

Tai Chi Easy classes offered across Panhandle



Panhandle Partnership certifies 30 trainers

It's a New Year and everyone has a resolution to increase physical activity and lessen stress in their lives. Tailor made for both of these resolutions is a physical activity class offered by trained Tai Chi Easy facilitators from the Panhandle region.

Ongoing classes are currently being offered or in the works in Alliance, Hemingford, Kimball, and Scottsbluff. A complete listing can be found at www.pphd.org/tai_chi.htm.

Practicing Tai Chi triggers key physical and psychological health benefits including: stress relief, balance, heart health, immune boosters and mental focus. "It doesn't matter how you do it. It does not matter when you do it. It just matters that you do it," said Dr. Roger Jahnke, leader for 30 certified trainers in the Panhandle.

Since the facilitator training course in July 2008, 300 people have taken part in ongoing sessions for Tai Chi Easy in the Panhandle. More than 1,000 participating in Tai Chi Easy demonstrations, including school children and seniors. Tai Chi Easy is a social model of the popular martial art technique. It is considered a soft style martial art — an art applied with internal power — to distinguish its theory and application from that of the hard martial art styles which are used in combat or as weapons of self-defense, such as Taekwondo.

"Tai Chi Easy is known as an evidence-based method of fall prevention," Jessica Davies, wellness coordinator at PPHD, said. "The slow, gentle movements, coupled with deep breathing and focusing exercises, provide stress relief, heart health and immune boosting capabilities."

"All age groups and fitness levels are encouraged to participate," she continued. "It is particularly helpful for older adults to strengthen balance and flexibility. Tai Chi Easy can be done sitting or standing and is especially good for toning and firming the core muscles (in the abdomen)."

For more information on Tai Chi Easy, contact any of the instructors listed on page three.

"It does not matter how you do it. It does not matter when you do it. It just matters that you do it."

~ Dr. Roger Jahnke

Chadron couple finds radon levels high in new home

Sheri Daniels didn't have any reason to suspect her home was poisoning her family. But a simple, free radon test kit she'd picked up from Panhandle Public Health District was sitting in her office reminding her of every homeowner's responsibility — check your home for radon. It could save your life and the life of those you love.

New to the southeast Chadron neighborhood, Daniels' home is a newer two-story home with a split-level basement. She and her husband moved into their home in

October 2007. January is Radon Action Month, so she had heard publicity on the radio and in the newspaper advising her to get the home tested. January is the best month to test your home for the colorless, odorless gas so common in the Panhandle.

And the results were amazing — Daniels' home tested 13.9 pico-Curies per liter of air or pCi/L on the first short-term test and more than 14 pCi/L on the follow up long-term test. An earlier test by a former landowner was deceptively inaccurate, she said, prob-

ably because he tested the home during the summer when homes are opened up and do not trap the toxic gas.

Another contributing factor to the high radon rates Daniels uncovered in January 2008 may have been a heavy snow on the ground surrounding the home. A state radon official told her the heavy ground cover probably prevented the radon from dissipating naturally and made it more likely to leach into her home through a crack or opening in the foundation. Radon can also seep through

concrete.

The Daniels family hired Gary Wolfe to do the abatement for their home. Abatement procedures include a vent pipe system and fan, which pulls radon from beneath the house and vents it to the outside. This does not require major changes to your home. Sealing foundation cracks and other openings makes the system more efficient and cost-effective. Radon contractors can use other methods depending on the design of your home and other factors, Wolfe said.

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Wellness program offers healthy options at work

A new focus on wellness will target many adults in the Panhandle where they spend most of their day — where they work. Wellness Coordinator Jessica Davies of Panhandle Public Health District said she will merely act as a tour guide, helping committees from various workplaces to develop programs based on evidence-based processes.

Resources offered by PPHD include a personal health assess-

ment, coupled with an interest survey at each site. Davies said a summary including the results of the assessment and survey will give the local team the information they need to choose interventions that meet the needs of their co-workers. Wellness programs could include environmental programs like adopting tobacco-free campus policies, "Lunch & Learn" programs for employees on stress management or financial wellness, adopting healthy meeting guide-



Jessica Davies
Wellness Coordinator

lines, offering physical activity opportunities for breaks and meal time and creating an environment conducive to breastfeeding mothers.

Keeping breastfeeding moms happy is important to both the employer and the employee, Davies said. "Companies that place a value on child and family wellness promote employee loy-

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Panhandle
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Public Health

2008

Message from the Board President



Kay Anderson
PPHD Board
President

2008 was a pivotal year for Panhandle Public Health District. Our staff has increased and we've tripled the workspace in our Hemingford offices. PPHD is developing new programs on a regular basis to serve the public in health-related matters like protection, prevention and promotion.

The board of directors for PPHD kicked off the New Year in 2008 with a strategic planning session.

Our vision of a coordinated system of public health services that promotes and enhances the health status of the Panhandle-wide community was set on the right course with four strategic directions:

- ▶ Healthy People in Healthy Communities
- ▶ Learning and Growth
- ▶ Accountability and Improvement
- ▶ Partner to Promote Health

The PPHD staff went to work straight off putting wheels under the strategic plan developed by the board. Using a system called the Balanced Scorecard, staff developed the connections between the vision, the strategic directions and the everyday activities we will use to reach our goals.

Healthy People in Healthy Communities

As an organization, PPHD plans to increase access to care. We will continue to partner with communities to build emergency preparedness. We will establish a culture of health and wellness.

Learning and Growth

PPHD will develop culture, skills, training and technology to support our processes. We hope to continue to attract and retain exceptional staff. We will increase our capacity to address environmental issues. The board and staff will work hard on professional development. PPHD always attempts to ensure the proper use of appropriate technology.

Accountability and Improvement

Of course, we must remain fiscally and administratively accountable. PPHD will maintain sound management processes with integrity and transparency. We will develop policies to align with Governance National Public Health Performance Standards.

Partner to Promote Health

As a public health system partner, PPHD works to meet the needs of our Panhandle communities. We actively participate in planning for and implementing electronic health exchange technologies in the Panhandle to strengthen our surveillance capacity and enhance our data collection. PPHD builds and fosters strong relationships with communities. We are seen as the credible source of public health information for the Panhandle.

Just Move It!

Panhandle residents will get an increased opportunity to *Just Move It!* in the expansion of the community health initiative by PPHD this year.

Just Move It! began in early 2008 as a social marketing campaign to gain awareness by the community of the risk factors for cardiovascular disease, America and Nebraska's #1 killer. CVD can be decreased dramatically by eating a balanced diet, getting at least 30 minutes of physical activity and not smoking or being around secondhand smoke.

Wellness Coordinator Jessica Davies spearheads the campaign which targets Panhandle adults ages 25-65. In the first year, the campaign partnered with high school groups to get adults up and moving during school sporting events. Just moving to the tune of, "I Like to Move It," cheerleaders and other student leaders led adults in an upper body movement activity that was fun and highlighted the importance of getting your daily dose of physical activity. This program will continue in Year Two, Davies said.

Point-of-decision prompts in the shape of bright yellow footprints reminded folks to take the stairs or be active over your 15-minute work break, substitute chips for butter-free popcorn and helpful tips for quitting smoking. Large six-foot tall banners, emblazoned with the Just Move It! yellow tennis shoes logo, provided additional reminders to eat right, exercise and quit smoking throughout various community locations.

Downtown businesses displayed the footprints and included reminders about the three major CVD risk factors in paychecks and invoice envelopes. Worksite partners distributed paycheck stuffers to their employees to talk about the risk factor for cardiovascular disease.



just move it!
FEEL BETTER ~ LIVE BETTER

The banners and footprints were found in every Panhandle community in PPHD's 10-county jurisdiction, thanks to the sponsorship of local community coalition leaders and county organizers in each group. PPHD also partnered with the Chadron Native American Center to organize an adult basketball tournament that included health screenings for blood pressure, cholesterol, and body mass index.

Along with the high school partnership, Year Two of the initiative will focus more on worksite wellness, see page one.

Panhandle Public Health District

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

Kim Engel, Director
Sara Sulzbach, Office Manager
Jessica Davies, Wellness/Volunteer Coordinator
Melody Leisy, RN, PRMRS Coordinator Public Health Nurse
Becky Corman, RN, Emergency Response Coordinator Public Health Nurse
Rebecca Thompson, Environmental Health Coordinator
Mary Wernke, Training Academy, Communications & Grants Development Coordinator
Janelle Hansen, Community Organizer, Health Educator
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The vision of PPHD: A coordinated system of public health services that promotes and enhances the health status of the Panhandle-wide community.

Worksite wellness...

continued from page 1

alty," she added. "Breastfeeding creates healthier babies and healthier families. It helps to ensure bonding between parent and child. By offering a place and time for mothers to express breast milk, the company reaffirms the employee's value and ensures the woman and her family's commitment and loyalty to their employer."

Other offers targeted at individuals will also be available through local resources if a worksite wellness committee chooses – such as weight management programs or biometric screenings. The program will be ongoing, with early targets to include county governments and other businesses in each of the 11 Panhandle counties. Davies said any size of business is eligible for worksite wellness, from the very large industry to the very small mom-and-pop enterprise.

Tai Chi Easy instructors

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For more information on Tai Chi Easy, contact any of these instructors:

Alliance: Jeanne Murray, Micki Weinman, Carla Weisgerber, Rebecca Zumbahlen.

Hemingford: Jessica Davies, Kim Haas, Karen Hansen.

Sidney: Macy Adams, Chandell Oleson, Dulcie Rivers.

Chadron: Jill Mack, Roz Mader, Tom Serres.

Lewellen: Rose Brassfield.

Kimball: Joan Frances, Bill Loring, Charlotta Young, Kathleen Hunzeker.

Bayard: June Walker.

Bridgeport: Misty Graham.

Broadwater: Aleece Calarco.

Gering: Terri Allen.

Scottsbluff: Judy Amoo, Carol Batt, Jerrette Dally, Susan Martinez, Dallas Schaffer, Valerie Wilder.

Gordon: Sherry Retzlaff, Tracey Baseggio

Get Smart about antibiotics

Antibiotics are important in the treatment of many illnesses, but they are not the be-all and cure-all for every illness. Antibiotics are not effective for viral infections, for example, such as the colds or the flu. Antibiotics only kill bacteria — this is a long-documented medical fact.

However, most Americans have either missed the message about appropriate antibiotic use or they simply don't believe it. According to recent public opinion research, many consumers believe that antibiotics "cure everything." This perception is false.

Taking antibiotics when they are not needed potentially does more harm than good. Antibiotic treatment won't fight viral infection, make the patient feel better, yield a quicker recovery or keep others from getting sick. But **inappropriate use will contribute to antibiotic resistance.**



According to the Centers for Disease Control, antibiotic resistance is one of the world's most pressing public health problems. Over the last decade, almost every type of bacteria has become stronger and less responsive to antibiotic treatment when it treatment eally is needed. These antibiotic-resistant bacteria can quickly spread through communities, threatening public health with a new strain of infectious disease that is more difficult to cure and more expensive to treat.

The Nebraska Department of Health and Human Services and Panhandle Public Health District is joining CDC's effort to alert the public to the risks of inappropriate antibiotic use. We urge Panhandle residents to consult with their doctors and learn when antibiotic treatment is warranted.

Panhandle Public Health District is joining CDC's effort to alert the public to the risks of inappropriate antibiotic use. We urge Panhandle residents to consult with their doctors and learn when antibiotic treatment is warranted.

Message from the Director

We have just passed the Christmas holiday season and it's good to bask in the glow of happy times spent with family and friends. Our family was especially blessed to share this Christmas with our first grandchild and it was my opportunity to learn a lesson from a very small child that can apply to everyone.

This youngster, barely a toddler, received presents from Santa, parents and relatives. They were bright and shiny -- jiggled, jingled, jangled and glowed. But what did Baby Madison want to play with instead? The wrapping paper, the dishwasher and an old black sock recovered from the laundry!

The "black sock lesson," may seem to apply only to babies and laundry baskets, but the issue I see is the *simple* choices everyone makes in their health decisions that far outweigh the complicated diet programs and shiny body fat indicators.

Eating right, getting 30 minutes of physical activity most days and avoiding tobacco use and second hand smoke can be *simple* to understand. Easy activities include parking further away from the store entrance, walking while shopping, during lunch hours or breaks from work and taking the stairs instead of the elevator. A pedometer is another *simple* and effective tool.

These things are simple to understand, but not always so simple to do. So Panhandle Public Health District is here to offer support with work site wellness, healthy meeting guidelines and Tai Chi Easy courses. If your workplace doesn't have a wellness program or you're looking for a Tai Chi Easy course to reduce stress and tighten up those core muscles in your abdomen, contact our wellness coordinator, Jessica Davies.

Avoiding germs can also be *simple*. Wash your hands frequently; cough or sneeze into your forearm or the crook of your elbow, instead of your hand; and stay home if you're sick.

Finally, there are tools on our website at www.pphd.org that can help. Try the personal health assessment to track your well-being. Or check your communities health status, county-by-county. Improving your health status contributes to the health of others.

Thank goodness for simple blessings to make life easier and healthier! Here's to a Happy, Healthy 2009 for you and yours.



Kim Engel
Director

Public health nurses reach out to community for medical homes

Finding a doctor or dentist isn't always easy, especially in a rural area where there may be a shortage of health care professionals. Often, there are other roadblocks to finding the right physician for special situations. Overcoming barriers is a specialty for the Public Health Nurses at Panhandle Public Health District. Becky Corman and Melody Leisy, Registered Nurses, at the Bridgeport office of PPHD make it their business to keep an updated list of community resources and assist with referrals for Panhandle residents seeking a medical, dental or vision home.

If a client is new to the area, PH nurses can help find a care provider. If a provider doesn't accept Medicaid clients, PH nurses know where to turn. "During the recent gasoline price hikes, we had people who just couldn't afford to drive to their physi-

cian's office," Corman said. Language barriers can also make it difficult for clients and providers to communicate. By linking with available community resources, such as the county handi-buses, PH nurses can help clients who need to find transportation, need

assistance finding translators, or need help overcoming other barriers to healthcare.

While the services are primarily targeted at Medicaid or Kids Connection families, Corman said the PH nurses can help anyone in the Panhandle who needs help finding a medical, dental or vision care provider. Another service offered by the nurses is to the providers themselves. If the hospital or clinic is having difficulty with a client who is often late or misses appointments, the PH nurses can work with the patient to resolve the problem.

Some patients misunderstand the proper use of the emergency room for minor medical problems. Corman said, "PH nurses can educate patients regarding the appropriate use of the emergency room."



Becky Corman
Public Health Nurse

January: Radon Action Month

PPHD offers free radon test kits year 'round

Radon kills more people per year than drunk driving, falls, fires in the home or drownings. Testing for radon is easy and free, yet many do not take advantage of the simple test kit available from Panhandle Public Health District to check their homes (see coupon below).

"You can't see, smell or taste radon," said Rebecca Thompson, environmental coordinator at PPHD. "It is a gas caused by the breakdown of uranium in the soil, water and rocks around you – seeping into the buildings where you live and work. Since you spend the majority of time in your home, it is more likely you may be exposed to radon in your home. Fifty-six percent of homes tested in the state have exceeded the health standard set by the EPA."

Radon is the leading cause of lung cancer for non-smokers. The U.S. Environmental Protection Agency estimates that about 21,000 lung cancer deaths each year in the U.S. are radon-related, second only to tobacco-related lung cancer deaths.

Thompson said a short-term test, placed in the home for 3-7 days, is the first step in determining if your home has a potential radon problem. If the short-term test indicates your home radon level is above the level determined acceptable by the EPA, a follow up test, set out between three and twelve months is advised, followed by an appointment with a radon abatement professional. The short and long-term test kits are available to Nebraska Panhandle residents, free-of-charge.



The amount of radon in the air is measured in picoCuries per liter of air or pCi/L, Thompson said. Abatement procedures include a vent pipe system and fan, which pulls radon from beneath the house and vents it to the outside. This does not require major changes to your home. Sealing foundation cracks and other openings makes the system more efficient and cost-effective. Radon contractors can use other methods depending on the design of your home and other factors.

"If you are planning any major structural renovation, such as converting an unfinished basement area into living space, it is especially important to test the area for radon before you begin the renovation," Thompson said. "If your test results

indicate a radon problem, radon-resistant techniques can be inexpensively included as part of the renovation. Because major renovations can change the level of radon in any home, always test again after work is completed."

More information about radon is available at www.epa.gov or by calling PPHD at 308-487-3600.

Radon, continued

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Once the abatement process was complete, Daniels checked the home again and levels were down to 3 pCi/L and a later test showed only 2 pCi/L. The U.S. Environmental Protection Agency advises a long-term test and possible mitigation procedures when a home tests at a level greater than 4.0 pCi/L.

Daniels said she didn't test the upper stories of her home, but she did block off the lower level of the basement and didn't allow her two young children to go into the basement during the time the radon was detected there. A playroom in the upper level of the basement was still in use during the mitigation process.

Since her experience with the toxic gas, Daniels has shared the information about the free test kits with co-workers, neighbors and Chadron area physicians. Others have inquired of her about the test kits, which are available free by calling PPHD at 308-487-3600 or toll-free at 866-701-7173 or by visiting www.pphd.org.

Scrub Club reinforces hand washing

One single, simple act you learned as a toddler could prevent many illnesses, from the common cold to serious staph infections – washing your hands regularly. Only one in three adults washes their hands after using a public restroom, statistics show, but today's children are learning differently through a Panhandle Public Health District program, "Scrub Club."



*Janelle Hansen
Health Educator*

PPHD Health Educator Janelle Hansen targets preschool through grade 4 throughout the Panhandle to teach youngsters the importance of washing up thoroughly and regularly. Hansen said she carries along her own "germs," a bag of white powder that represents various bacteria and viruses commonly found on everyday items like toys, telephones and doorknobs.

After the children examine the germs, Hansen uses a black light to cause the invisible germs to appear in Technicolor on each child's hands. The real germs, she points out, are still invisible to the naked eye. Then it's time to scrub!

There are six steps to a proper hand washing and special songs to go along with the process. First, the children use warm water, not hot or cold, to wet their hands. After adding soap, children are taught to scrub for 20 seconds by singing or reciting their ABCs. Rinse, dry and THEN turn off the water, using your elbow or the paper towel, not your hand or you'll just pick up more germs on the faucet handle, Hansen said.

The primary message behind hand washing is the importance of being healthy over all, she said. There are 164 million school days lost to illness such as eColi and Salmonella.

Hansen said the ripple effect of offering Scrub Club to the youngsters helps their families and older friends learn about healthy habits like hand washing, physical exams, immunizations, dental, eye and hearing exams and other health information. Health Checks, including well-child exams, are included in the letter Hansen sends home.

Essential Services of Public Health -- It's What We Do!

- Monitor health status to identify and solve community health problems.
- Diagnose and investigate health problems and health hazards in the community.
- Inform, educate, and empower people about health issues.
- Mobilize community partnerships and action to identify and solve health problems.
- Develop policies and plans that support individual and community health efforts.
- Enforce laws and regulations that protect health and ensure safety.
- Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
- Assure competent public and personal health care workforce.
- Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
- Research for new insights and innovative solutions to health problems.

Hemingford man hit hard by West Nile Virus

Complications quickly develop

Shortly after Labor Day 2003, Dan Swanson of Hemingford probably wished he'd been hit by a truck – it might hurt less than the viral illness that was hammering his body. For more than a week, Swanson was shivering despite 90 degree days, long sleeves and heavy thermal underwear. His joints ached desperately and his eyes burned in both natural and fluorescent light. He took to wearing sunglasses indoors.

Finally, his doctor sent him to Regional West Medical Center, for further testing. A spinal tap revealed he had West Nile Virus, a potentially serious illness. Soon the virus had spiraled down into other serious illnesses and Swanson was diagnosed with both meningitis and encephalitis. Dr. Terry Himes of Scottsbluff sat Swanson and his wife Nancy down and said he couldn't promise Swanson would pull through.

"I'd heard of West Nile Virus, but mostly it was something you heard about horses getting," Swanson said. In 2003, there were 2,177 confirmed clinical cases among humans and

29 human deaths. More recent statistics show a huge turnaround (see table below).



Swanson said he was always leery of mosquitoes, as he would have a worse reaction from a mosquito bite than a bee sting. "I don't remember a particular bite," he said, "but I do know I avoided mosquitoes as much as possible."

Before his illness, Swanson said he practiced few precautions. Now, he seldom goes out after dark – but if he must, he wears long sleeves. As utilities superintendent for the Village of Hemingford, Swanson sees that standing water is managed properly, drained when possible and uses mosquito briquettes (available com-

mercially) when it cannot be drained. The village also sprays for mosquitoes on a regular basis during the summer and fall.

"I avoid ballgames, cover up or stay inside," he said. "I pretty much don't remember 7-10 days of my life in the summer and fall of 2003. For another week, I slept 24/7, with Nancy (his wife) waking me up every six hours for pain killers." Swanson said over the weeks that followed, his doctors alternated Codeine, Demerol, Percocet and Vicodin to try to counteract the recurring joint pains. Theragesic patches were also an ongoing treatment for pain.

The rollercoaster his life had become lasted another four to five months, one day at a time, before he "saw a light at the end of the tunnel." Swanson credits a regimen of vitamins and fish oil recommended by a nutritionist for isolating the illness. Treatment included a blue cold laser like those used by a dermatologist, he added.

West Nile surveillance PPHD priority

Panhandle Public Health District prepared for the 2008 West Nile Virus season late last spring through the collection of dead birds and trapping of mosquitoes. "Finding the virus in birds gives public health officials an indication of the level of virus in the area and the risk to human beings of contracting the disease," said Rebecca Thompson, Environmental Health Coordinator for PPHD.

Citizens may call PPHD at 308-487-3600 or toll free at 866-701-7173 if they see a dead bird, especially of the corvid or raptor variety, illustrated on the following page.

Raptors include hawks and eagles. Corvids include crows, Jays and magpies. If you are unsure about the bird's species, Thompson advises calling anyway and a public health staff member will respond.

All dead birds are entered into a state database, with those listed above sent on for testing. Testing will only be conducted on birds that are in good condition, with no evidence of maggots or rotting.

West Nile is transmitted through the bite of a mosquito that has picked up the virus by feeding on an infected bird. In turn, the mosquito can pass the virus to humans. Mosquito trapping for additional surveillance will begin in early June, Thompson said, to determine if the virus is present in the area. Only one type of mosquito, the common Culex variety, carries the virus.

West Nile includes flu-like symptoms such as fever and muscle weakness. Symptoms of West Nile encephalitis include inflammation of the brain, disorientation, convulsions and paralysis. People over 50 and those with weak immune systems are especially vulnerable to the disease.

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Year	Positive Human Cases	Human Deaths
2002	174 presumptive cases	7
2003	2,177	29
2004	54	0
2005	241	5
2006	311	5
2007	179	4
2008	52	not yet available

School, hospital surveillance track illnesses regionally

Nearly every day there are a few children home sick from school. With the cooperation of school staff, absences due to illness are monitored on a weekly basis. Panhandle Public Health District surveys all schools with an enrollment of 25 or greater to track student illnesses for trends and possible outbreaks of flu across the region. Absences are documented as due to one of the following illnesses: influenza-like-illness, fever, rash, gastrointestinal, strep throat or asthma.

School surveillance has been a practice in the Panhandle for the past several years, with every school in our jurisdiction participating, Melody Leisy, surveillance nurse with PPHD said.

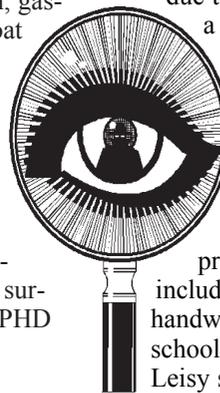
Becky Corman, also a surveillance nurse with PPHD, said they receive weekly reports on how many students are absent due to illness. Corman said there is a 90% reporting rate from the schools in the 10 counties in our jurisdiction each Wednesday.

In turn, Corman and Leisy report the region's school sur-

veillance figures to the state department of health where more encompassing statistics are recorded and mapped. Leisy said by monitoring absences they can see trends in illnesses that are more prevalent in the area.

Occasionally, Corman said, the nurses are asked for guidance on helping prevent the spread of illnesses through a school. When a large number of absences are due to common symptoms or a specific illness, school administration, PPHD, medical clinics, and hospitals in the community collaborate to strategize preventative measures to limit further spread of the disease. Corman said preventative measures may include anything from increased handwashing to recommending school closures. Corman and Leisy said administrators would need to close school and suspend all extracurricular activities for at least three to four days to prevent the spread of contagious diseases.

The best interest of the schools and the effectiveness of disease containment are considered when a school is faced with high absences due to illness.



Welcome to the board: Timothy Narjes, MD

Timothy Narjes, M.D. is the newest member of the Panhandle Public Health District board of directors. Dr. Narjes is a family practice physician, with a specialization in obstetrics. He works for Box Butte General Hospital at the Sandhills Family Center in Alliance.

Dr. Narjes is a 2004 graduate of the University of Nebraska Medical Center in Omaha and did his residency in Lincoln. Originally from Sidney, Dr. Narjes went through the Rural Health Outreach Program at Chadron State College. His wife is Kari Narjes.

PPHD's board includes 22 members: county commissioners, community-spirited individuals, a physician and a dentist.



Dr. Timothy Narjes

Brush 'n Up and Dental Day promote healthy teeth for kids

Each year more Panhandle youth are ready to flash their pearly whites, as they learn proper oral health techniques and receive better access to dental visits. Panhandle Public Health District Educator Janelle Hansen is working with PreK-4th graders in the region to learn about flossing, brushing, dental exams and other good oral health practices like drinking more milk and eating right.

Hansen said it is best to brush your teeth morning and night, plus after each meal, but if the post-meal tooth brushing is a hardship, a simple mouth rinse can help prevent decay. "Children at this age are losing their baby teeth and have an open mind for learning new things," Hansen said. Those new things to learn at a young age include healthy habits like daily brushing and annual dental exams.

The very young students in pre-school, kindergarten, 1st and 2nd grades enjoy a visit from Freddy Flossisar and Buggy Malone, crazy-clad stuffed animals who extol the virtues of brushing inside and out, way in the back, top and bottom. Hansen said one of the new things the children learn is to hold the toothbrush at a 45-degree angle to loosen food at the base of the teeth and to scrub their tongue and gums, as well.

Hansen gives each of the students a



toothbrush and a letter for home, to teach their parents about good dental hygiene, also. Tooth decay is the second most common disease, next to the common cold, she said. "Parents can learn a lot from their children," she concluded.

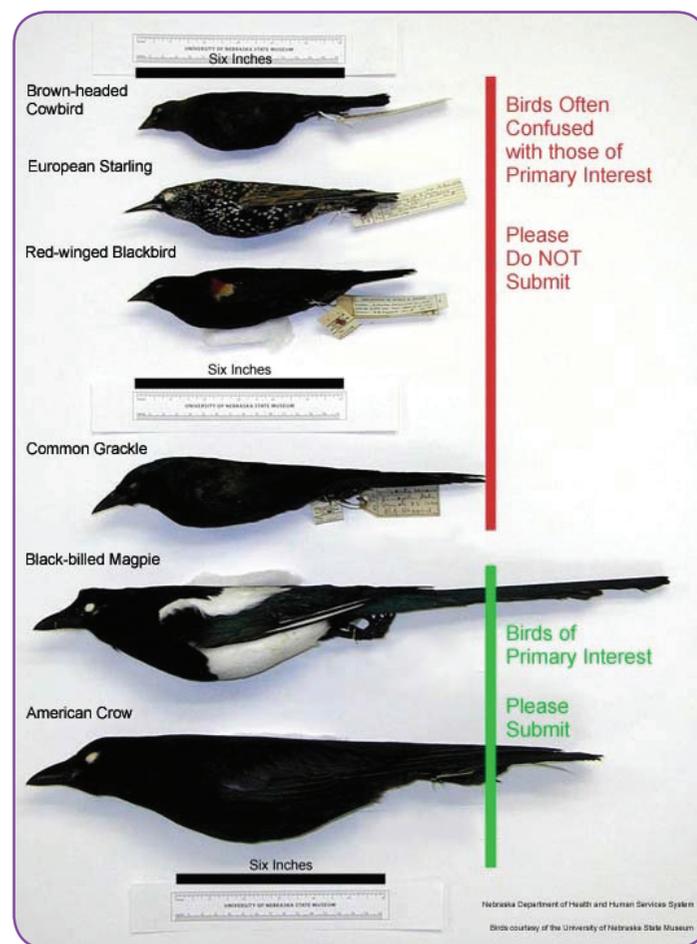
Brush 'n Up presentations are available in daycare homes and agencies, preschools and elementary schools from March through May, with a kickoff in February for Dental Health Month.

Dental Day 2008

Dental Day in Western Nebraska is fast becoming a tradition in the Panhandle -- an opportunity for children who may not see a dentist regularly to get a thorough check up on their teeth, mouth and gums. Dental Day is coordinated through the Panhandle Public Health District, area dentists, local hospitals and health services, and schools to target children in advance who require the dental care made affordable by volunteers such as local dentists and University of Nebraska Medical Center College of Dentistry students, staff, and faculty.

Dental Day began from a challenge of dental college deans to provide outreach into their communities. Dr. David Brown, UNMC associate dean, said their challenge focused not only on the unmet needs of the children in Nebraska, but also the inequalities of distribution for dental professionals across the state. Underserved children in Nebraska are three to four times less likely to have dental coverage, than those children who are covered by regular health insurance through their parents employers.

2008 Dental Days were June 6 and 7 in Alliance, Chadron, Sidney and Gordon and were coordinated by Betsy Horstman, RN.



Call PPHD at 308-487-3600 or toll free at 866-701-7173 if you see a dead bird like those pictured above.

Report dead birds:

- Hawks
- Eagles
- Crows
- Jays
- Magpies

Water testing checks for nitrates in homes

Panhandle Public Health District will partner with the Upper Niobrara-White Natural Resource District to offer domestic well water testing. The free test for nitrates will be offered at no charge as a preliminary measure for those concerned with possible hazards in their water. If the test shows a concern, residents will be referred to a certified lab for further testing.

Environmental Health Coordinator Rebecca Thompson said anyone in the Panhandle may request a bottle to collect their well water for testing. If they are a resident of the UNW-NRD, they may contact them directly as they collect domestic water well water samples for residents in their area.

For those individuals outside of this NRD or those who simply choose to collect the sample themselves, we are offering sampling bottles and can do a preliminary test for nitrates. Simple procedures should be followed to ensure an accurate sample. Testers should wash their hands and use the collection container provided by PPHD. "Run the faucet for five minutes before collecting the sample," Thompson added. The sample should be delivered to the test site as soon as possible, but if delayed the sample should be refrigerated.

"There are three NRDs in the Panhandle," Thompson said. However, the Upper Niobrara White NRD is the only one to do domestic well water testing. The other two NRDs go to the same irrigation and live-

stock water wells each year for sampling and are able to offer quality data for a number of years to show trends in water issues for non-domestic wells, such as the presence of unwanted chemicals and the possible effects of a higher or lower water table.

Further testing available for a fee

Thompson said Panhandle residents can also choose a certified lab to complete their water testing for more than nitrates at the outset. That process checks for as many or as few things the home owner would like to have tested. More information on the certified labs in the state is available through PPHD.

Nitrates are odorless and tasteless. Increased levels of nitrate can be found in some ground water due to contamination by leaching from faulty septic systems, run off from feedlots or overly fertilized farmland and even decomposing plant/animal material. Nitrate interferes with the ability of the blood to carry oxygen in infants, which, in severe cases, can result in death.

Research to determine a link between high nitrate levels in drinking water and cancer is on-going. Given the questions regarding the issue, it is advised to monitor your nitrate levels in domestic wells to maintain a level below 10 milligrams/liter. To avoid possible serious health consequences, annual testing of a domestic well is strongly encouraged.

West Nile Virus . . .

continued from page five

Simple precautions are available to "fight the bite," Thompson said.

- Using a repellent that contains DEET, picaridin or oil of lemon eucalyptus;
- Wearing long-sleeved shirts, long pants, shoes and socks;
- Taking extra precautions when going outdoors at dawn and dusk when mosquitoes are most active;
- Removing standing water where mosquitoes breed.

For additional information about West Nile Virus, visit www.pphd.org.

Nebraska residents breathe easier at work with passage of Clean Indoor Air Act

A breath of fresh air will blow through Nebraska June 1, 2009. The Nebraska Clean Indoor Air Act of 2008 goes into effect on June 1, requiring every Nebraska indoor workplace to be smoke free. The law includes restaurants, bars, keno parlors and other workplaces such as retail, office and manufacturing establishments. The only exceptions to the law are 20% of hotel rooms, tobacco-only retailers, facilities that research the health effects of tobacco and private residences that are not licensed day care homes.

Outdoor environments such as county fairs and beer gardens are not specifically covered in the law. Businesses are not required to provide an outdoor smoking area, but there is no distance requirement away from doors where smokers can smoke outside.

Local laws addressing smoke-free environments that are stronger than the state law remain in force. Local communities continue to have the authority to enforce and pass laws regarding smoke-free environments that are stronger than state law. People also cannot smoke in a business when it is not open to the public, such as after hours, on weekends or on holidays.

Stephen Huerta with Tobacco Free Nebraska, the state's comprehensive tobacco prevention program, points out many of those exposed to secondhand smoke in the workplace are the young people working as servers or bussing tables in restaurants. Secondhand smoke is a mix of the smoke exhaled by smokers and the smoke that comes from the burning end of a cigarette, cigar or pipe. It contains more than 4,000 chemicals – many of them dangerous poisons, TFN's website says. Secondhand smoke is classified as a Class A carcinogen – a rating reserved for substances that cause cancer.

NON-SMOKING SECTIONS IN RESTURANTS AND PUBLIC PLACES ARE LIKE CHLORINATING ONLY HALF OF A SWIMMING POOL.

Anyone exposed to secondhand smoke inhales these carcinogens. Non-smokers, exposed to secondhand smoke at home or work, increase their risk of developing lung cancer by 20-30%. The U.S. Surgeon General has also attributed secondhand smoke as a cause of heart disease, bronchitis, asthma, low birth weight and sudden infant death syndrome. "Every year there are tens of thousands of death in the United States (attributable to secondhand smoke)," the surgeon general's report reads. "There is no safe level of secondhand smoke. The only protection is in the law."

"It's not only the employees and the customers of the businesses that will benefit from being smoke-free," Huerta said. "Direct health-care costs to the company may go down. Maintenance costs go down when smoke, matches and cigarette butts are taken out of the workplace. It may be possible to receive lower health, life and disability insurance rates as employee smoking is reduced. The business's equipment, carpets and furniture will also last longer."

After June 1, a person who smokes in a place of employment or a public place in violation of the act is guilty of a Class V misdemeanor (maximum \$100 fine) for the first offense and Class IV misdemeanor (minimum \$100, maximum \$500) for the second and any subsequent offenses. Charges can be dismissed upon successful completion of a smoking cessation program. A proprietor that fails, neglects or refuses to perform a duty under the act is guilty of a Class V misdemeanor for the first offense and a Class IV misdemeanor for the second and subsequent offenses.

Competency-based training for health & human service staff in western Nebraska offered by specialized training academy

A common tale among community developers -- either economic development directors, Chamber of Commerce managers or our own health and human service professionals -- is the need for more qualified service providers to effect a quality system. "Grow your own" is an approach espoused by many and serves as the base for an existing Panhandle Partnership program getting a shot in the arm this year from Panhandle Public Health District.

PPHD has contracted with the Partnership to manage the Training Academy, an educational collaborative between

Western Nebraska Community College, PPHD, the Partnership and the Rural Nebraska Healthcare Network. The academy is a streamlined, competency-based, nationally recognized educational system designed with customized courses to strengthen and enhance our workforce. It focuses on workforce recruitment and retention in human services and health, by providing programming for certificates, credit and degrees relating to the areas identified by the collaborative.

Some examples of courses offered in 2008 to Partnership

SOCIO-ECOLOGICAL MODEL



Source: Adapted from McLeroy, et al., An ecological perspective on health promotion programs. Health Education Quarterly 1988; 15:331-77

The socio-ecological model: the most effective approach leading to healthy behaviors is a combination of the efforts at all levels -- individual, interpersonal, organizational, community and public policy.

within
20 minutes of quitting...

Within 20 minutes after you smoke that last cigarette, your body begins a series of changes that continue for years.

20 Minutes After Quitting...Your heart rate drops.

12 Hours After Quitting...Carbon monoxide level in your blood drops to normal.

1 to 9 Months After Quitting...Your heart attack risk begins to drop and your lung function begins to improve.

1 Year After Quitting...Your added risk of coronary heart disease is half that of a smoker's.

5 Years After Quitting...Your stroke risk is reduced to that of a nonsmoker's 5-15 years after quitting.

10 Years After Quitting...Your lung cancer death rate is about half that of a smoker's. Your risk of cancer of the mouth, throat, esophagus, bladder, kidney, and pancreas decreases.

15 Years After Quitting...Your risk of coronary heart disease is back to that of a non-smoker's.

Adapted from the Centers for Disease Control

**TOLL
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1-800-
QUIT
NOW**

Panhandle medical responders coordinate emergency response

Area hospitals, public health, emergency management, behavioral health and federally qualified clinics work together to make up the Panhandle Regional Medical Response System.

Melody Leisy, RN, Panhandle Region Medical Response System Coordinator, said the Panhandle is one of six regional medical response systems across the state. "PRMRS was created in 2005 through the Rural Nebraska Healthcare Network," Leisy said. "The RNHN is still the steering committee for the system, but other committees meet to develop plans and facilitate decision making.

Leisy said the activities have a hospital and medical focus with planning for mass fatalities, interoperable communications and evacuation plans. In the event of a mass fatality, hospitals, medical responders and funeral homes must be prepared. Hospitals are working together to develop an internal hospital template for just such an event and training is planned for spring 2009.

Fifteen satellite radios and phones have been installed and tested on a regular basis, to be sure communications between the providers will not falter in an emergency situation. Leisy said the hospital evacuation plans are based on best practices and are consistent with National Incident Management System (NIMS) protocol. The plans include the essentials and are updated on a regular basis, she concluded.

Public health nurses survey hospitals weekly to track trends in illnesses

When the flu becomes serious enough to require hospitalization, hospitals stand ready to provide treatment and palliative care to those suffering from high fevers, respiratory difficulties and other maladies. A hospital might see a rash of patients with flu-like symptoms, as the highly contagious disease spreads through their community.

Surveillance Nurses Melody Leisy and Becky Corman with PPHD, are in contact with a hospital representative on a weekly basis to record influenza-like symptoms, the patient's age range, if they are on a ventilator and if there is a personnel shortage due to influenza-like-illness. Corman said the percentage of patients with flu-like illness is compared to the total number of hospital admissions. These numbers are compared to hospitals across the State in order to evaluate influenza activity.

She said they watch for increases in flu patients and share prevention information with the public and medical providers, such as frequent hand washing and covering your mouth when you cough or sneeze.

Leisy said PPHD has been doing the surveillance with the hospitals in our jurisdiction for several years. The State has been able to establish base-line data that allows comparison data from season to season and monitors peaks of illnesses. This could not be possible without the collaboration between the hospitals, PPHD, and the State of Nebraska.

Network of Citizen Corps Council



Lt. Gov. Rick Sheehy was in Hemingford, Nebraska, in November to recognize the Panhandle Citizen Corps Network as the Citizen Corps Council of Nebraska. Citizen Corps Councils (CCCs) are made up of volunteers, specially trained to help communities respond to a wide variety of emergencies. The network is serving 90,000 Nebraskans living in 11 western Nebraska counties. The PCCN includes law enforcement personnel, emergency management, search and rescue volunteers, public health officials and community volunteers from all Panhandle counties.

Sheehy presented the award at the new Panhandle Public Health District conference room in Hemingford. The new conference room and a suite of offices were also unveiled to the community during the lieutenant governor's visit, during his house.

The Panhandle Citizen Corps Network includes the Ponderosa Search and Rescue Team, the Bluff County Citizen Corps Council, Panhandle Public Health District, Panhandle Regional Medical Response System, Region 21, 22 and 23 E

Mobile medical assets: e

In the event of a medical emergency, most people would head for a hospital. But what happens in the event of a major disaster, when hospitals across the region are damaged or destroyed, overwhelmed by the number of patients or need to separate patients in a triage situation?

Panhandle Region Medical Response System Coordinator and Public Health Nurse Melody Leisy said PRMRS has two sets of mobile medical assets containers, holding enough hospital beds, IV poles, privacy screens, gloves and masks to care for 25 patients for 72 hours at each location.

The assets do not include any medical supplies beyond stethoscopes and personal protection equipment.

Leisy said the mobile medical assets are designed to be moved quickly and easily to an emergency location. "If a hospital is forced to evacuate," Leisy said, "the mobile medical assets will be available to them to set up a patient care area in an alternate location.

Each hospital in the region has planned for primary and tertiary care sites for such emergencies, usually a school or community center building. Leisy said the mobile medical assets do not include a shelter for the beds,

Nov/Dec 2007

- Regional Planning for breast health
- Maternal Child Health Regional Summit Part 2
- Chem Pack placement completed

January 2008

- Annual Board of Directors retreat
- Balanced Scorecard implemented
- Engel chosen president-elect of Nebraska Rural Health Assn.
- Scrub Club events in area schools
- Smoke Free Education day at unicameral

February 2008

- Wellness Score Challenge pilot project kickoff
- Begin Online Data Documenting system

March 2008

- Brush 'n Up and Scrub in full swing
- Lakota Basketball tournament & health screenings
- Body Walk in Scottsbluff
- Environmental Health Coordinator hired
- Training Academy Coordinator hired

April 2008

- Leisy presents at Medical Reserve Corps National Leadership Conference in Portland
- Meth Conference in Gering
- Davies presents at Governor's Conference on Community Service
- John Hopkins fellow initiates Panhandle research project

May 2008

- Recertification of two PPHD car safety seat technicians
- Engel appointed president of Panhandle Partnership
- Develop governance policies for National PH performance standards
- Project Management training

June 2008

- Mobile medical equipment delivered
- WNV summer program begins
- Intertribal Partnership
- Dental Days in Chadron, Gordon
- Alliance & Sioux
- Regional Partnership table top exercise

Is wins state award

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Management Agencies and the Scotts Bluff County Health Department. PCCN is assembling a Medical Reserve Corps for the region and CCC groups are also being organized in Chadron, Gordon and Box Butte County. The PCCN is also developing databases of community resources and volunteers throughout the western counties and a plan to handle pets in a disaster situation.

The PCCN is led by representatives of the CCC groups and Volunteer Coordinator Jessica Davies of PPHD. It was organized in 2007 to serve as a regional networking group for existing volunteer organizations across the Panhandle, such as the PSAR and Scotts Bluff County CCC. The group is also sponsoring training for new community emergency response trainees, in the hopes of establishing additional citizen corps councils throughout the Panhandle. Trainings have been in Scottsbluff, Gordon and Chadron this summer and fall. A CERT training is planned for Alliance in January 2009.

Also in 2009, the PCCN is planning a regional summit for law enforcement and local policy makers to discuss liability issues surrounding the use of volunteers. A second gathering, tentatively titled CERT Olympics, will involve additional volunteer training and team-building exercises.

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Emergency setup

cots and other equipment.

In the event of a major disaster, the mobile medical assets can also be used as a triage area, sorting out the patients who should be treated at the hospital, those requiring minimal treatment who can go to an alternate care site and those who can be discharged to their homes.

Panhandle Region Medical Response System has agreements for storage and transportation of the mobile medical assets, and they are arranging for their own trailers to transport the pods to emergency locations in 2009.



Melody Leisy
PRMRS Coordinator

Emergency response teams receive training

Following a disaster, the survivors may go through a wide range of emotions – from auto-pilot to purely functional to relief to warfare and then, perhaps, anger or other severe mood swings. Possible rescuers trained in the Panhandle this past year learned how the same variety of emotions may affect their responses as well.

Bob Hessler of Scottsbluff is a veteran of disaster training, working with the Federal Emergency Management Agency and more than a dozen groups of trainees in the Panhandle during the last three years.



One of his most recent groups of rescuers are community members from Dawes County, affiliated with the Chadron Native American Center.

Nearly 20 people participated in the Community Emergency Response Training in Chadron, September 12 and 13, 2008. A mock

disaster simulating a tornado with victims portrayed by Chadron youth gave the trainees hands-on experience in dealing with injuries, emotions, preparedness and prevention.

Hessler said the training begins with disaster psychology because the rescuers need to know what to expect from those they are helping and not to be surprised if the same emotions overcome them as assistants in an emergency situation. Additional training included basic first aid, triage, light search and rescue and cribbing. Cribbing is the skill of removing a heavy fallen object like a car from atop a victim, then bracing it so that it doesn't fall again on the victim or the rescuer.

Sherry Bear Robe is a correctional officer in Dawes and Scotts Bluff counties. With some past experience as an emergency medical technician on the Pine Ridge Reservation, Bear Robe was a natural choice for incident commander, chosen by her peers. "I think we did well for our first time out," Bear Robe said. "It was hard (to step back) and tell others what to do. I wanted to jump in there and work with the victims."

Bear Robe said she took the CERT training because she has a servant-oriented attitude.

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Preparation for special populations: real life, real time

It's the stuff disaster movies are made of – a tornado is sighted and everyone jumps in their car to jam the highways. A flood rolls into town and folks climb up onto their roof to await a daring helicopter rescue.

But real life is seldom seen in movie theaters and special populations don't jump in cars or climb to the rooftop. The disabled and the elderly and those who serve them well in the Panhandle must take special precautions for what to do in the case of an emergency situation.

Hurricane Katrina brought the fate of the least able to light in 2005. Those left behind were not able to get out on their own, unable or unwilling to drive. The floodwaters hit Florida, Texas and Louisiana, killing more than 1,800 people – many of them poor, elderly or otherwise disabled.

Panhandle Public Health District is working with agencies that serve the elderly and/or the disabled to prepare those special populations and the providers that serve them for the case of a disaster or emergency, natural or man-made. Wellness Coordinator Jessica Davies said PPHD, acting on a special invitation from the state, coordinated a formative gathering

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2007-08 Timeline

2007	July 2008	August 2008	September 2008	October 2008	November 2008	December 2008
<ul style="list-style-type: none"> • Mobile medical asset delivered • Emergency reading • Snow-Wow in • Gordon, • Sidney • Flu • Exercise 	<ul style="list-style-type: none"> • Training Academy implements multiple triaging events • Davies receives Worksite Wellness certification • Tai Chi Easy facilitator training for 30 at WNCC 	<ul style="list-style-type: none"> • Engel presents at CDC assessment Initiative in Atlanta, GA • Healthy meeting/event guidelines developed • Safe Communities regional meeting 	<ul style="list-style-type: none"> • Regional meeting to kick off special populations coalition • Kids Fitness & Nutrition Days in Sidney and Alliance • CERT trainings in Chadron and Gordon • First human WNV case in Panhandle 2008 • Health educator & community organizer hired 	<ul style="list-style-type: none"> • Chadron, Gordon and Alliance hospitals alternate care site exercises • Kids Fitness & Nutrition Day in Chadron • Read & Recycle program implemented • Water flouridation supported in area newspapers 	<ul style="list-style-type: none"> • Call to Action Summit on successful high school graduation • SPF-SIG local community assessments begin • Panhandle Citizen Corps Network recognized by Lt. Governor Sheehy • PPHD moves into expanded space and hosts open house 	<ul style="list-style-type: none"> • Worksite Wellness programs proposed to all county governments • Initiate research and evaluation relationship with CSC • Annual staff retreat

Community organizers help coalitions stay on track in prevention efforts

“Never doubt that a small group of thoughtful, committed citizens can change the world. Indeed, it is the only thing that ever has.”
Margaret Mead (1901-1978)

Community coalitions form the basis for citizen involvement for creating a culture of wellness in the Panhandle. The coalitions are led by community volunteers, but often have a part-time or full-time paid staff member who rallies the troops and organizes the programs for the many volunteers, who most often work elsewhere outside the coalition.

The title “community organizer” gained national recognition this year as President-elect Barack Obama became one of a long list of well-known individuals who served as a community organizer early in his professional career. Other nationally and internationally known community organizers include Dr. Martin Luther King, Jr., Caesar Chavez, and Ralph Nader.

Community organizing is a process by which people living near each other are brought together to act in their common self-interest. Community organizers may act as area-wide coordinators of programs for different agencies in an attempt to meet community needs for various services. Community organizing is usually focused on more than just resolving specific issues. Organizing seeks to make the participants they are empowering include all community members, often with the end goal of distributing power equally throughout the community.

In the Panhandle of Nebraska, each of the 11 counties has a community coalition and all but two have community organizers helping to lead the group. Below is a summary of the various groups with the organizer/contact’s name in bold.

Banner County (Marie Parker) Banner County has been busy this year! We have been “Moving it” with the kids at basketball games, learning how to handle stress by “Rethinking Our Reactions”, we have enjoyed the red tulips reminding us about the effects of alcohol, parents have been reminded to get involved and stay involved with their school age students, HERO’s have been encouraged and more people are aware of the consequences of serving alcohol to underage people. Banner County is a small county but the scope of our influence has been able to reach beyond our borders to Scottsbluff and Kimball counties with students transferring here. It is a privilege to be able to work with the residents of Banner County who exem-

plify traditional family values, hard work and deeply care about each other.

Box Butte County (Janelle Hansen) After three years of hard work, the Hemingford Youth Center was opened in June 2008. In April, Box Butte County Family Focus Coalition contracted with PPHD to provide the community organizer for their local coalition. Jessica Davies and Mary Wernke acted as interim community organizers and, in the fall, Janelle Hansen was hired by PPHD to fulfill that contract. Another major accomplishment for the coalition was rewriting their bylaws. The coalition also became a United Way agency this year. Other projects included a child abuse prevention campaign, “Rethink Your Reaction” and a meth conference in Gering in April. FFC continues involvement in projects targeting prevention of underage drinking, binge drinking among youth and young adults and impaired driving for all ages.



Cheyenne County (Jann Lawler): We started out the year with a new organizer, Jann Lawler. She hit the ground running building local collaborative relationships and applying for local, county and state grants. Kids Plus was awarded the County Aid Juvenile Justice Grant, Safe & Drug Free Grant and several local grants, totaling more than \$70,000. The summer months brought our Sidney Great American Campout with more than 200 attending. It was a night of door prizes, hot dogs, DJ music and a Disney Musical performance by the Summer Camp Kids. There were 12 families that spent the night and 75 at breakfast the following morning. October brought the fourth annual Rocktoberfest. This event created pro-social alternatives in Cheyenne County for youth during Oktoberfest. To end the year’s events, Kids Plus & Cool Kids (21st Century Learning Center) hosted the fifth Annual Hay Days festival with more than 400 youth and families attending.

Dawes/Sioux Counties (Sandy Roes): The two coalitions had a quality discussion

this year on truancy and its effects on other wellness indicators in a child’s lifespan. As an example, frequent absences in elementary school often lead to a child with other problems as a teen, such as underage drinking. Drug testing is in its second year at Chadron Public Schools with an 87% participation rate. Students in any extracurricular program are required to participate and many other students and their parents choose to opt into the program. The county judge and Chadron State College have become important new partners in the coalitions. They are working with surveys of college students for health and wellness issues and with local retailers regarding responsible beverage serving. A University of Nebraska Lincoln-Lincoln Police Department model program is being explored to take the Chadron State College-Chadron Police Department to the next level of collaboration in battling the underage drinking also. The Chadron City Council passed a new ordinance in November 2008

prohibiting Under Age Gatherings and Disorderly Houses. An underage gathering is defined as where five or more youth under age 21 are present for a social activity and alcoholic beverages are possessed or consumed. The disorderly house is any place where the unlawful acts are committed.

This city ordinance gives law enforcement an additional tool to fight the problems of underage drinking in the city.

Deuel County (Judy Soper): 2008 has proven to be a year of growth for the prevention team. We have grown with our monthly meetings. We celebrated with the community -- during the school year we shared information during Homecoming Week, Red Ribbon Week, Prom Week, Alumni Weekend, Fourth of July & the Deuel County Fair. The “HERO” banners were on display at these celebrations. The members that are actively involved in the coalition have stepped up and helped out this year by picking up more responsibilities of the coalition. This has helped the community organizer have more time to do other necessary things for the coalition. We are looking forward to 2009 & doing more recruiting of new members to the coalition.

Garden County (Rose Brassfield): Nurturing Parenting classes have been in the planning stages. The class is advertised on

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Panhandle Prevention Coalition revitalized

Local and regional prevention teams in the Panhandle continue to work on the problem of underage drinking among youth, ages 12-17. The organizations include local coalitions throughout the Panhandle counties, with community organizers coming together on a regular basis to coordinate programs region wide.

In addition, the Panhandle is revitalizing an existing group known as the Panhandle Prevention Coalition. The coalition was developed in 2000 to work on various prevention projects, including not just underage drinking, but also prevention of child abuse, domestic violence, teen suicide and teen pregnancy. Coalition work combines prevention efforts in all these fields consecutively, using braided funding, with the understanding none of the individual problems exists in a vacuum, but are each interwoven with one another in many risk and prevention factors.

In an effort to revive the regional coalition to include more stakeholders and develop new plans for prevention efforts in the Panhandle for the coming years, the prevention coalition is being reorganized under a framework known commonly across the state and the nation as SPF-SIG, or the Strategic Prevention Framework-State Incentive Grant.

The SPF of SPF-SIG is a five-step model for creation of substance abuse programs, including **needs assessment, capacity building, planning, implementation and evaluation.** Overarching values of cultural competence and sustainability are addressed at each and every step of the program. In addition, the SPF-SIG planning requires a coalition of stakeholders from 13 areas – **law enforcement, youth, parents, education, health, business, faith-based organizations, public health, civic/volunteer groups, cultural organizations, local government, media**

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Prevention work continues in area

continued from page ten

the school website and a flyer with information was mailed by the schools with every report card. Nurturing Parenting classes are scheduled to begin Wednesday, January 14.

A *Lock Your Cooler Down* campaign is being designed. Numerous coolers with alcohol have been stolen from outside motel room doors, front steps of homes, boats and open garages in Garden County. Two youth with the Garden County Coalition have designed a flier. Fliers will be distributed at motels, liquor stores and game check-in stations in January 2009. We are uncertain if these thefts are an indication that alcohol is more difficult for underage youth to obtain.

Morrill County (Panhandle Public Health District): The Morrill County coalition also chose to contract with PPHD to provide the community organizer activities in their county this year, following the resignation of longtime organizer Jamie Cranmore. PPHD continues to solicit for a staff member in Morrill County, but in the interim public health nurses Melody Leisy and Becky Corman are helping to reorganize the coalition. In late fall, the coalition hosted a community assessment meeting with facilitator Joan Frances. Frances said it was one of the best community meetings she had attended in her dozen years as an organizer in the Panhandle. Community leaders stepped forward and took ownership of the (underage drinking) problem, Frances said, instead of passing the blame along to others.

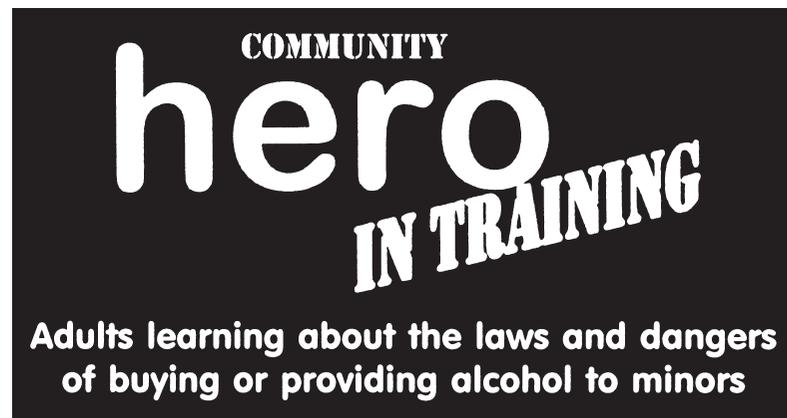
Scotts Bluff County (Stacey Ferguson): In April, the Scotts Bluff County coalition hosted a Town Hall Meeting on underage drinking with more than 70 in attendance. They hired a new coordinator in August. Stacy Ferguson is a substitute teacher in the Scottsbluff Public School system. A goal for the coalition in the coming year is working on expanding membership.

Sheridan County (Michelle Roberts): In January, Ann Beseke of Family Rescue Services presented a program and took a community survey on domestic violence in the county. Bruce Bonfleur also spoke about Keeping Nebraska Beautiful. The party patrol has received grant money to pay off duty officers' time and mileage. In the spring, Chris Heiser spoke to the coalition on the First Tee program. A mock DUI will be held at the Rushville Middle School. Victor Gehrig talked about the North East Panhandle Substance Abuse Center. Western Community Health Resources also spoke on all of the programs available there. Sherry Retzlaff presented the risk and protective survey results for Sheridan County. After many years as community organizer, Retzlaff stepped down and the position was assumed by Michelle Roberts. Nancy Strong spoke about the after school program and Sheriff Robbins talked about the new justice facility options. In the fall, Trina Janis presented on the Mothers Against Drunk Driving (MADD) dinner they hosted. Michelle Roberts, the new community organizer and a staff member with FRS, spoke about Domestic Violence Awareness month. In December, the coalition hosted their local community assessment meeting.

MRSA questions answered

Panhandle Public Health District took a lead role in providing detailed information about an outbreak of Community Acquired Methicillin-Resistant Staphylococcus Aureus (CA-MRSA) occurrences in Western Nebraska this past winter and spring in the Panhandle.

CA MRSA is common in the general public. It is estimated that 20-30% of the population has colonized staph. And half of those are colonized MRSA. Colonized means they carry it on their skin but there is no active infection. CA-MRSA is an illness that develops outside the hospital and health-care facilities.



Adults learning about the laws and dangers of buying or providing alcohol to minors

Betsy Horstman, RN, carefully monitored this non-reportable disease and offered educational information to both the community at-large and medical personnel.

“MRSA is common in the general public”

“Our mission is to ensure accurate information about MRSA or any other disease is correctly reported to the public,” said Kim Engel, PPHD Director. “We distributed fact sheets, parent letters and news articles to achieve this mission.”

Included with the information PPHD disseminated is the best way to prevent MRSA -- simply by washing your hands regularly. There are additional prevention methods the public can take: covering abrasions or cuts with a clean, dry bandage until healed and avoiding sharing personal items (e.g. towels, razors) that come into contact with your bare skin.

The MRSA bacteria has always been in the population and does exist at high levels, Engel said. Staph and MRSA can be present on the skin but may not necessarily cause an infection or warrant cause for concern.

Coalition revitalized ...

continued from page ten

and youth-serving agencies.

The coalition is working on the assessment, capacity-building and planning phase of the project for four to six months, led by a project management team. The plan is expected to be completed and submitted to the Nebraska Partners in Prevention for approval in the spring of 2009, with the implementation phase to begin immediately thereafter.

The three priority areas addressed in the plan are *underage drinking, binge drinking among youth and young adults (18-25) and drinking & driving for all ages.*

Alcohol-impaired driving is particularly high and is common in fatal motor vehicle crashes. According to the *Substance Abuse and Associated Consequences in Nebraska, an Epidemiological Profile*, residents of the most rural Nebraska counties reported the highest percentage for alcohol-impaired driving and smokeless tobacco use.

Alcohol abuse factors among the young people are documented in a student risk and protective factor survey conducted biannually in the fall at area high schools. District wide results are available to the superintendent of each district. Regional results are available online at http://www.pphd.org/community_health_profiles.htm.

Panhandle Public Health District's role in the SPF-SIG planning process is five-fold. PPHD is acting as the applicant and fiscal agent for the funding. We will submit program narratives and financial reports and manage contracts with consultants involved in the planning. PPHD will also be the “keeper of the process,” keeping an eye on the Community Toolkit prescribed by the state and holding the regional coalition to an ideal, thus enforcing fidelity in the program. Lastly, PPHD will manage the assessment process in a memorandum of understanding with Scotts Bluff County Public Health Department.

Upcoming meetings for the coalition are planned for February 5 and 19 and March 5 and 19 all at the Bridgeport Community Center from 10 a.m. to 4 p.m. Lunch is provided and all are welcome to attend. All documents and updates for the SPF-SIG process can be found at www.pphd.org.

Preparedness for special populations . . .

continued from page nine

of 35 providers and consumers in September 2008 to discuss the needs of the targeted populations. Once a thorough assessment process is completed, PPHD will work with providers and consumers to ensure disaster preparation. Upon process completion, a toolkit will be made available for statewide replication.

An initial assessment will include the disabled, the elderly and providers such as nursing homes, home health providers, mental health agencies, Office of Human Development and the Area Office on Aging. Other partners include law enforcement, Retired Senior Volunteer Program, emergency management and respite providers.

Davies said some type of training is included at each of the special population coalition gatherings.

“There is a definite need,” Davies concluded. “We hope this initiative will be ongoing for a very long time. As long as there are those in need, we’ll be there to help them to prepare.”

2008 sees expansion in PPHD staff, offices

Hemingford staff adds four new employees



*Rebecca Thompson
Environmental Coordinator*

Rebecca Thompson and Mary Wernke joined Panhandle Public Health District in April 2008. Thompson is the new environmental health coordinator at PPHD. A seven-year resident of Hemingford, her PPHD duties include working on a variety of environmental issues including assessment of problems facing the region, radon detection, water testing, West Nile Virus, indoor air quality/secondhand smoke and lead exposure.

A graduate of Concordia University in Texas, Thompson said her biggest challenge is learning about the large variety of agencies that partner with PPHD. Together with her husband Joey, they have three sons, ages two, four and six. Her background is in sales with 3M.

Wernke is the new training academy coordinator for PPHD and the Panhandle Partnership. The training academy, a partnership with Western Nebraska Community College, is a private education program for members of the health and human services agencies in the area. The mission is to create an upwardly mobile work force with local talent, resulting in an extraordinary service system.

In addition, Wernke will serve as communications and grants development coordinator for PPHD and

its partners. Wernke has been providing public relations, grant writing and research efforts for PPHD as an independent contractor since 2003. In addition, she was the community organizer for Family Focus Coalition of Box Butte County, a community-based organizations working closely with PPHD. Wernke and her husband Ed have three grown daughters.

The new community organizer for Box Butte Family Focus Coalition is Janelle Hansen, also one of the newest employees at PPHD. Following Wernke's departure from the position, FFC chose to contract with PPHD for the organizer's duties. Hansen is the local community organizer, plus working as a health educator at PPHD.

Hansen, a single mom of three and 20-year resident of Hemingford, was born and raised in Sidney, Nebr. She is a 1989 graduate of Chadron State College and was most recently employed as office manager at the Hemingford Community Federal Credit Union.

Hansen works in health education with the Scrub Club and Brush 'n Up programs. She also offers programs on nutritional health and will institute a new program on Cool Pools this spring and summer.

Finally, Kelly Marie, a Hemingford High School senior, joined the PPHD staff in January of 2009 as a part-time office assistant. The daughter of Tonya Wieser of Hemingford, Marie is president of the FCCLA, secretary of the student council, a member of the Hemingford Youth Center board of directors and an HHS cheerleader. She also does stats for the basketball teams and is a member of the swing choir. Marie plans to major in psychology at the University of Nebraska Kearney following graduation in the spring of 2009.



*Mary Wernke
Training Academy,
Communications & Grants
Development Coordinator*

Wood Construction renovates PPHD offices

An empty building on the main street of Hemingford was not long vacant this past spring. Panhandle Public Health District staff next door was bursting at the seams and had been looking for a new headquarters to house their growing programs. Situated at 806 Box Butte, the PPHD office addition, was most recently Sweet Sage Gift Shoppe.

The major renovations were completed by building owner Dale Wood, prior to the grand opening on November 10, 2008. Wood Construction closed a stairwell to the basement in the front of the building, blocking off about one-third of the building for a conference room that includes high-speed telehealth capacities and seating for 30-40 people. In addition, Wood built four individual offices in the back two-thirds of the building and cut a doorway between the two buildings, offering handicapped access to the south part of the building.

"It is very exciting for our staff to have this beautiful new facility to work in," PPHD Director Kim Engel said. "We enjoy being a member of the downtown Hemingford community and having a central location in the Panhandle where we can serve the entire jurisdiction."

Children's Outreach offers home visits for new mom, baby

Fifty years ago following an uneventful birth, a new mother would stay in the hospital for a week to 10 days, "recovering" from childbirth. A generation earlier, a turn-of-the-century-mom gave birth at home, but didn't get out of bed for a couple of weeks.

Today, childbirth is different in so many ways. Young moms have all the conveniences of a modern obstetrical unit, birthing room and, if need be, an operating room. But after they baby is born, they leave the hospital within 24-48 hours, even if they are covered by insurance, Jean Jensen with Volunteers of America said. Jensen is the program coordinator.

But doctors and other health care providers know the first few days are important for medical, social and emotional reasons. Jensen said to manage early dismissals and important follow ups, PPHD and area hospitals provide an outreach program.

Nurses from area hospitals and home health programs visit mother and baby in their home within 48 hours of dismissal. Home visits offer nurses the opportunity to assess both the mother and child for medical and social needs and to offer education and support to the new mother.

At the home, the nurse can make referrals for medical problems like jaundice, an infection or post partum depression in the mother. A family might also need help with health insurance, car seat safety or nutrition programs like Women, Infants and Children. The program is entirely voluntary, Jensen said. This is the 10th year for the Children's Outreach Program in the Panhandle.

Flouridation put to a vote: denied

Voters in seven western Nebraska communities chose to reject a referendum last November calling for flouridation of community water supplies. Bayard, Bridgeport, Chadron, Kimball, Mitchell, Scottsbluff and Sidney joined the 80% of Nebraska communities that voted against flouridation. Most of those votes were split 60%-40% on the issue. Across the state, eleven towns chose to add fluoride to their water.

Fluoride is the safest, most inexpensive and effective way to prevent tooth decay in all age groups. Found naturally in all water sources, including the ocean, the levels of fluoride in community water supplies are lower than those recommended to prevent tooth decay.



Community water flouridation adjusts fluoride to optimal levels for dental health – 0.7 parts per million, as recommended by the State of Nebraska Department of Health and Human Services.

Community water flouridation prevents and decreases tooth decay for everyone, benefiting both children and adults. Fluoride works by stopping, or even reversing, the decay process. It keeps tooth enamel strong and solid. Good oral health allows older adults to keep their own

teeth longer.

For every \$1 invested in water flouridation, we save about \$38 in dental costs. The cost of flouridating water during a person's lifetime is about the same cost as having one cavity repaired by your dentist.

Healthy teeth contribute to overall oral health and the well-being of the entire person, as well. According to the Centers for Disease Control, many experience needless pain and suffering, complications that can devastate overall health and well-being and financial and social costs that significantly diminish the quality of life due to poor oral health.

State, local and national leaders in public health dismiss claims on the Internet and from personal anecdotes linking fluoride to low IQ, AIDS, Alzheimer's disease and cancer. Such allegations may raise doubts with some members of the public, but the overwhelming scientific evidence has consistently indicated flouridation of community water supplies is safe and effective.

The vote may be resurrected in state or local governmental bodies and Panhandle Public Health District encourages citizens to share their knowledgeable opinion with their leaders.

To contact a public health nurse,
call Becky Corman or
Melody Leisy at 308-262-2217
or toll free at 866-701-7173

Third graders race to Kid's Fitness Days

Northern Panhandle third-graders were dancing for the health of it in Chadron this past October. More than 120 students from around the area gathered at the Physical Activity Center at Chadron State College for the third annual Nebraska Kid's Fitness and Nutrition Day, Tuesday, October 28. More than 140 students from Box Butte County gathered for their first event in Alliance, while 225 southern Panhandle third-graders enjoyed the fourth annual health day in September.

Sponsored by Panhandle Public Health District, Nebraska Kids Fitness & Nutrition Days gives youngsters the opportunity to learn about healthy eating and non-competitive physical activity in a fun, social environment. In Chadron, the CSC Health, Physical Education and Recreation department was a co-sponsor. They taught the children Tinikling, an African dance, tapping poles held horizontally to the ground against one another and the floor, while other students dance and jump over the poles. A second dance used jump bands for a similar activity.

Chadron State partners

CSC students in HPER studies under the direction of Donna Ritzen and Dawn Brammer, helped lead the students in island dancing, folk dancing, parachute activities, hula hoops, stretching and tumbling, too. On the healthy eating side of the day, lessons were learned on making healthy snacks, reading food labels and understanding daily nutrition requirements using the food pyramid in all three NKFND locations. A telling activity where kids learned quickly to balance their food intake with their activities was called Energy Balance.

Youth were given their choice of snacks – a candy bar, a small piece of beef jerky or an apple. Those who chose the apple had to run for three minutes to burn off the



and a sedentary lifestyle are huge risk factors for childhood obesity, an epidemic among young people today, presenters said.

Alliance physical activities

In Alliance, physical activities had an Asian influence with both TaeKwonDo and Tai Chi offered as choices to the students.

Jessica Davies, PPHD wellness coordinator and a certified Tai Chi Easy instructor, taught the third graders some of the basic moves of the program to offer balance, stress reduction and focus.



calories consumed. The beef jerky required five minutes of running. The miniature candy bar? Seven minutes!

A station called Portion Distortion again referred to the food label for the proper size of a portion of cereal, soda or other snack. After a child poured their average six-cup serving of Frosted Oat Toasties, they were called back to read the label, describing the portion as one-half or a cup of cereal as the proper amount for a single serving. Large portions

Nebraska Beef Council and University of Nebraska Kearney partners

The Nebraska Beef Council and the University of Nebraska at Kearney helped sponsor the educational day, which supplied a healthy lunch and fun incentives.

Call to Action issued on high school graduation



Small group discussions, like this one led by Roberto Dansie developed key points for ongoing planning.

Twelve years ago, a group of committed health and human service professionals partnered to work on the answer to one question: Are all preschool-age children in our area ready and able to start kindergarten? Now, some of those same individuals have been joined by scholars and other community leaders to ask a similar question: Are those children ready to graduate high school?

Drop out rates are on the rise in Nebraska and nationwide, some say fewer students of our children's age will graduate from high school than among the current adult generation. We are moving backwards!

In 2007, state public and private agencies came together to develop a vision to use data to achieve the best outcomes for children and youth along the lifespan of ages 0-21. Champions of children with the Nebraska Children and Families Foundation gathered core partners from the Nebraska University Foundation, Nebraska Department of Health and Human Services, the University of Nebraska Medical Center, University of Nebraska-Lincoln, NU Center for At-Risk Children, NU Public Policy Center, Buffet Early Childhood Fund, Boys Town, Nebraska Department of Education, Nebraska Crime Commission and Voices for Children. The group was joined by community and state stakeholders to form workgroups and coalesce around a mission: DATA + EXPERTISE + STRATEGY = POSITIVE CHANGE FOR NEBRASKA'S CHILDREN.

Following a spring 2008 conference calling for action across the state, leaders chose to repeat the conference in the western region to invite leaders in the Panhandle to work together on strategies. The strategies named above are intended to align programs and services across agencies and to use data to measure and drive services to children and youth.

“DATA + EXPERTISE + STRATEGY = POSITIVE CHANGE FOR NEBRASKA'S CHILDREN”

November 6 in Gering was the Call to Action in the Panhandle and the day dawned with blizzard conditions across the region, forcing two-thirds of the registered participants to stay in their homes. Nationally known experts Roberto Dansie, PhD, a clinical psychologist and Martha Mac Iver, PhD, with Johns Hopkins University were able to attend and present important cultural information and data.

Members of the group met again by phone conference on December 1 to discuss truancy issues. Following the two conferences, participants discussed coming together in committees and task forces to address issues developed in the Call to Action summit. One of the first groups to meet was January 8 in Bridgeport to discuss prevention (of substance abuse).

Training academy . . .

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Plans are already underway for courses in 2009. They include Conflict Resolution, Fetal Alcohol Spectrum Disorder, Excellence in Early Childhood Development, Nebraska Foster & Adoptive Parents Association Training and Responsible Beverage Server Training.

The mission of the training academy is to build an upwardly mobile workforce with local talent by providing credible, meaningful, consistent and affordable education/training that results in an extraordinary service system. For more information about the academy or to plan a course that fits your agency needs, contact Mary Wernke at PPHD, 308-487-3600 or 1-866-701-7173.



*Mary Wernke
Training Academy Coordinator*

CAP Western Nebraska opens dental clinic in Chadron

Those most in need of dental care in the northern Panhandle will receive service from a public health care dental clinic as soon as this spring. Jeff Tracy, Director with Community Action Partnership of Western Nebraska (formerly Panhandle Community Services), said the clinic should be open four days a week, beginning in March 2009 at 221 Chadron Avenue in Chadron.

The clinic began with the request of individuals for dental care for Medicaid patients, similar to a dental clinic at CAP/PCS in Gering. At about the same time, the Head Start agency made a similar request, so Tracy worked with Chadron Community Hospital's CEO, Harold Krueger, to put together a meeting with area dentists. The feedback was positive for a clinic to serve Medicaid patients, but it was still unclear if a clinic was needed for uninsured individuals.

Tracy said several community and agency meetings in the Fall of 2007 where it was made clear that a great deal of low-income, uninsured individuals were not receiving dental care. A grant announcement from the federal Department of Health & Human Services, Bureau of Primary Health Care came out in December that appeared tailor-made for the project. The funding opportunity was for community health centers to expand into new areas, with a priority on frontier counties (less than seven people per square mile). Sioux, Dawes and Sheridan counties fit the bill and CAP/PCS applied for the grant in February 2008.

Word came in August the funds were awarded for \$205,000 the first year and \$170,000 in the following years. Tracy said the committee met with contractors in early January 2009 for a walk through of the building to be remodeled. Another meeting with dentists and community agencies to iron out details was January 7 and an interview with a dentist to serve the clinic should result in hiring by month's end.

The clinic will also include a part-time hygienist, two dental assistants and a receptionist to man the three operatories with a focus on low-income, uninsured and Medicaid patients. Federal regulations require the clinic serves anyone, with fees on a sliding scale fee schedule, based on income.

Panhandle Public Health District was one of the planners involved in the project from its inception, Tracy said. PPHD has also pledged ongoing financial support. "We are grateful for all the community support," Tracy said. "This wouldn't have happened, or even got off the ground, without their help. We hope to serve a niche in the community and look forward to working with local dentists in the area."

**CLICK IT for health:
Healthy meeting and
event guidelines available
at www.pphd.org**

Never too late for a flu shot, public health nurse advises



Becky Corman
Public Health Nurse

The changing leaves of fall signal that flu season is just around the corner, but flu doesn't turn tail with the first snow-fall. Public health officials advise people to get a flu shot any time between October and March. Each year 36,000 people die of flu and more than 200,000 are hospitalized because of complications.

"While experts recommend healthy living, frequent hand washing and the use

of hand sanitizers to help avoid contracting the flu, the best prevention is still a flu shot," said Becky Corman, Public

Health Nurse for Panhandle Public Health District.

The Centers for Disease Control and Prevention have recommended everyone six months or older should receive a flu shot, especially those in the higher risk groups named below. Along with the flu shot, a second type of vaccine is also available in the form of a nasal spray. The nasal spray vaccination is appropriate for healthy people ages two to 49 years and those who are not pregnant.

Those at high risk for complications from the flu include children less than five years old, pregnant women, people 50 years of age and older, people of any age with certain chronic medical conditions and people who live in nursing homes and other long term care facilities.

Others who are encouraged to receive the flu shot include household contacts of persons at high risk for complications from the flu and household contacts and caregivers of young children and infants less than 6 months of age, and health care workers.

The flu vaccine is made up of inactive flu viruses, so you cannot get the flu from the flu shot. There are some

side effects that can be associated with the vaccine in either the flu shot or the nasal spray. They include soreness, redness or swelling at the site of the injection, a low grade fever, aches and pains. Symptoms should only last a day or two.

Corman said the best time to get a shot is in October or November before flu season is in full swing. However, Corman said getting the flu vaccine any month during flu season is beneficial.



To simplify flu season at your home, follow the basic guidelines included below.

Safe communities designation sought across Panhandle

Nearly everyone in the Panhandle knows it is a safe place to live, but for outsiders and others needing confirmation, the region may soon be designated a Safe Community by Safe Communities America, a program of the National Safety Council.

Led by Environmental Health Coordinator Rebecca Thompson of Panhandle Public Health District, members of the Panhandle steering committee are preparing an application to apply for the designation based on programs already in effect in various Panhandle communities. Some examples of these programs include child seat safety, *Click it or Ticket*, *100 Days of Summer*, neighborhood watches, as well as drinking and driving, domestic violence and underage drinking prevention programs.

"Injury is the leading cause of death for individuals age 1-34," Thompson said. This includes unintentional and intentional injuries, such as suicide. Unintentional injuries include motor vehicle collisions, falls and being struck by or against a person or object. Falls are the #1 cause of hospitalization for any age group. Motor vehicle traffic injuries account for the number one cause of injury resulting in death for ages 0-64. In contrast, the #1 cause of death for those over 65 is falls.

Thompson said the data for the Safe Communities designation comes from a combination of vital statistics and hospital discharge information. Thorough and correct data is critical to any surveillance program. In order to make wise decisions and create programs appropriate to an individual community, one must access data reflective of that community.

Building the Safe Communities program among all Panhandle communities was a conscious decision made by existing coalition leaders to develop a partner program with a broad-based group of stakeholders. In addition to health and human service agencies, the Safe Communities Coalition includes business, local government and law enforcement. Community-based injury prevention programs have shown to be the most effective way to reduce the number of injuries experienced by members of a community.

Data collected from the above sources will be analyzed over a period of five years. Analyzing data over a period of time allows for a more accurate reflection of the status and effects of injury in a community. Thompson said the application/designation should be complete in early 2009. The only other community in Nebraska with the Safe Community designation is Omaha, but there are two others considering application in central and western Nebraska.



Rebecca Thompson
Environmental Coordinator

Safeguard yourself and your family from the flu

- Stay home when sick
- Practice frequent hand washing
- Hand sanitizers can be used if soap and water is not available
- Cover your mouth with tissue or your arm when you cough or sneeze
- Protect yourself with a flu shot
- Reduce complications by getting treatment early
- Practice other healthy habits to reduce the likelihood of catching disease; eat right, exercise and get plenty of rest
- Avoid using alcohol or tobacco
- Follow your medical provider's recommendations

Rescuers training . .

continued from page nine

Brian Swallow, a 34-year-old Wal-Mart employee in Chadron, agreed. "Someone needs to be there, to know what to do in an emergency," he said. "We're not immune to disaster, although it's difficult to think about."

Efforts are underway to develop Citizen Corps Councils throughout the 11-county Panhandle region, with regional coordination provided by the Panhandle Citizen Corps Network. Jessica Davies of Panhandle Public Health District is the regional coordinator for PCCN.

PPHD Financial Statement

Balance Sheet, June 30, 2008

Assets		Liabilities	
Cash & Equivalent	\$150,984	Accounts Payable . . .	\$1,190
Acct. Receivable	\$ 6,370	Accrued Payroll	
Interest Receivable	\$ 2,696	Liabilities	\$33,183
Inventory	\$ 3,552	Total Liabilities	\$35,093
Certificates of Dep.	\$300,402		
Property & Equipment, Net of Depreciation	\$127,305		
Total Assets		Net Assets	
\$591,309		Invested in Capital Assets, Net of Debt	\$127,305
		Unrestricted	\$428,911
		Total Net Assets	\$556,216
		Total Liabilities and Net Assets	\$591,309



Sara Sulzbach
Office Manager

Total Operating Revenues \$ 894,566
Total Operating Expenses \$ 838,019

Where the money comes from . . .

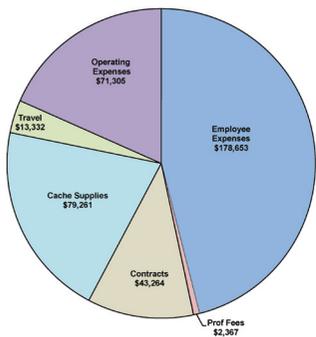
50%	27%	11%	4%	4%	3%	1%
Preparedness contracts, State of Nebraska	Interest from Nebraska Tobacco Settlement (LB 692)	Disease tracking & follow up (LB 1060)	CVD and environmental health	misc.	Maternal Child Health contracts with State of Nebraska	PH Nursing contract, State of Nebraska



Where the money goes . . .

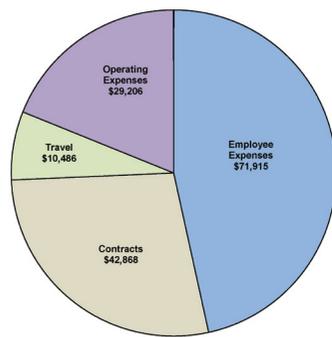
46% Protection

PPHD Preparedness	\$ 190,713
HP Preparedness	\$ 12,062
PCCN Preparedness	\$ 5,041
PRMRS Preparedness	\$ 180,366
Total	\$ 388,182



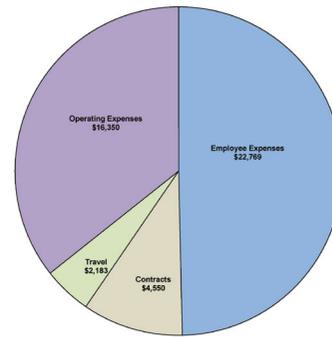
19% Prevention

Cardiovascular Disease	\$ 39,691
Maternal Child Health	\$ 5,833
West Nile Virus	\$ 4,394
Disease Surveillance	\$ 100,658
Radon	\$ 3,899
Total	\$ 154,475



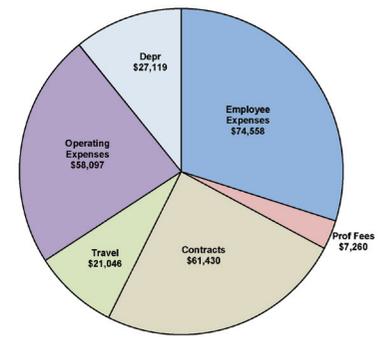
4% Promotion

Children's Outreach	\$ 16,281
Coordination Contracts	\$ 10,241
Public Health Nursing	\$ 19,330
Total	\$ 45,852



31% General Administration

Employee Expenses	\$ 74,558
Professional Fees	\$ 7,260
Contracts	\$ 61,430
Travel	\$ 21,046
Depreciation	\$ 27,119
Operating Expenses	\$ 58,097
Total	\$ 249,510



2008 Board of Directors

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Marie Parker, Community-Spirited Citizen

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Larry Brower, County Commissioner
Kim Woods, Community-Spirited Citizen

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