016 Conference!



Box Butte General Hospital

(l-r) – James Koetemann, Dan Newhoff, Governor Ricketts, Marina Girard, Scott Alwin



Chadron Community Hospital

(l-r) – John Navarro, Kinsie Hanson, Diana Lecher, Sarah Hageman, Governor Ricketts, Lea Griese, Cheryl Abegglen, Scott Meier, Harold Krueger



Cirrus House

(l-r) – Brent Anderson, Governor Ricketts, Deen Johnson, Holly Enriquez, Michelle Burton



Educational Service Unit 13

(l-r) – Desira Martin, Ashley Moore, Governor Ricketts, Sara Peterson, Laura Barrett




Increasing Healthy Food Choices

Hospitals and public institutions work to increase healthy food offerings through their vending and cafeterias in partnership Panhandle Worksite Wellness Council. In a recent survey of hospital and public institution employees, 50% disagreed or strongly disagreed that most food and beverage choices in the vending machines at work were healthy, followed by 21% who neither agreed nor disagreed, and 29% who agreed or strongly agreed. Additionally, a large portion of employees (41%) agreed or strongly agreed that if there were a greater variety of healthful food and beverage choices, they would use them more. This was followed by 31% who neither agreed nor disagreed, and 29% who disagreed or strongly disagreed.

Healthy cafeteria recommendations include things like free drinking water with no charge for cups/glasses, pricing healthier items the same as or less than less healthy items, and offering fresh fruit and salad bar options along with healthier soups and burger options. Several local hospitals have already implemented wonderful supports. An example of Chadron Community Hospital's healthy vending initiative is highlighted on the bottom left. They have worked to simplify choosing by using a "stoplight approach," designating food items on a green, yellow, and red continuum to show nutritional quality.

Chadron Community Hospital
Cares About Your Health!

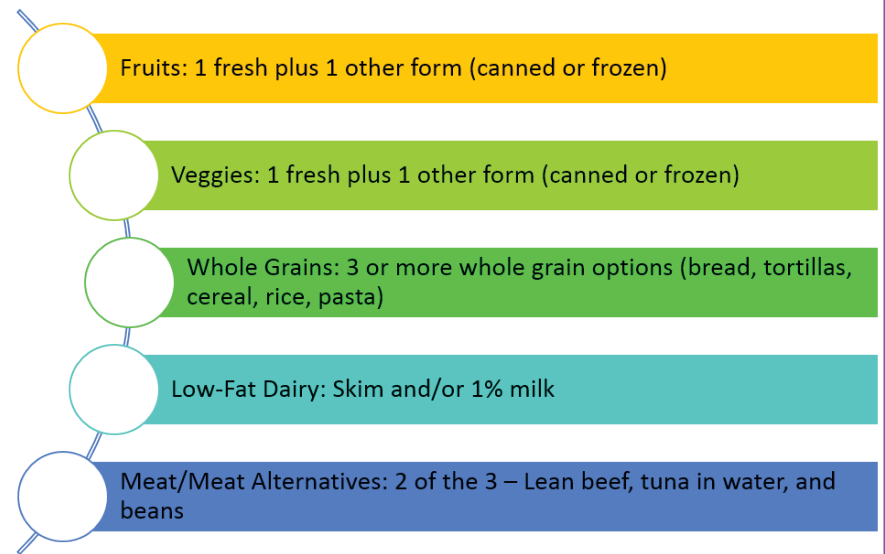
To help you choose healthy options, follow the stoplight

	Healthiest	<u>Calories:</u> 150 or less <u>Fat:</u> 3 grams or less <u>Carbohydrate:</u> 30 grams or less <u>Sodium:</u> 150 mg or less
	Healthier	<u>Calories:</u> 150-300 or less <u>Fat:</u> 5 grams or less <u>Carbohydrates:</u> 30 grams or less <u>Sodium:</u> 360 mg or less
	Less Healthy	<u>Calories:</u> Over 300 <u>Fat:</u> Over 5 grams <u>Carbohydrate:</u> Over 30 grams <u>Sodium:</u> Over 360 mg



Increasing grocery and convenience store healthy choices.

PPHD assessed over 100 grocery and convenience stores in 12 counties in May 2015. The Nutrition Environment Measure Survey, outlined below, measures the availability of fruits, veggies, whole-grains, dairy, and meat. We are excited to provide support and partner with food retailers to increase healthy choice options.



Join the Movement to Activate the Panhandle



The journey to a happier and healthier “good life” begins with one step. Walking is the single most powerful thing you can do for yourself. It is also a great way to spend time with the people you care about ... to connect, share your life and create memories. *Getting started is simple. Just Step and Repeat.*

Taking a walk is such an easy thing to do, but many people will say they can not find the time, it is not safe in their neighborhood, or it leads to nowhere.

As a community, Sidney had the opportunity to gather input from residents in an effort to design community-specific initiatives centered on walking, biking and safety for everyone. The infographic to the left summarizes the planning sessions.

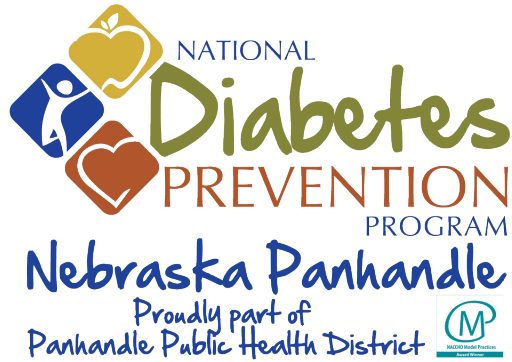
While Sidney has a terrific trail system in place, local community members met to discuss what else they can do to make the city more walkable, bikeable, and runnable – where it is safe to be active and infrastructure and programs are in place to encourage more physical activity.

“We know people are looking to live in communities with opportunities for individuals to connect with family and friends and support an active lifestyle,” said Jessica Davies, Wellness Coordinator for PPHD.

“We were excited with the input from the meeting and are moving forward,” said Davies. “We look forward to replicating the success in other Panhandle communities as well.”

The US Surgeon General issued “Step It Up! Call to Action to Promote Walking and Walkable Communities” in September, recognizing the importance of physical activity for people of all ages and abilities. Improving walkability means communities are created or enhanced to make it safe and easy to walk.

National Diabetes Prevention Program in the Panhandle



During the program, people at risk for type 2 diabetes (high blood sugar) meet as a group with a trained Lifestyle Coach to learn ways to add healthy eating and physical activity into their daily lives.

NDPP has two main goals:

- lose 5%-7% of starting body weight.
- be physically active for 150 minutes a week.

This evidence-based year-long lifestyle change program is proven to lower the risk of type 2 diabetes by 58%.

Through the program, group members track their food and activity. They work with their Lifestyle Coach and the group to overcome obstacles to a healthy lifestyle, including stress reduction and coping skills.

The diabetes epidemic is significantly affecting the health and economy of the U.S. and the Panhandle of Nebraska. In the U.S., 1 in 9 adults have diabetes and 1 in 5 health care dollars is spent caring for someone diagnosed with diabetes.

To learn more about joining NDPP in the Panhandle email tprochazka@pphd.org call 308-487-3600 ext 107 or visit www.pphd.org/DPP.html.

PPHD was honored with the **Model Practice Award** at the 2015 Annual Conference of the National Association of County and City Health Officials (NACCHO).



The award celebrates local health departments for developing programs that demonstrate exemplary and replicable best practices in response to a critical local public health need. The NDPP in the Panhandle was one of 19 local health department programs to receive NACCHO's prestigious Model Practice Award.

“We are proud to receive NACCHO’s Model Practice Award. The award is evidence of our commitment to developing responsive and innovative public health programs with our partners that improve the health of local residents.”

Kim Engel, Director



(l-r) – Dr. LaMar Hasboug, NACHHO Executive Director, Tabi Prochazka, PPHD Regional NDPP Coordinator, Swannie Jett, president-elect of NACCHO

The National Diabetes Prevention Program (NDPP) in Hemingford is the first in the state to achieve full recognition by the Center for Disease Control and Prevention Diabetes Prevention Recognition Program (DPRP). The purpose of the DPRP is to recognize programs that have shown that they can effectively deliver a proven lifestyle change program to prevent type 2 diabetes.

Currently there are 9 sites going for recognition across the Panhandle. The goal is to reduce the number of residents at risk for type 2 diabetes and chronic illnesses.

NDPP Success

17 class completed the 12 month program in 2015

13 Community | 4 Worksite

Over 1800 pounds lost

204 participants enrolled

Tobacco-Free in the Panhandle



Tabi Prochazka
Tobacco-Free in the
Panhandle
Coordinator

Tobacco use remains the single largest preventable cause of disease and premature death in the U.S., yet over 10,000 Panhandle residents still smoke cigarettes. Every year more than half (56%) of smokers in Panhandle tried to quit smoking cigarettes.

“Quitting is hard, but research shows that smokers who have support are more likely to quit for good. Nebraska has a number of excellent resources to help people quit, including the free and confidential Nebraska Tobacco Quitline at 1-800-QUIT-NOW.”

Tobacco-Free in the Panhandle supports policies and retail compliance checks to eliminate secondhand smoke exposure and prevent youth initiation.

We have worked with:

Outdoor Venues

County fairs and outdoor recreational facilities such as pools and parks

Policies give adults the chance to be tobacco-free role models for youth.

Multi-Unit Housing

Landlords are quick to know the benefits of having a smoke-free property.

Schools

Many are extending their policies to include tobacco-free policies campus-wide, including e-cigarettes.

Businesses

- Tobacco-free campus policies
- 15' from the entryway policies
- Tobacco-free childcare facility policies
- Tobacco-free worksite policies
- Smoke-free campus policies

Retail compliance checks in the Panhandle have been above 90% since 2011. Research shows that children in communities that consistently conduct compliance checks and keep failure rates below 10% are less likely to use tobacco products.

We are here to assist anyone wanting to pass a tobacco-free or smoke-free policy to make the Panhandle a healthier community.

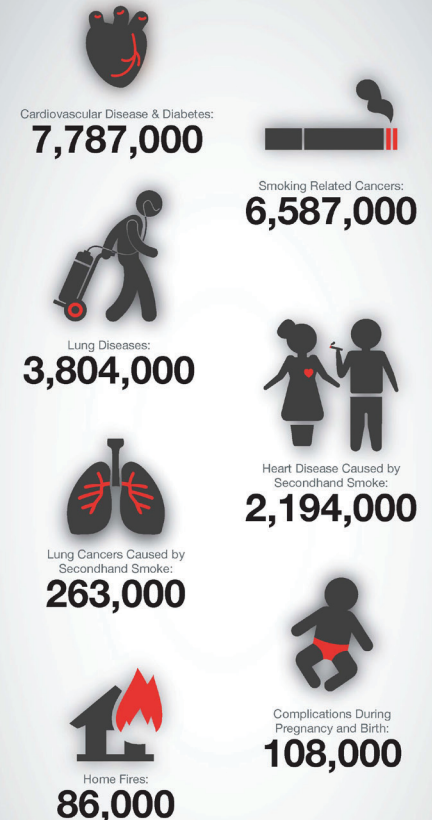
For technical assistance and signage contact Tabi Prochazka, tprochazka@pphd.org, 308-487-3600 ext. 107. Posting a sign prohibiting tobacco use raises awareness and is a vital part of enforcement.

Funding for Tobacco-Free in the Panhandle is provided by the Nebraska Department of Health and Human Services/Tobacco Free Nebraska Program as a result of the Tobacco Master Settlement Agreement.

#20MILLION

people have died because of smoking and secondhand smoke since the first Surgeon's General Report on Smoking & Health was released in 1964.

20 Million Deaths: By the Numbers



These deaths are more than just numbers – they are our parents, spouses, siblings, children, and friends.



Share a story of someone you lost to smoking by using #20Million.

View other stories at cdc.gov/20million.



Source: 2014 Surgeon General's Report on Smoking & Health

E-cigarettes Among Youth on the Rise

“It’s not too early to talk to your child. Addiction can lead to a lifetime of serious health problems. The best way for you to protect your child is to prevent tobacco use.” said Prochazka. “According to the CDC nearly 90% of smokers start smoking before they’re 18.”

One effective action for success is to teach youth about the dangers of smoking and secondhand smoke, including e-cigarretes. E-cigarettes are an untested and unregulated product and contain varying amounts of tobacco-based nicotine or synthetic nicotine.

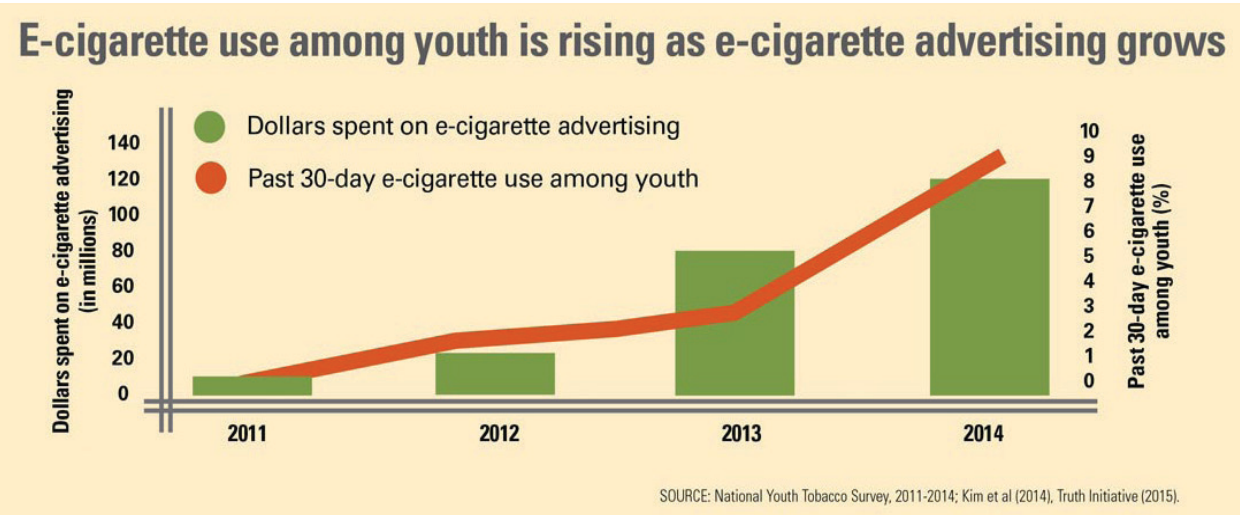
Youth nicotine use is unsafe whether in chewing tobacco, cigarettes or e-cigarettes.

- The adolescent brain is still developing. Nicotine use during adolescence can disrupt the formation of brain circuits that control attention, learning, and susceptibility to addiction.
- Poisonings have resulted among users and non-users of e-cigarettes due to ingestion of nicotine liquid, absorption through the skin, and inhalation. E-cigarette exposure calls to the national poison centers increased from one per month in September 2010 to 215 per month in February 2014, and over half of those calls were regarding children ages 5 and under.



E-cigarette use among high school students soared in the U.S. from 1.5 percent to 13.4 percent, and among middle school students from 0.6 percent to 3.9 percent from 2011 to 2014. Spending on e-cigarette advertising also rose from \$6.4 million in 2011 to an estimated \$115 million in 2014.

“The same advertising tactics the tobacco industry used years ago to get kids addicted to nicotine are now being used to entice a new generation of young people to use e-cigarettes,” said CDC Director Tom Frieden, M.D., M.P.H. In 2014, e-cigarettes became the most commonly used tobacco product among youth, surpassing conventional cigarettes.



Cancer Prevention

Colon Cancer is the second leading cancer killer in the United States. Getting screened for colon cancer saves lives. The Nebraska Colon Cancer Screening Program and PPHD are working together to improve colon cancer screening rates in Nebraska by offering free fecal occult blood test (FOBT) kits.

Colon cancers almost always develop from precancerous polyps (abnormal growths) in the colon or rectum. Screening tests find polyps, so they can be removed before they change into cancer. Screening tests find colon cancer early, when treatment works best and the chance for a full recovery is very high.

Colon cancer develops with few, if any symptoms at first. If symptoms are present they may include, blood in the stool, a change in bowel habits, general unexplained stomach discomfort, frequent gas, pains, or indigestion, unexplained weight loss, and chronic fatigue. Because people often do not have any symptoms in the early stages of colon cancer, having regular screening tests beginning at age 50 is the most effective way to reduce your risk of colon cancer.

Colon Cancer Symptoms

- Blood in or on the stool
- A change in bowel habits
- General, unexplained stomach discomfort
- Frequent gas pains or indigestion
- Unexplained weight loss
- Chronic fatigue
- No symptoms in the early stages

Risk Factors

- Eating a low-fiber, high-fat diet
- Being overweight
- Smoking
- Inactive lifestyle
- Certain hereditary conditions, such as the tendency to have many colon polyps
- Family history of colon cancer, especially parents or siblings

“An FOBT kit is simple, free, and it’s an important step in preventing cancer,” explained Becky Corman, Registered Nurse with PPHD. Corman said as soon as you turn 50, you should get screened at regular intervals. Contact PPHD today at 1-855-227-2217 for a free FOBT kit.

Pool Cool promotes sun safety for lifeguards and patrons. In 2015, Chadron State Park and the Hemingford, Bayard, and Big Springs public pools adopted policies for sun safety. The policies include components for staff, such as:

- Wear sunscreen and lip balm of at least SPF 15 whether in or out of the pool
- Apply sunscreen 30 minutes before entering the water and reapply every 2 hours during the day
- Wear sunglasses that protect from 100% of UVA/UVB rays (full-spectrum)
- Seek shade whenever possible.

Pool staff receive training and materials from PPHD to teach and promote sun safety via signage proved through Pool Cool and from healthy modeled behaviors from the lifeguards. Both adults and children can benefit from sun safety practices.



Chadron State Park Swimming Pool Staff

FREE Colon Cancer Test!

“I don’t have time for colon cancer.”

Colon cancer is the 2nd leading cause of cancer related deaths in the U.S. but it can be prevented.

Take the time.

If you’re 50 or older and don’t have time for colon cancer, talk to your doctor and get screened.

Expires June 1, 2016

This coupon is good for a FREE home testing kit so you can get screened for colon cancer.

To get your kit you can call:
Panhandle Public Health District

308-262-2217

Department of Health & Senior Services
DHHS
 NEBRASKA
5/USBDP002043-06

Panhandle Prevention Coalition

The Panhandle Prevention Coalition is a part of the Panhandle Partnership, united together by passion and dedication to healthy and safe people across the lifespan in the Nebraska Panhandle.

Efforts include - but are not limited to - reducing underage drinking, binge drinking, drinking and driving, prescription drug abuse, and tobacco prevention.

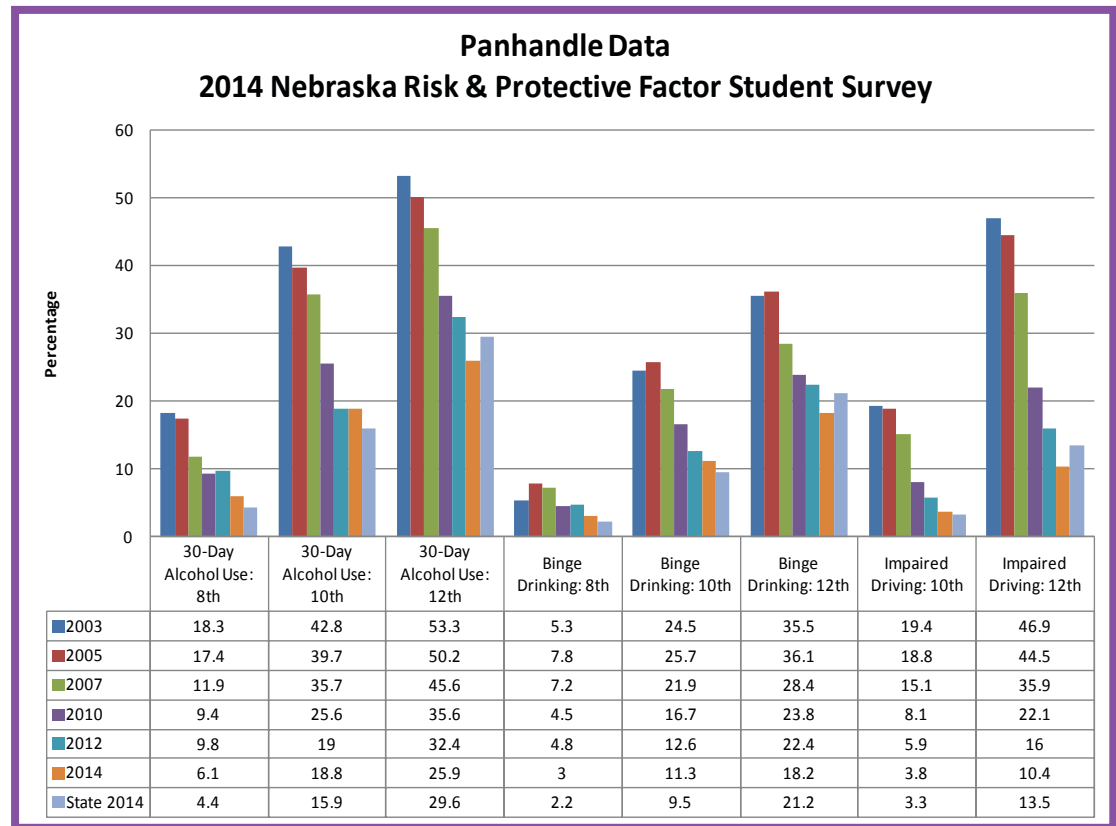
The PPC raises awareness of current social norms and trends while seeking to change social context and individual behaviors around substance use and abuse. The PPC works collaboratively with many partners to open discussions, educate, initiate policy change, and mobilize resources to change community norms.

Here is what you can do:

- Talk early and often to your kids about not using tobacco, alcohol, and other drugs. Create clear expectations.
- Always enforce the minimum drinking age of 21.
- Call law enforcement if you suspect underage parties or drinking and driving at any age at 1-888-MUST-BE-21.
- Thank law enforcement for providing compliance checks and responsible alcohol and tobacco retail training.
- Involve youth in planning and implementing healthy activities.

Data trends are moving in the right direction. Themes from the 2014 Nebraska Risk and Protective Factor Student survey indicate:

1. A dramatic reduction in drinking behavior continues.
2. There is no substantial increase in use of other drugs and use of some drugs (inhalants, prescription drugs) appears to be decreasing.
3. Despite legalization in nearby Colorado, marijuana use has not increased in Nebraska Panhandle youth.



“Prevention is an active process of creating conditions and fostering personal attributes that promote the well-being of people.”
William Lofquist

Healthy Families America



When I got pregnant, I never imagined breastfeeding. Throughout my pregnancy Jennifer brought factual research and benefits regarding breastfeeding. Breastfeeding was definitely difficult in the beginning. I would cry and our son would cry; it was kind of a disaster the first few weeks. I'd turn to my husband and say, "This is why women stop breastfeeding. Right here, right now." But I was lucky to have my husband's support along with Jennifer to remind me of brain development, bonding and emotional attachment so we stuck with it!

I've been around babies all my life but that doesn't mean I know about babies. My whole pregnancy I was scared but HFA helped me know what to expect during pregnancy, delivery and now as a parent, and they reassure me that all my feelings are normal. Myrna is teaching me mothering skills that I never knew existed. It's awesome to be a mother and with HFA's help it's much easier and less confusing.



Before joining the HFA program I was a meth addict, homeless and hopeless. Then I met Sandra, with Sandra's help I am clean, sober and I am no longer homeless. In the beginning I was not happy with the news of my pregnancy, but now I am extremely happy and thankful to God for the support. I am hopeful and I'm learning about all the ways I can be a great parent for my child.

I have suffered extreme prenatal depression. Linda has supported me on this entire journey with consistent home visits, prenatal education, and delivery preparation. I feel more emotionally prepared for the challenges labor and parenting pose for me. I'm anxious for the baby to arrive and for continued support from HFA as we welcome our new baby into our family.



HFA got me help. I was depressed due to many stressors: pregnant, homeless, lack of finances for school, separated from my husband and two small children, absolutely no social supports - I'm from Barbados." Bernadette attends my prenatal appointments with me and asks question so I can get resources, such as the WIC program. She also encouraged me spiritually and I found a family away from home. Through the great support I have furnished housing and things have turned around for me and my baby in every way.



*Parenting Coach/Intake Specialists (l-r top):
Linda Ainslie, Sandra Babin, Jennifer Eversull, (bottom Bernadette Sanchez, Myrna Hernandez*

*Program Manager: Betsy Walton,
Program Supervisor: Melissa Galles.*

For more information contact
Melissa Galles | mgalles@pphd.org
www.pphd.org/hfa.html
308-633-2866 | 877-218-2490

Healthy Families America: "The Instruction Manual"

Pregnancy and parenting is hard work; not to mention scary!

lack of money
medical needs
homeless
domestic violence

STRESS EMOTIONAL
feel alone

DEPRESSED


NO SOCIAL SUPPORTS

Doctors Appointments

ADDICTED
alcohol, drugs, gambling, sex

WORK & SCHOOL OBLIGATIONS

It's especially hard when other life factors occur...



WHAT HAPPENS WHEN PARENTS DON'T KNOW:

What to do?


What to ask?

Who to ask?

The Child Suffers.

The Family Suffers.

The Community Suffers.



healthy families america.

Nebraska Panhandle
A Division of Panhandle Public Health District


Last year, we served 124 families and 84 children with those families in the Healthy Families America Nebraska Panhandle program in Scotts Bluff, Morrill and Box Butte Counties.

"The Instruction Manual"

FAMILIES in HFA:

- Participate in home visits
- Learn positive parenting skills and gain knowledge of their child's development
 - Attend fun filled, family-focused group activities, gaining positive social connections
- Receive referrals to other services within our communities for concrete support in times of need
 - Cultivate and strengthen nurturing parent-child relationships

SO UNTIL THESE COME WITH AN INSTRUCTION MANUAL . . .



and you have all the support you need . . .



We'll be there!

Preventing Suicide: Reaching Out and Saving Lives

Persons throughout the Panhandle had the opportunity to participate in the annual Out of the Darkness Community Walks in Alliance, Sidney, Scottsbluff and Chadron.

The walk's primary goal is to raise awareness of the devastating effects of suicide and to raise funds for local and national suicide prevention and awareness programs.

“Suicide is a public health problem and is plagued by silence and stigma that continue to be barriers for seeking help. These walks help bring suicide out of the darkness and raise money for education, prevention and awareness programs.”

Janelle Hansen, Health Educator

One in four people live with a mental health condition. This means that someone you know, has or probably had thoughts of suicide. We never know what another person is going through. This is a public health issue that does not discriminate by age, gender, ethnicity, or socio economic status.



Suicide leaves behind countless family members and friends wondering, “Why did this happen?” “How will I get through it?”

The Panhandle Suicide Prevention Coalition meets to increase awareness of suicide and offer a support system for survivors of suicide.

**Out of the
DARKNESS**
COMMUNITY WALKS
American Foundation for Suicide Prevention

Risk Factors for Suicide

A combination of individual, relational, community, and societal factors contribute to the risk of suicide. Risk factors are those characteristics associated with suicide – they may or may not be direct causes.

- family history of suicide
- family history of child maltreatment
- previous suicide attempt(s)
- history of mental disorders, particularly depression
- history of alcohol and/or substance abuse
- feelings of hopelessness
- impulsive or aggressive tendencies
- cultural and religious beliefs (e.g., belief that suicide is a noble resolution of a personal dilemma)
- local epidemics of suicide
- isolation, a feeling of being cut off from others
- barriers to accessing mental health treatment
- loss (relational, social, work, or financial)
- physical illness
- easy access to lethal methods
- unwillingness to seek help because of the stigma attached to mental health and substance abuse disorders, or to suicidal thoughts

If you or someone you know is considering suicide, contact the National Suicide Prevention Lifeline at

1-800-273-8255 (TALK).

[www.pphd.org/Suicide Prevention.html](http://www.pphd.org/Suicide%20Prevention.html)

VetSET Nebraska – Serve. Educate. Transition.



VetSET Nebraska was created to assure that veterans returning to rural Nebraska have the support and resources to successfully rejoin their families and communities.

Regardless of where or how they serve, veterans and their families that return to our communities are different from when they left, with needs as diverse and individual as they are. That is why we have to intentionally collaborate as a community to fill the gaps in service.

“People thanked him for his service, and then I think they assumed the uniform was hung up and our life got back to normal. It didn’t. We’re still trying to figure out this new and confusing normal.”

Family Member of Nebraska Veteran



Kendra Lauruhn
VetSET Coordinator

Become a part of the Panhandle Veteran Resource Network to advise and advocate for veterans and their family members!

To get connected to your local resources, please contact Kendra Lauruhn at klauruhn@pphd.org or 308-633-2866 ext. 106.

www.pphd.org/VetSet.html

For veterans, service members, and family members:

- connect you to local resources in the Panhandle
- provide information on activities and support for veterans and family members
- ensure your voices and needs are heard.

Are you a community provider?

The use of community providers by veterans, service members, and their families has increased dramatically in recent years – a trend expected to grow. Are you ready for them when they walk in your door?



VetSET Nebraska Can:

- provide information and training on the unique culture, experience and language of veterans and their families
- assist with serving your veteran populations
- help you list your organization on Nebraska’s Network of Care Website www.networkofcare.org
- refer veterans and their families to your organization.

Top Stressors Related to Military Lifestyle

- Deployment or separation
- Isolation from friends or family
- Employment or work
- Financial

We are a healthier and safer Panhandle community. 21

Children's Health



Janelle Hansen
Health Educator

Dental Day was held in June for the twelfth consecutive year. Students from the University of Nebraska Medical Center (UNMC) College of Dentistry and Dental Hygiene trekked out to the panhandle to be part of the Dental Day. About 250 children without dental insurance were treated in Sidney, Alliance, Gordon and Chadron.

UNMC participation: 44 students studying dentistry and dental hygiene, 7 dental residents and 7 faculty members. Panhandle sites: Gordon Memorial Hospital; Box Butte General Hospital; CAP-WN Dental Clinic (Dr. James Hadden) in Chadron; Dr. Maxwell and Dr. Wilcox in Alliance; Summit Dental Clinic (Dr. Neal) and Life Smiles in Sidney (Dr. Hlavinka).

Kids Fitness and Nutrition Day is a special event for area third-graders to learn about health and wellness annually. It is designed to teach the third graders how to live healthier lifestyles, instilling crucial knowledge that will hopefully stick with them into their adult lives. The overall purpose will teach the youth how physical activity and nutrition work together to maintain health.

This year there were three locations for Kids Fitness & Nutrition Days. They were held in Alliance, Chadron and Sidney. Each of the events drew students from 10 counties which sixteen area schools participated, with about 550 third-graders.

Kids Fitness and Nutrition Day consists of 13 stations for students to visit: six stations are nutrition based, and seven are non-competitive physical activity stations.

This event is developed and funded, in part, by the Nebraska Beef Council, University of Lincoln at Kearney and Panhandle Public Health District.

Scrub Club is aimed at Preschool through 4th graders. There are six simple steps(wet with warm water, lather with a squirt of soap, scrub tops, bottoms and in between fingers, scrub finger nails, rinse all the soap off and dry your hands with a towel) that are stressed to effectively remove germs from your hands. Handwashing is a win for everyone, except germs.

Hand washing is a great way of staying healthy. It is like a “do-it-yourself” vaccine. Keeping our hands clean and germ-free can help keep us from getting sick and also spreading germs.



“Dental Day was a great success. 231 kids got the necessary care Dental Day provides, plus the UNMC students gained great clinical experience.”

Emergency communication plan. What is it? Why should you make one?

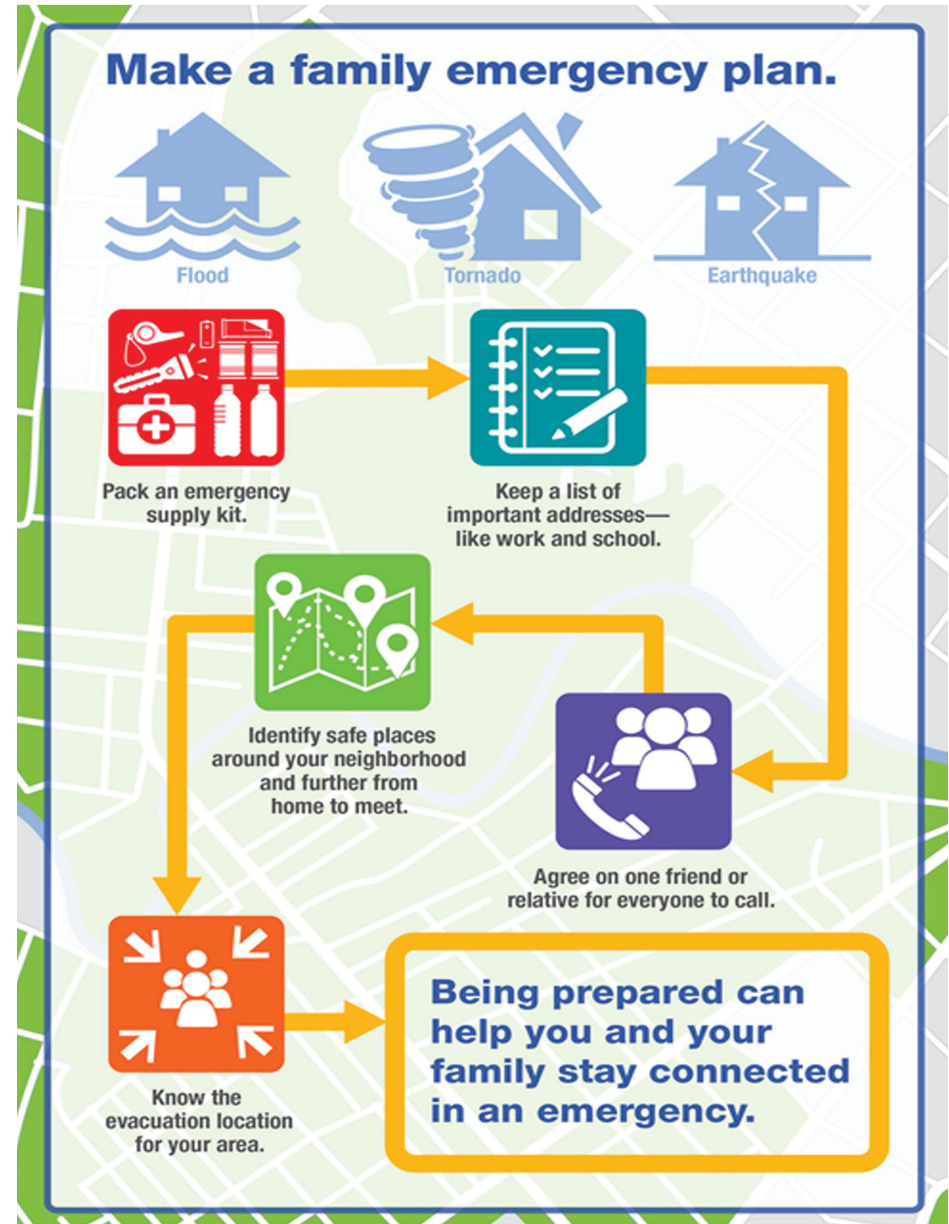
Emergencies can happen at any time. Do you know how to get in touch with your family if you are not together?

Tips for a successful plan:

- Let them know you're OK! Pick the same person for each family member to contact. It might be easier to reach someone who's out of town.
- Text, don't talk! Unless you are in immediate danger, send a text. Texts often have an easier time getting through during emergencies, and you don't want to tie up phone lines needed by emergency responders (like 911).
- Know your numbers! Memorize the phone numbers of immediate family members and those living with you.
- Discuss Exits! Figure out two ways out of every room in your house in case of a fire.
- Pick a Meeting Spot! Where will you meet up with your family if you have to get out of your house quickly? Where will you meet if your neighborhood is being evacuated and you're not at home?



DON'T WAIT. COMMUNICATE. MAKE YOUR EMERGENCY PLAN TODAY!



Panhandle Region Medical Response System



Melody Leisy, RN
PRMRS Coordinator

World events can happen close to home as seen with the care of Ebola patients here in Nebraska. Emerging infectious disease represent an ongoing threat to the health and livelihoods of people everywhere. While Ebola may be an unlikely risk in the Panhandle, there are many other diseases that threaten our public health system, both known and yet to be discovered.

Panhandle Regional Medical Response System Coordinator Melody Leisy, reports that Panhandle hospitals and public health departments work together to share resources and expertise by reviewing and updating their procedures based on the current recommendations. They provide training support and testing of plans with one another.

“We understand any frontline hospital is just one flight away from these diseases potentially coming through the door. Our best defense is the collaboration and relationships we have built through this partnership.” Melody Leisy

Over the past year, PPHD has worked with first responders, dispatch centers, hospital points of entry, and clinic receptionists to ask important trigger questions regarding travel history, risk of exposure to a contagious disease, and current symptoms. As a prepared citizen, it is best to call ahead to your healthcare facility if you suspect you may have a contagious disease and be aware of local health threats when you travel.

Leisy points out the goal of the healthcare community is to quickly identify and isolate a patient to safely manage and contain spread of a disease.



Hospitals continually train on the importance of everyday tasks and use of personal protective equipment. Drills are conducted on basic skills, like donning and doffing the protective gear crucial to dealing with airborne or dangerous bodily fluids. They also take part in more complex exercises that test the decision-making in real time as if the hospital had a suspect patient.

Cheryl Cassidy, Director of Nursing at Chadron Community Hospital, stated, “The steps for protection of the healthcare provider are fairly simple, but they need to be performed with attention to great detail to minimize the risk of spreading disease.”

“High-level isolation patient care will always stretch our resources, but our healthcare community has made great strides in contagious disease safety and protection,” concluded Leisy.



Regional West Medical Center provides IsoPod Training for their staff. An IsoPod provides safe isolation and transportation of an infectious patient.

Communicable Disease Surveillance

Tularemia, a disease that can affect animals and people, was widely reported in Nebraska and neighboring states in 2015. Twenty-four human cases were reported to the Nebraska Department of Health and Human Services in 2015, representing a 25-year high for the state. Eleven of Nebraska's tularemia cases were identified in Panhandle Public Health District's jurisdiction.

Tularemia is caused by a bacteria found in animals, insects, soil and water. Rabbits, hares, and rodents are especially susceptible. People can become infected through several routes, including tick and deer fly bites, skin contact with infected animals, ingestion of contaminated water, and inhalation of contaminated aerosols or dusts.

Symptoms of tularemia vary depending on the route of infection, but may include: fever and chills, joint pain, muscle aches and headaches, dry cough and chest pain, and an open sore and swelling at the site of a tick bite, or swollen lymph nodes. Symptoms usually appear 3-5 days after exposure to the bacteria, but can take up to 14 days to appear. While it can be a potentially serious disease, most infections can be treated successfully with antibiotics.

Take the following steps to help prevent tularemia: using insect repellent, wearing gloves when handling sick or dead animals, and avoiding mowing over dead animals.



Becky Corman, RN
Public Health Nurse

“Effective surveillance systems play a role in identifying emerging infectious diseases, acts of bioterrorism, and potential influenza pandemics, as well as providing a basis for evaluating the outcome of public health prevention programs.”

Becky Corman, Public Health Nurse

Communicable Disease Surveillance involves early detection, prompt investigation, and monitoring the occurrence and distribution of disease. Timely recognition of a disease within a community coupled with rapid investigation enables the proper implementation of prevention and control activities. These activities can contain the spread of disease within the population, reducing the risk of disease transmission before an illness becomes a major public health crisis.

Communicable disease surveillance includes - but is not limited - to: foodborne illness, vaccine-preventable diseases, influenza, and vector borne and animal related diseases such as West Nile Virus and rabies.

Through communicable disease surveillance, PPHD works to protect individuals and families from disease and control spread throughout communities.

Communicable Disease Investigations:

Panhandle Public Health District	2015	2014
Animal Exposure (bite or nonbite)	15	18
Aseptic meningitis	2	3
Campylobacteriosis	13	8
Cryptosporidiosis	9	4
Giardiasis	2	3
Group A Streptococcus, invasive	1	0
Group B Streptococcus, invasive	1	0
Haemophilus influenzae, invasive	0	1
Hepatitis B Virus Infection, chronic	1	1
Hepatitis C Virus Infection, chronic or resolved	30	24
Legionellosis	1	1
Lyme Disease	1	1
Mumps	2	0
Pertussis	6	21
Rabies, animal	0	1
Salmonellosis	10	5
Shiga toxin-producing Escherichia coli (STEC)	3	5
Shigellosis	0	3
Spotted Fever Rickettsiosis	4	0
Toxoplasmosis	1	0
Active Tuberculosis	1	0
Tularemia	11	0
Varicella (chickenpox)	2	0
West Nile Fever	7	4
West Nile, Encephalitis/meningitis	1	1
Total confirmed, probable and suspect cases	124	104

Environmental Health

Radon is an invisible, radioactive gas that occurs naturally in soil. **It is the second leading cause of lung cancer in the United States.** It can be found everywhere, including the Panhandle. According to the Nebraska Department of Health and Human Services, one out of every two homes in Nebraska has elevated radon levels. The good news is that radon lung damage is preventable. Testing for radon in homes is recommended, and the U.S. Environmental Protection Agency (EPA) also recommends investing in Radon Resistant New Construction.

Panhandle communities can be proactive about radon by adopting Appendix F of the International Residential Code.

Appendix F provides requirements for new homes to be built using Radon Resistant New Construction methods which includes a mitigation system that is built into the home to reduce radon gas.

The EPA recommends mitigation if a home tests above 4 picocuries per liter of air (pCi/L). Active systems lower radon levels to below the EPA recommended action level of 4 pCi/L.

To get more information on Appendix F or to request a free radon test kit for your home, contact Melissa Cervantes, mcervantes@pphd.org, 308-487-3600 ext. 108.

Free Lifesaving Radon Test Kit

Get your free radon test kit from PPHD by emailing mcervantes@pphd.org, mailing this coupon to Panhandle Public Health District, PO Box 337, Hemingford NE 69348, or calling (866)701-7173. Be sure to tell us you received this coupon in the annual report!

Name: _____
 Physical Address: _____
 Mailing Address: _____
 City: _____ Zip: _____
 Phone Number: _____

By requesting a free kit, I give my permission for results to be reported to myself and PPHD.

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

WEST NILE VIRUS Prevention Tips

Protect your family.

- ▣ Use a mosquito repellent that contains DEET.
- ▣ Wear long-sleeved shirts, long pants, shoes, and socks.
- ▣ Take extra precautions at dawn and dusk.
- ▣ Get rid of standing water.
- ▣ Add larvicides to animal drinking troughs, water gardens, ornamental fountains, ditches and ponds.
- ▣ Keep window screens in good repair.

West Nile Virus had increased activity in the Panhandle over the 2015 season.

- West Nile Virus positive pools of mosquitos were found in Dawes, Garden, Scottsbluff, and Sheridan Counties.
- The Panhandle had 8 positive human clinical cases of West Nile Virus.
- A confirmed mosquito pool was found in Sheridan County containing St. Louis encephalitis, which is another form of West Nile Virus.

Mosquitos breed in standing pools of water, so draining any water around your house or property is vital for prevention. For larger areas, mosquito dunks are available from PPHD.

PPHD also collects and submits certain bird species to be tested for West Nile Virus. If you would like to report a dead bird during the summer season, please contact Melissa Cervantes, mcervantes@pphd.org, 308-487-3600 ext. 108.



Melissa Cervantes
 Environmental Health Coordinator

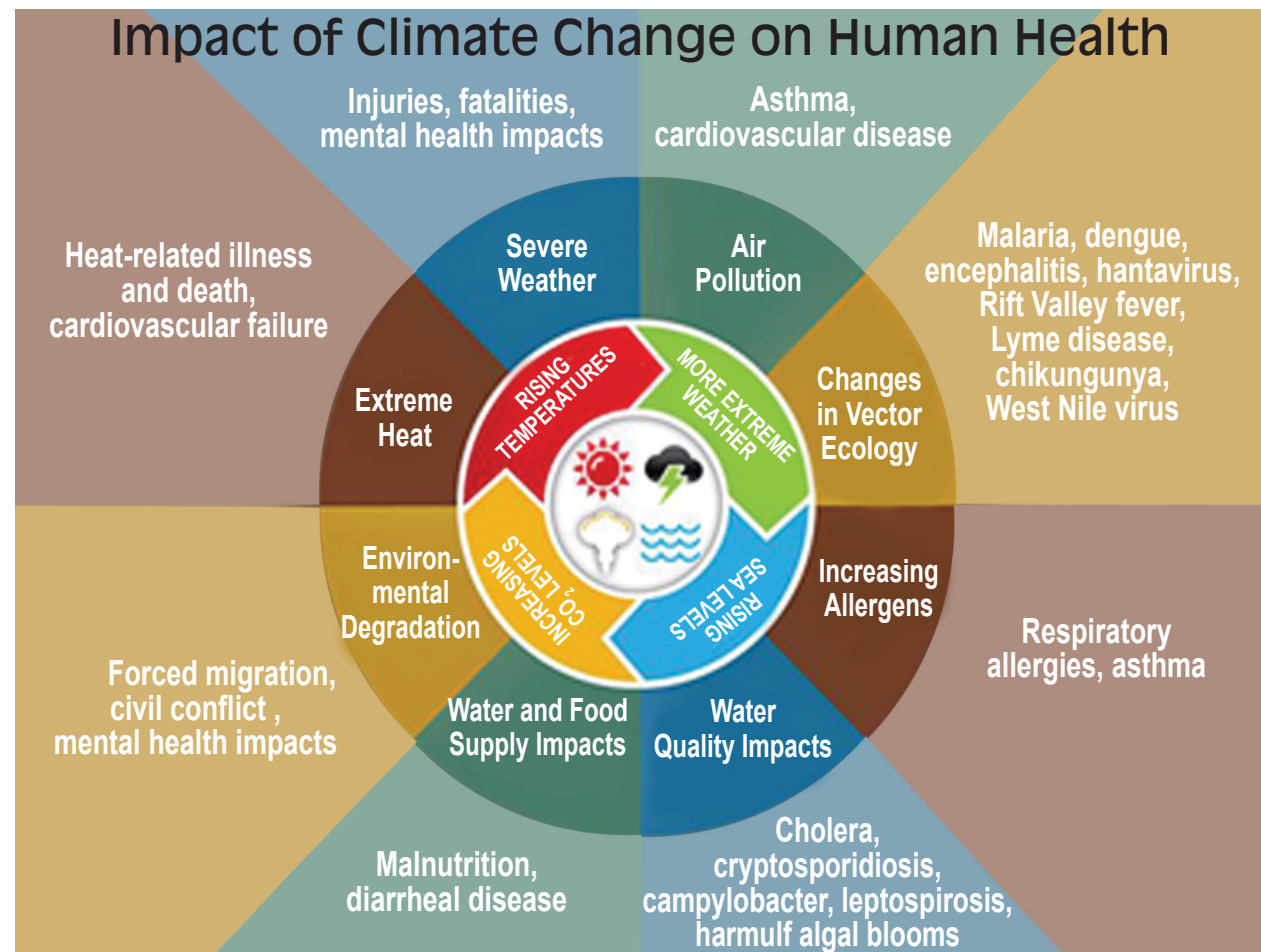
Brownfield Redevelopment Projects

Panhandle Area Development District (PADD) with PPHD are working with 15 Panhandle communities to help them identify blighted or underutilized properties, known as 'Brownfields', to address needs in the community. Brownfields properties could have potential hazards, such as contamination or pollutants, that can threaten the health of the surrounding area and limit a communities ability to repurpose the space.

The community response from several initial meetings has already been positive and PPHD is looking forward to 2016 and the continual process of helping redevelop our communities for a healthier Panhandle. With a grant and technical assistance from the Agency for Toxic Substances and Disease Registry (ATSDR), PADD, PPHD and two consultants have partnered to embark on this year-long project that will ultimately lead to a region-wide inventory of blighted commercial properties. This inventory can help communities visualize how redevelopment of these properties may increase overall community health and wellness.

To learn more about the brownfields health initiative visit:

www.atsdr.cdc.gov/sites/brownfields



Changes in our climate are affecting our health. Climate change has several aspects to it that involve:

- Severe weather patterns such as drought, floods, and storms
- Air quality issues and increases in lung diseases
- Infectious diseases including vector-borne disease such as West Nile Virus and Lyme disease

Health impacts from climate change are worldwide and affect everyone, including our own Panhandle residents. Invest in the future and get the conversation started. We have the capability to help be stewards for our environment and prevent the impacts of climate change.

Financial Statement

Balance Sheet as of June 30, 2015

Assets

Cash and equivalents	\$217,892
Accounts receivable	\$230,959
Inventory	\$18,459
Certificate of deposit	\$225,402
Property and equipment, net of depreciation	\$72,828
Deferred outflows of resources for pensions	\$39,347
Total Assets	\$804,887

Liabilities

Accounts payable	\$41,581
Accrued payroll liabilities	\$77,481
Net pension liability	\$99,228
Total Liabilities	\$211,290

Net Position

Invested in capital assets	\$72,828
Unrestricted	\$520,769

Total Net Position **\$593,597**

Total Operating Revenues **\$1,602,779**

Total Operating Expenses **\$1,678,504**

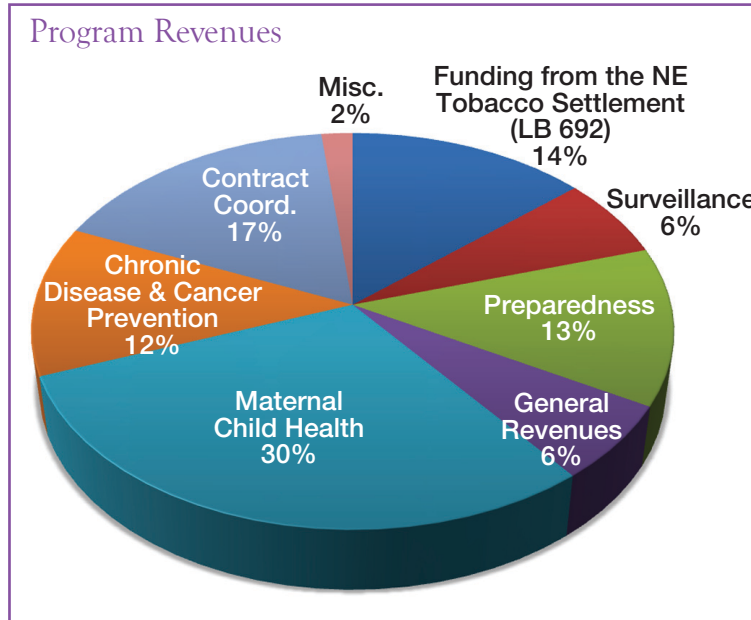


Sara Hoover
CFO, Accreditation
Coordinator

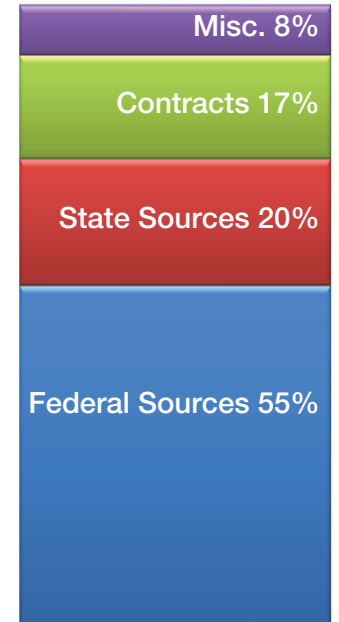


Erin Sorensen
Office Manager,
HR Coordinator

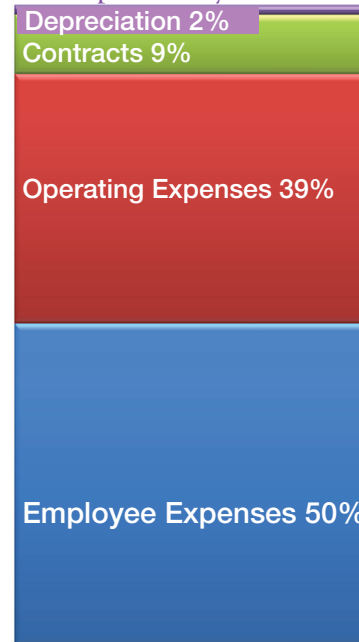
Where does the money come from . . .



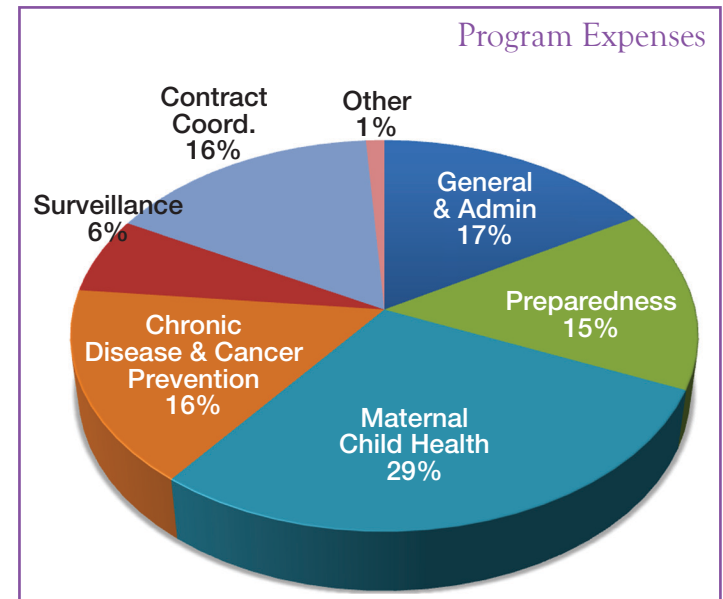
Revenues by Source



Expenses by Source



Where does the money go . . .



PPHD's Guiding Principles:

- We make data driven decisions based on community assessments.
- We implement and encourage others to use evidence based practices to assure that the needs of the community are met and done so in a manner that provides proven outcomes.
- We strive for integrity, honesty, and transparency to assure fairness and accountability to those we serve.
- We honor the work of the entire local public health system, as all partners play an important role in improving the quality of life and health status of the Panhandle Community.
- We participate in continuous evaluation and improvement to assure quality in the way we operate and that we are meeting community needs in the best way possible.
- We engage in collaboration, teamwork and partner development with an emphasis on the assets and resources that the collective impact of relationships can bring.
- We are good stewards of public funds to assure that we optimize available funding and meet the greatest need in the most cost-efficient, ethical manner.
- We model the strategies at an organizational level that we encourage others to adopt.
- We work to empower communities and individuals to take charge of their health through policy, system and environmental changes that help them make the healthy choice the easy choice.
- We believe in serving the Panhandle Communities in a nondiscriminatory, culturally competent manner, knowing that everyone has the right to quality of life and receiving information and services in a way that meets their needs.

Health departments across the nation are joining the ranks of hospitals, schools, law enforcement, and other professional agencies, by becoming accredited.

Accreditation through the Public Health Accreditation Board, known as PHAB, became available in late 2011. As of November 2015, 96 departments in the United States have become accredited. The accreditation status is in place for 5 years, after which departments will complete the application process again.

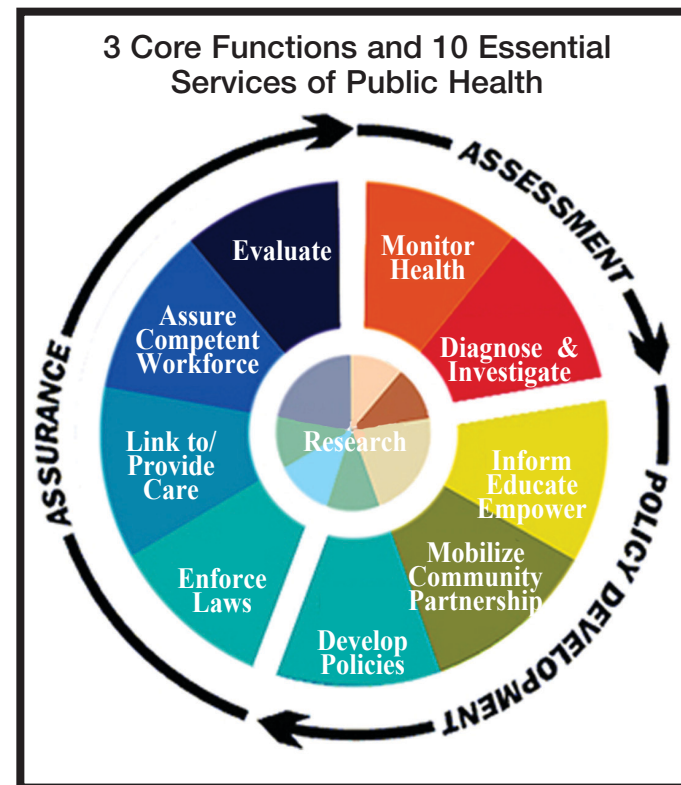
Why is accreditation important?

Public health accreditation is intended to assure that health departments are assessing and identifying the needs of the jurisdiction, providing optimum public health, and identifying areas to apply quality improvement methods. Achieving an accredited status ensures that the public health department is providing the best public health possible. The health department receives feedback on areas of strength and utilizes quality improvement tools to make

improvements where needed. Quality improvement is a key component of public health accreditation.

Where is PPHD at in the accreditation process?

PPHD has submitted documentation for review and is awaiting a site visit from a PHAB team in 2016. Our goal is better public health for everyone – in the Panhandle, in Nebraska, and across the nation!



PPHD Staff

Kim Engel, Director

Main Office:

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Phone 308-487-3600 | Toll Free 866-701-7173 | Fax 308-487-3682

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Jessica Davies, Worksite Wellness Coordinator
Jennifer Eversull, Parenting Coach and Intake Specialist
Melissa Galles, Healthy Families America Supervisor
Janelle Hansen, Community Organizer, Health Educator
Sara Hoover, Chief Financial Officer, Accreditation Coordinator
Tabi Prochazka, Coordinator, TFN, NDPP, Preparedness
Erin Sorensen, Office Manager, Human Resource 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

Linda Ainslie, Parenting Coach and Intake Specialist
Sandra Babin, Parenting Coach and Intake Specialist
Joanna Chua, 2015 Community Health Planner, Performance Management Coordinator
Myrna Hernandez, Parenting Coach and Intake Specialist
Kelsey Irving, 2015 Community Health Planner, Performance Management Coordinator
Kendra Lauruhn, VetSET Coordinator
Bernadette Sanchez, Parenting Coach and Intake Specialist
Betsy Walton, RN, Healthy Families America Program 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

Becky Corman, RN, Public Health Nurse
Melody Leisy, RN, PRMRS Coordinator, Public Health Nurse



Serving the Nebraska Panhandle counties of:

Banner | Box Butte | Cheyenne | Dawes | Deuel | Garden | Grant | Kimball | Morrill | Sheridan | Sioux

Message from the Director

According to the County Health Rankings, many counties in the Panhandle rank in the lower quarter for health outcomes and health factors compared to other Nebraska counties (www.countyhealthrankings.org). The graphic below illustrates the method used in the ranking process. The two maps show which quadrant the Nebraska counties rank in.

Every three years PPHD leads a community health needs assessment and develops a community health improvement plan. This is critical for developing policies and defining actions to target efforts that promote health.

Together with Panhandle Partnership members, hospitals, schools, economic developers, employers and other stakeholders, we work throughout the region toward a healthier and safer Panhandle community. By working collectively, we can improve these rankings and improve the health of our communities!

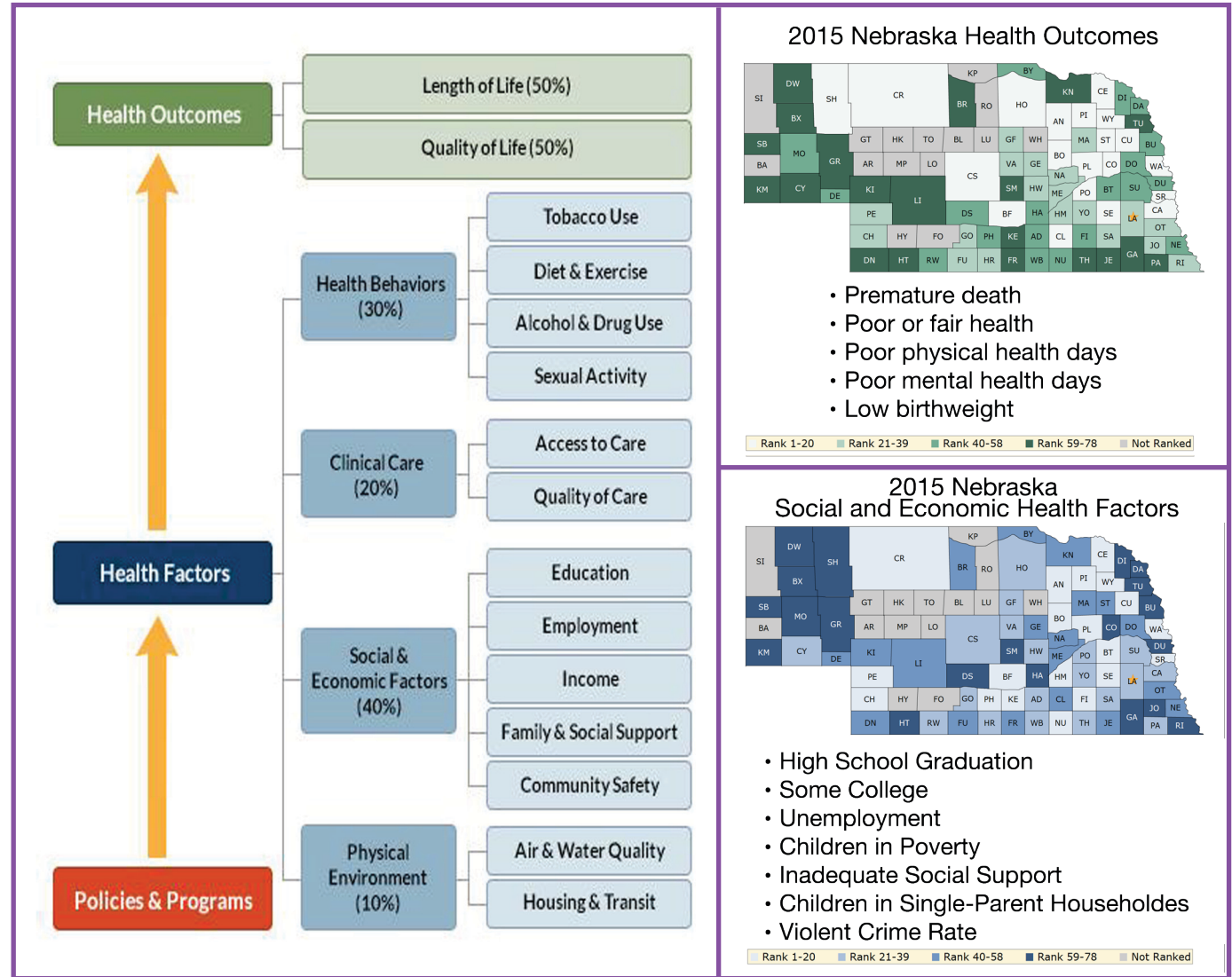
If you are looking for current health status data, please browse our website or give one of our offices a call. If you need technical assistance on passing model policies to make the healthy choice the easy choice at your worksite, school, or community, please contact us. We have highly trained staff that can help make your initiative successful.



Thank you for taking the time to look through the PPHD's annual report.

Kim Engel

Kim Engel
Director





Fort Robinson State Park in Dawes and Sioux County.
The grounds of Fort Robinson State Park are well-suited for walking and riding bicycles.
Photo courtesy of NEBRASKAland Magazine/Nebraska Game and Parks Commission.

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