

PPHD Financial Statement

Balance Sheet, June 30, 2010

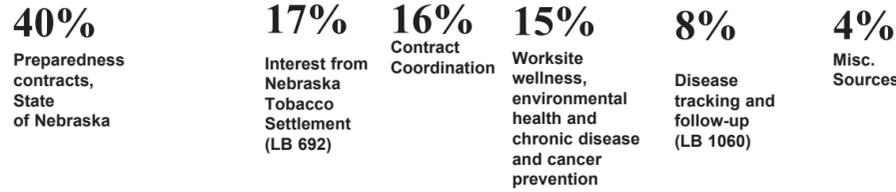
| Assets | | Net Assets | |
|---|-------------------|------------------------------|-------------------|
| Cash & Equivalent | \$ 114,398 | Invested in Capital Assets, | |
| Acct. Receivable | \$ 187,353 | Net of Debt | \$ 82,913 |
| Inventory | \$ 19,780 | Unrestricted | \$ 464,181 |
| Certificates of Deposit | \$ 225,402 | Total Net Assets | \$ 547,094 |
| Property & Equipment, Net of Depreciation | \$ 82,913 | Total Liabilities and | |
| Total Assets | \$ 629,846 | Net Assets | \$ 629,846 |
| Liabilities | | | |
| Accounts Payable | \$ 46,709 | | |
| Accrued Payroll | | | |
| Liabilities | \$ 36,043 | | |
| Total Liabilities | \$ 82,752 | | |



Sara Sulzbach
Office Manager

| | |
|---------------------------------|---------------------|
| Total Operating Revenues | \$ 1,428,958 |
| Total Operating Expenses | \$ 1,348,335 |

Where the money comes from . . .



PPHD receives state award for Excellence in Worksite Wellness from Governor Heineman

Panhandle Public Health District has received a state award for excellence in wellness. PPHD was honored with the Sower Award for planting the seed of wellness for their employees. PPHD has offices in Hemingford and Bridgeport, serving 10 of 11 Panhandle counties.

Because prevention and wellness efforts in the workplace are shown to lead to higher productivity, better employee satisfaction and lower health care costs, Governor Heineman created the Governor's Excellence in Wellness Award in 2008.

Factors considered for the awards include the level of support for the program by company leaders, assessment of employee

needs, design of a wellness plan, outcomes, and benefits and policies supporting healthy behaviors. Wellness programs empower employees to make good decisions about the health risk factors in their lives and to take action to avoid chronic illnesses that can adversely impact their health and affect their quality of life.

Panhandle Public Health District maintains strong support for employee wellness through wellness policies for paid breaks to promote physical activity, a breastfeeding policy and environmental supports for nursing mothers. PPHD also maintains an employee kitchen on site, healthy meeting guidelines at all events, individual ergonomic assessments



Governor Dave Heineman presents the Sower's Award to Panhandle Public Health for excellence in worksite wellness. Pictured above: Becky Dorn, WELCOM Wellness Councils of the Midlands; Jessica Davies, PPHD; Governor Heineman; Kim Engel, PPHD; Dr. Joann Schaefer, Chief Medical Officer, Nebraska Department of Health and Human Services.

and ongoing health information to staff. They provide health screenings and risk appraisals for employees and their families on

an annual basis. Flu shots are also provided annually at no cost to the employee.

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Chadron hospital move provides evacuation exercise for Panhandle Regional Medical Response System

It was a great day for many in Chadron on June 23, 2010, as Chadron Community Hospital staff and volunteers moved into their new hospital.

As part of the move, a full-scale exercise simulating an evacuation due to a broken water main and a five-person fatality accident took place. Many of the administrative offices had been moved the day before, but the scenario triggered a response to move patients and the rest of the equipment in an "emergency" type of evacuation situation.

"The evacuation exercise tested the incident command system, medical supplies distribution, communication, citizen protection, and fatality management," Panhandle Regional Medical Response System Coordinator Melody Leisy said. "The exercise

planning team developed a scenario to reflect the response effort of the region necessary if a catastrophe occurred in the Panhandle."

PRMRS partners were able to identify their strengths and areas for improvement. "The incident management team was recognized and everyone seemed confident

efforts as memorandums of understanding were tested with area agencies partnering with the hospital.

Leisy said back up communication systems were efficient and interoperable during the exercise. Radios, cell phones, satellite phones, and switching over of landline phone to another hospital were all tested to internal and external partners during the response. When an attempt had failed, staff appropriately found other mechanisms. "Information was disseminated in a timely and clear manner," she continued. "The use of common response communication language allowed information to be understood by all receivers."

"Safety and privacy of the evacuees (patients) was high priority throughout the entire

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Where the money goes . . .

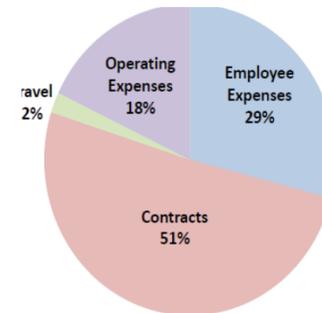
34% Protection

| | |
|--|-------------------|
| PPHD & PRMRS Preparedness, H1N1 Response | \$ 454,934 |
| Total | \$ 454,934 |



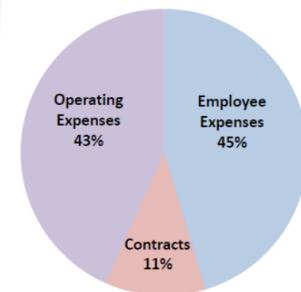
43% Prevention

| | |
|-------------------------------------|-------------------|
| Chronic Disease & Cancer Prevention | \$ 75,665 |
| Maternal Child Health | \$ 156,869 |
| Environmental | \$ 16,893 |
| Disease Surveillance | \$ 104,833 |
| Coordination Contracts | \$ 228,327 |
| Total Prevention | \$ 582,587 |



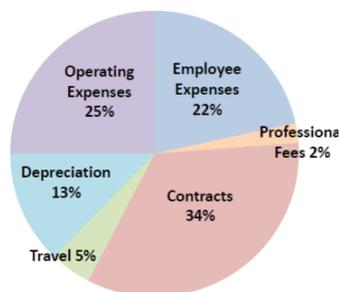
3% Promotion

| | |
|---------------------|------------------|
| Children's Outreach | \$ 18,196 |
| PH Nursing | \$ 21,950 |
| Total | \$ 40,146 |



20% Administration

| | |
|--------------------|-------------------|
| Employee Expenses | \$ 58,357 |
| Professional Fees | \$ 6,107 |
| Contracts | \$ 91,407 |
| Travel | \$ 12,566 |
| Depreciation | \$ 34,608 |
| Operating Expenses | \$ 67,623 |
| Total | \$ 270,668 |



Message from the Board President



Darrell Knot
Board President

What is public health? Many people are confused about how public health differs from the great care you receive every day from your health care provider. I think the answer lies in looking at the socioecological model, pictured at right.

Public health, with a focus on prevention, is population based and reaches across many levels of the model to have the greatest impact for the most people for the lowest cost. Let me illustrate my point with a timely example. If you decide to quit smoking this New Year, and receive counseling on the health risks of tobacco, one person, one individual, is being impacted at a time.

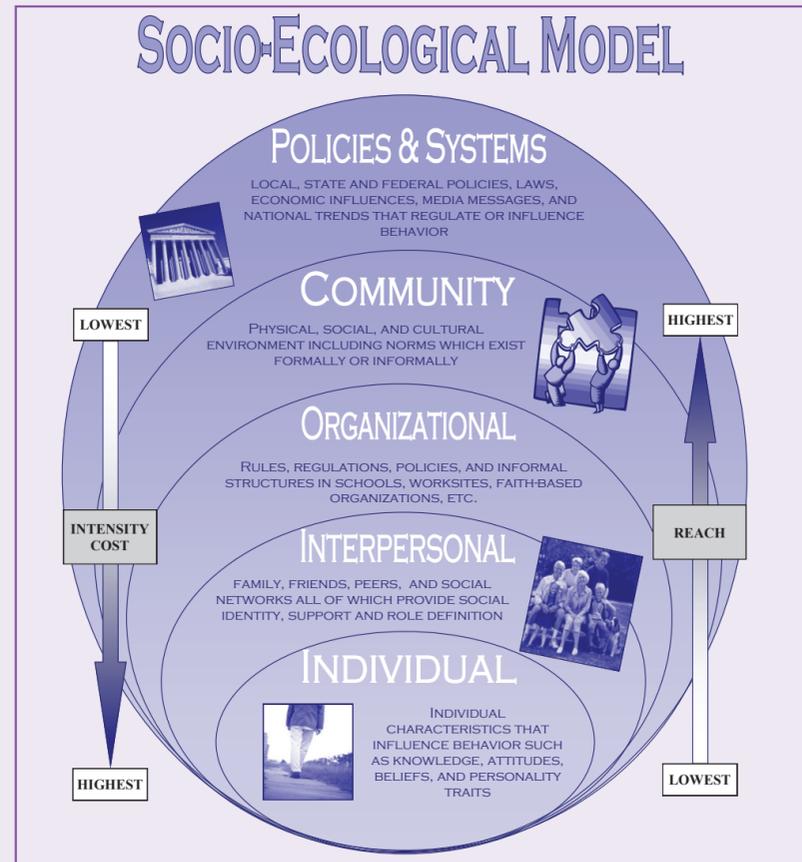
However, since you live and work with other people every day, if you are able to influence a friend or co-worker to quit too, you both get less secondhand smoke and are able to support each other in the effort. Your interpersonal relationships of family, friends and social networks that have healthy habits can help you achieve your goal by surrounding you with a supportive network.

Your odds for success increase even more if you work in an organization where the environment isn't conducive to tobacco use. An example would be if your employer has a worksite wellness program that has adopted worksite policies to designate a smoke free campus and provides supports for smoking cessation. Everyone in the organization has an increased chance of improving his or her health by just working there.

When enough organizations in a community adopt the same kind of environmental changes, there is a good chance that the social and cultural norms will change where we live, work and play. This is often achieved through the work of coalitions and partnerships.

When a law is passed, such as the Clean Indoor Air Act of 2009, significant health improvements can occur because there is a policy and systems change. The act prohibits cigarette smoking in all worksites to prevent second hand smoke exposure.

The most effective public health strategies include strategies in more than one level of individual, interpersonal, organizational, community and policy. This concept is known as the socio-ecological model. It holds promise for public health professionals like those at Panhandle Public Health District, and all of us in the Panhandle community, by helping to make the healthy choice the easy choice.



Panhandle Public Health District

Vision: A coordinated system of public health services that promotes and enhances the health status of the Panhandle-wide community Serving the Nebraska Panhandle counties of Banner, Box Butte, Cheyenne, Dawes, Deuel, Garden, Kimball, Morrill, Sheridan, and Sioux

Kim Engel, Director
Sara Sulzbach, Office Manager
Jessica Davies, Wellness and Volunteer Coordinator
Melody Leisy, RN, PRMRS Coordinator, Public Health Nurse
Becky Corman, RN, Emergency Response Coordinator, Public Health Nurse
Kelly Dean, RN, Public Health Nurse
Tabi Prochazka, Environmental Health and Electronic Media Coordinator
Mary Wernke, Training Academy, Communications & Grants Development Coordinator
Janelle Hansen, Community Organizer, Health Educator

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

Branch Office: P.O. Box 1115, 1011 Main Street, Bridgeport, NE 69336
Phone 308-262-2217, Fax 308-262-1317, Toll Free 855-227-2217

Website: www.pphd.org

Nebraska Panhandle Communities of Excellence seeks to reduce tobacco use, exposure, influence

Late in 2010, Tobacco Free Nebraska awarded a new contract for the Panhandle of Nebraska. Tabi Prochazka, environmental coordinator with Panhandle Public Health District will manage *Nebraska Panhandle Communities of Excellence in Tobacco Control*.

"TFN will seek to reduce the human burden of premature illness, death and disability caused by tobacco products using four primary strategies," Prochazka said. They are:

- prevent youth initiation
- eliminate secondhand smoke exposure
- reduce tobacco industry influence
- increase social capital assets to accomplish goals of mutual benefit

In partnership with the existing Panhandle Prevention Coalition, the NPCX will improve capacity to assist in tobacco control through training and assessment strategies.

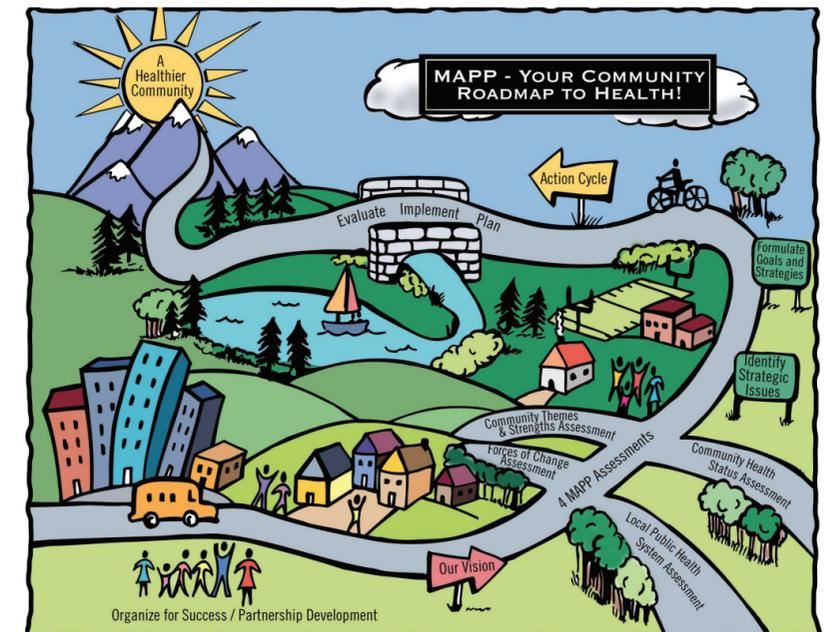
"The prevention coalition has a similar mission to reduce substance abuse among youth and adults: changing community norms and policies, increasing local collaboration and improving knowledge, motivation and development of public policy and

political will regarding substance abuse, including tobacco," Prochazka added. "These goals coincide well with the Communities in Excellence comprehensive strategies around environment, enforcement and policy."

In addition to the increase in social capital assets, Prochazka said a primary function of the first six months will be to assess the existing environment, policies and enforcement efforts. Assessments will include compliance with existing state and local policies, school policies and multifamily housing complex policies.

Community campaigns designed to educate the public about the burden of illness, death and disability caused by tobacco products will also be implemented.

Finally, PPHD will work with the Nebraska State Patrol and Scottsbluff Police Department to implement increased compliance checks with tobacco retailers in the Panhandle to prohibit tobacco sales to minors and increase checking IDs for those purchasing tobacco products.



Please complete the Community Health survey online at www.pphd.org.

2010 Board of Directors

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Kelly Utley, Community-Spirited Citizen

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Adam Edmund, Community-Spirited Citizen

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Dr. Justin Moody, DDS
Dr. Richard Jagers, DVM

Revelers celebrated at New Year parties free of smoke

More than 80% of all Nebraskans do not smoke and in 2010 they were able to enjoy smoke-free celebrations at bars, clubs and restaurants for special occasions such as New Year's Eve.

Nebraska's Clean Indoor Air Act went into effect in June 2009 and the response has been overwhelmingly positive, Environmental Health Coordinator Tabi Prochazka said. "Nebraska was the 16th state to go smoke-free. Noncompliance has not been a serious issue with enforcing the Clean Indoor Air Act."

A new era of better health and wellness for employees and customers of businesses, such as bars and restaurants, is here. If individual patrons or staff have problems with smokers not taking their

cigarettes outdoors, it's easy to report, she added.

"Simply call the local law enforcement or our office or report anonymously on line at <http://smokefree.ne.gov/ReportingForm.htm>," Prochazka said. "If business owners have questions about enforcement or penalties, we can get them information and other resource materials to enforce the act in their bar, club or restaurant."

Smoking causes productivity losses totaling \$499 million annually in Nebraska. This is important protection for Nebraskans from lung cancer, heart disease, emphysema and other illnesses caused by tobacco use and exposure.



Bed bugs in Panhandle

It's every mother's wish when she tucks her little ones into bed at night. "Good Night. Sleep tight. Don't let the bedbugs bite."

But bedbugs are not mythical creatures like the monsters that live under your bed. Small, flat, parasitic insects, bedbugs feed solely on the blood of people and animals while they sleep.



"Everyone is at risk for getting bed bugs," Tabi Prochazka, environmental health coordinator at Panhandle Public Health District said. "However, anyone who travels frequently and shares sleeping quarters where people have previously slept has a higher risk of being bitten."

"One of the easiest ways to identify a bed bug infestation is the tell-tale bite marks on the face, neck, arms, hands or any other body parts while sleeping," Prochazka continued. "Often, these bite marks may take as long as 14 days to develop in some people, so it is important to look for other clues."

Signs of a bed bug infestation include bed bugs' exoskeletons after molting, live bugs in the folds of mattresses and sheets, rusty-colored blood spots on mattress or nearby furniture or a sweet musty odor.

Prochazka said bed bugs are expert at hiding. "Their slim, flat bodies allow them to fit into the smallest of spaces and stay there for long

periods of time, even without a blood meal. Bed bugs are usually transported from place to place as people travel."

She urges travelers to be aware the bugs may hide in the seams and folds of luggage, overnight bags, folded clothes, bedding and furniture.

Prochazka works with owners of hotels, motels, bed and breakfast establishments and multi-family housing units to find solutions for bedbugs if it becomes a problem in their business or rental property.

The presence of bed bugs does not mean the home or business is dirty. Because travelers may carry the bugs without anyone's knowledge, diligence on the part of

the innkeeper is important. The best way to prevent bed bugs is regular inspection for the signs of an infestation.

Pesticide resistance and misuse are also potential concerns. Because bed bug infestations are so difficult to control, residents may resort to using pesticides not intended for indoor or residential use – causing additional health concerns. A licensed and experienced pest control company is the only way to treat and cure a bed bug infestation.

"If you suspect you have been exposed to bed bugs, contact your landlord or a professional pest control company experienced with treating bed bugs, Prochazka concluded.

Chadron hospital wellness, continued ...

mile of corridors and stairs and set up three times each day staff can join the group walk. Nurses are getting a lot of walking in the corridors already, she said.

Lecher hopes to show positive outcome to the hospital's board of directors by year's end, so they can recognize the value of

Wellness Council, continued . . .

A U.S. Department of Health and Human Services report in 2002 revealed that at worksites with physical activity programs, employers have reduced healthcare costs by 20 to 55 percent, reduced short-term sick leave by six to 32 percent and increased productivity by two to 52 percent.

No company is too big or too small to get on board with worksite wellness. "Businesses can reduce absenteeism, improve morale and productivity, plus employers should see a cost savings," Davies said.

PPHD hosts information opportunities

Breastfeeding at work, continued...

and are the primary breadwinner in nearly four of 10 American families.

Returning to an unsupportive work environment has been identified

their investment in worksite wellness. Jessica Davies, worksite wellness coordinator at PPHD, said Lecher is cultivating a culture of wellness that will be instrumental in improving wellness among staff, leading to higher morale and reductions in employee turnover and absenteeism.

once each quarter for companies interested in getting on-board to support healthy lifestyle choices. Keynote speakers and networking time are available.

Attendees will hear about how these agencies have created model, results-oriented programs. Updates on best practices will be shared. There is no cost to attend and a free incentive will be provided to each attendee.

For more information on worksite wellness, contact Davies by calling 308-487-3600, ext. 101, e-mail jdavies@pphd.org or visit www.pphd.org.

as a major reason for avoidance or early abandonment of breastfeeding. "Workplace support can bridge this gap and help more women to balance working and breastfeeding," Davies concluded.

Message from the Director

According to the World Health Organization, "Health is a dynamic state of complete physical, mental, spiritual and social well-being and not merely the absence of disease or infirmity." It can be said then, that a "healthy community" goes beyond physical health alone.

Every three to five years, public health departments go through a planning process known as Mobilizing for Action through Planning and Partnerships to guide our actions for the coming years. The goal of MAPP is optimal community health — a community where residents are healthy, safe, and have a high quality of life. Panhandle Public Health District is collaborating with Scotts Bluff County Health Department in 2011 to complete several

assessments and plans through the MAPP process.

I encourage the public to join us and become involved in the MAPP planning. Community residents will gain a better awareness of the area in which they live and their own potential for improving their quality of life. Community-driven processes also lead to collective thinking and a sense of community ownership in initiatives, and, ultimately, will produce more innovative, effective, and sustainable solutions to complex problems. Community participation in the MAPP process may augment community involvement in other initiatives and have long-lasting effects on creating a stronger community spirit.

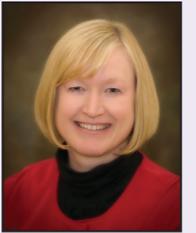
There are four assessments in the MAPP process, preceded by a visioning session and followed by the development of the strategic plan. The four assessments are:

- community themes and strengths – surveys and focus groups to gather public opinion
- community health status – a uniform dataset of leading health indicators (see graph below)
- forces of change – trends, events and factors that impact health and quality of life
- local public health system assessment of accessible services

PPHD and SBCHD will host the kick-off meeting February 4 in Bridgeport as part of a larger Panhandle Partnership membership meeting. We will meet quarterly

throughout 2011 wrapping up the process by the end of the year.

Please participate by completing the Community Health survey online at pphd.org. If you are interested can attend the February 4 meeting, please RSVP to kengel@pphd.org. The meeting will be from 10 a.m. to 3 p.m. with lunch included. There will also be opportunities for your involvement in local focus groups over the upcoming months. Please let us know if you are interested in participating!



Kim Engel
Director

Assessment, Assurance & Policy Development -- 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.

| Health Indicator | PPHD | SBCHD | NEBR | USA |
|--|------|-------|------|------|
| No health care coverage for adults 18-64 | 21.2 | 22.5 | 14.5 | 16.8 |
| Health Status | | | | |
| Ever told they have coronary heart disease | 3.9 | 2.9 | 3.9 | 4.2 |
| Ever told they have diabetes | 6.6 | 9.3 | 7.4 | 8.1 |
| Ever told they have asthma | 13.6 | 8.0 | 7.6 | 8.6 |
| Ever told they have high blood pressure | 27.7 | 25.4 | 26.5 | 27.8 |
| Ever told they have high cholesterol | 29.5 | 34.5 | 36.6 | 37.6 |
| Risk Factors | | | | |
| Smoke cigarettes | 23.4 | 23.2 | 19.1 | 19 |
| Use smokeless tobacco | 27.7 | 12.6 | 20.6 | |
| Obesity (body mass index) | 29 | 29.3 | 26.8 | 26.4 |
| Overweight, but not obese | 36.7 | 32.5 | 37.6 | 36.5 |
| No leisure time activity | 24.6 | 27.4 | 23.4 | 23.6 |
| Binge drinking (>5 alcoholic drinks on one occasion) | 22.2 | 14.9 | 18.5 | 15.7 |
| Heavy drinking (>2 for men or >1 for women/day) | 2.8 | 3.8 | 4.5 | 5.2 |
| Good Health Habits | | | | |
| Consumes fruit & vegetables 5X/day | 21.5 | 26.0 | 24.1 | 24.4 |
| Participate in moderate/vigorous physical activity | 49.7 | 52.6 | 52.0 | 49.5 |
| Participate in vigorous physical activity in a usual week | 26.7 | 22.9 | 30.6 | 28.3 |
| Preventive Measures | | | | |
| Cholesterol level check in past five years | 66.3 | 64.5 | 73.8 | 74.8 |
| Ever had sigmoidoscopy/colonoscopy (adults >50 years) | 48.6 | 45.0 | 58.6 | 62.1 |
| Had pap test in past three years (women > 18 years) | 77.5 | 75.0 | 83.7 | 82.8 |
| Had mammogram in past two years (women > 40 years) | 57.9 | 59.8 | 72.7 | 76.0 |
| Ever had pneumonia vaccination (adults > 65 years) | 65.2 | 62.3 | 71.2 | 67.1 |
| Flu shot in past 12 months (adults > 65 years) | 68.5 | 72.0 | 76.2 | 71.5 |
| Visited dentist in past 12 months | 59.2 | 58.0 | 71.3 | 71.2 |

Source: Nebraska Behavioral Risk Factor Surveillance System Report 2007-2008. The data is gathered by telephone from a random sampling survey of Panhandle residents 18 and older.

Colon cancer survivor takes her story to others

Vonnie Schmunk of Bridgeport has fought the hard fight and appears to have won. Schmunk's battle with colon cancer began in August 1994 and started simply enough with surgery on her ankle.

In a cast for four months, Schmunk's doctor recommended she take a blood thinner to prevent clotting. However, when blood appeared in her stool, it set off alarms for the middle-aged book-keeper.

"Some people don't like to talk about blood and bowel movements," she said. "But I knew it meant something more." Schmunk asked her doctor for a colonoscopy.

Schmunk had a tumor in the top of her colon, just beneath the left breast. In two weeks, Schmunk was in surgery to remove 16 inches from her colon.

During 12 months of chemotherapy, Schmunk went to work nearly

every day. She did bookwork at the family's grocery store in Bridgeport, with only an afternoon off for a nap on the days she received the IV drug in Scottsbluff.

"There was never a time I went in for a checkup," she said, "that I wasn't scared to death."

She returned for checkups every six months for three years, then annually for two more years with no recurrences. There was no evidence of cancer in the lymph nodes or the liver, where cancer in this area of colon usually goes first.

Schmunk said she encourages others to get regular checkups. "I keep up with my annual colonoscopy and mammogram. It can always pop up some place else," she said.

Schmunk said she didn't have any other symptoms besides the blood in her stool. Other symptoms for colon cancer can include pain, aches or cramps in your stomach that don't go away, unexplained weight loss, or a change in bowel habits (constipation or diarrhea).

Three of four sisters in Schmunk's immediate family have also had various forms of colon cancer. Her three children



Vonnie Schmunk

have all gone in for colonoscopies, although only one has reached the age where it's recommended every three to five years. The youngest had polyps; they were nonmalignant and removed early.

"That's the beauty of regular checkups," Schmunk said. "If you catch them early, before the symptoms begin, they can be removed." After 16 years of regular checkups, a few noncancerous polyps have been removed, but Schmunk feels great.

"I'm very open about what I've been through," she continued. "I'm always the first to share. You have to be able to talk about these things to help people. They have to learn it's so important not to ignore (the symptoms)."

Possible symptoms of colon cancer:

- blood in or on the stool
- a change in bowel habits
- general, unexplained stomach discomfort
- frequent gas, pains, or indigestion
- unexplained weight loss
- chronic fatigue

Risk Factors:

- eating a low-fiber, high fat diet
- being overweight
- smoking
- an inactive lifestyle
- certain hereditary conditions, such as the tendency to have many colon polyps
- a family history of colon cancer, especially parents or siblings

Stay in the Game

Get your free FOBT kit
by mailing this coupon and your information to:
PPHD, Attn: Kelly Dean, PO Box 1115, Bridgeport, NE 69336

Name _____

Address: _____

Daytime phone number: _____
(must be a Nebraska Panhandle resident to qualify)

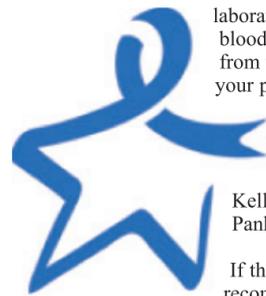
Or call 308-262-2217, toll-free at 855-227-2217
or email kdean@pphd.org

Stay in the Game: colon cancer curable if detected early

If detected early, 90% of colon cancer cases are curable. However, because it may have no symptoms, many people do not get checked for this common illness. Your risk of having colon cancer is one in 19 -- if you want to *Stay in the Game*, you are urged to take a simple at-home test using a free test kit available from the Panhandle Cancer Coalition and the Nebraska Colon Cancer Screening Program.

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

The free fecal occult blood test (FOBT) checks for hidden blood in the stool. The at-home kit involves placing a small amount of stool on a card and sending it to a



laboratory where it is checked for blood. The lab will send results from the FOBT test kit to you and your physician.

"It's simple, free and is an important step in preventing cancer," said Kelly Dean, coordinator of the Panhandle Cancer Coalition.

If the lab finds blood, guidelines recommend a follow-up colonoscopy. "We can help people arrange for follow-up testing if necessary," Dean said. "Our goal is to increase awareness and screening in the Panhandle and reduce colon cancer." To receive a free test kit, see coupon above.

Colon cancer is an equal opportunity diagnosis. Both men and women of all racial and ethnic groups are at risk for colon cancer, but the cancer occurs more frequently in people who are obese.

If you are older than 50, experiencing symptoms, or are at higher risk, please talk to your physician about being screened for colon cancer. Other recommended screening tests include:

- sigmoidoscopy every five years
- colonoscopy annually if you have a first degree relative with a history of colorectal cancer or every 10 years if the hereditary risk factor does not apply
- double contrast barium enema every five to 10 years

Mold cleanup following flooding in southern Panhandle

"A mold allergy can show up looking like a cold," reports Tabi Prochazka, environmental health coordinator for Panhandle Public Health District. "Stuffy nose, wheezing and sneezing, headaches and fever could be an allergic reaction to the spores that will grow nearly anywhere, given the right amount of moisture."

Mold is a microscopic fungi that lives on plants or animals, she continued. It was a problem for many following floods in the southern Panhandle in 2010.

"There are 1.5 million species of fungi," Prochazka continued. Mold typically originates outside the home and comes into the home through windows and doors, growing most readily in kitchens and bathrooms. "No home is mold free," Prochazka said. "In fact, a recent study showed 100% of homes have some mold growing on a surface."

We do not recommend testing for mold as it is expensive and sometimes unreliable because molds are naturally present in the outdoor environment. If you can see it or smell it, you've probably got mold.

"To clean moldy areas, wipe them down first with water and then wash again with a solution of bleach and water," Prochazka said. The recommended solution of bleach to water is one-cup bleach to five gallons of water, but NEVER more than one-cup bleach to one gallon of water.

Open the windows to allow for plenty of circulation when using the bleach solution. "You need to be particularly careful to thoroughly disinfect surfaces that may come in contact with food, such as countertops, pantry shelves, refrigerators, etc.," Prochazka said.

To help prevent mold in your home:

- fix leaky pipes
- use a dehumidifier and exhaust fans
- dispose of moldy material immediately and
- always clean with a bleach-based product. Bleach neutralizes the mold allergens.

PRMRS evacuation exercise, continued ...



Melody Leisy
PRMRS Coordinator

an ambulance were tested in the response."

In response to the "fatality," Leisy said Gordon Memorial Hospital assisted by providing a knowledgeable response for a multiple fatality incident. A Dawes County mortician also responded to the notification call in a timely manner, she said.

There were some areas where improvement in planning is needed, Leisy added. "Security on the site was an issue. Local law enforcement was unable to assist and respond. Communication among members of the ICS regarding timing of patient transfers could have been improved to get the best possible outcome."

Leisy said the method of organizing supplies and equipment needs to be formalized to meet priorities. The

evacuation process and at the receiving hospital (the new hospital). The staff was knowledgeable and understood the layout of the hospital well for the resources they needed."

"Staff, partners and volunteers used different types of vehicles to transfer patients," she continued. "Handicapped accessible busses from an assisted living facility and

method of organizing and securing the loading/unloading docks for equipment and patients should also be in different locations to avoid confusion.

A final conclusion regarding fatality management suggested area agencies should engage in additional discussion concerning events with more than five deaths, as simulated in the exercise.

Participants included the staff and family members of Chadron Community Hospital and other Panhandle Regional Medical Response System partners including area hospitals, local public health departments, emergency management, mental health services, emergency medical services and volunteer organizations.

Others on site, but not directly involved in the exercise were the Chadron fire department, laboratory services, pharmacy personnel, Job Corps, Chadron State College and the private sector.



Nurses at Chadron Community Hospital move a patient into the brand new hospital with the assistance of busses from a local assisted living facility.

PPHD wellness award, continued ...

South Platte Natural Resource District out of Sidney was also awarded the Sower Award and the City of Gering was an award winner in 2009.

Jessica Davies is the wellness coordinator at PPHD.

Public health nurses help local residents find medical home

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 Public Health Nurse Kelly Dean, PPHD's newest staff member. Dean makes it her business to keep an updated list of community resources and assist with referrals for Panhandle residents seeking a medical, dental or vision home.

"In the Public Health Nurse program, the aim is to assure access to health care and support rural services. The focus is to help families find the appropriate health care providers and dentists."

This includes those who are new to the area and those with

Medicaid. Dean said she also performs a health assessment on each client/family to determine if further care is necessary.

"Having a medical home is important to a family's ongoing healthcare", Dean said. "A family should see the same physician for their well-child visits, illnesses and/or yearly exams. This reduces medical costs and promotes continuity of care. It is also important to maintain regular visits with the same dentist and eye doctor."

Dean said she receives referrals from physician's offices, state Medicaid applicants, Nebraska Health and Human Services and hospital emergency rooms.

In some cases, there are language and transportation barriers. Dean links with community resources, such as the county handi-buses

and language translators to overcome these barriers.

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

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

To contact a public health nurse call 308-262-2217 or by calling toll free 855-227-2217/

Are you at risk for falling?

The health care community has done a great deal of research to identify reasons why older adults struggle with falling. Risk factors have been identified that help us understand what causes people to fall. Some of the risk factors are obvious, while others require assessment by your local health care provider.

Here is a simple test to help you identify whether or not you are at risk for falling.

1. Have you experienced at least one fall in the past year?
 yes no
2. Do you currently take four or more medications?
 yes no
3. Do you have difficulty getting up from a chair?
 yes no
4. Do you feel unsteady when you are walking or climbing stairs?
 yes no

What does it mean?

If you answered yes to **one or fewer** questions, your risk of falling is low. If you answered yes to **two or more** questions, your risk of falling is moderate and you need to visit with your health care provider.

Prochazka advises: Get the lead out

Many children living in the Panhandle have lead levels in their blood high enough to cause significant damage to their health, estimates the Panhandle Public Health District based on data from a 2001-2005 state survey.

Long-term exposure to even low levels of lead can cause irreversible learning difficulties, behavioral problems, and delayed neurological and physical development.

Panhandle Public Health District Public Health Nurse Kelly Dean said it is especially important to have children checked at one and two years of age. "Children at this age are more likely to be exposed to the lead and are especially susceptible to its toxic effects," Dean said. "Most commonly, lead dust gets on children's hands and toys and then into their bodies through normal hand-to-mouth activity."

"Major sources of lead exposure among U.S. children are lead-based paint and lead-contaminated dust found in deteriorating buildings," Tabi Prochazka, PPHD environmental health coordinator said. "Although lead was banned from residential use in 1978, it remains a hazard in homes built before that time."

"The older the home," Prochazka said, "the more likely it



is to contain lead-based paint and to have a higher concentration of lead in the paint." Other sources of lead include soil and dust, drinking water and parent's occupations and hobbies such as hunting, fishing, auto repair, art and gardening.

Despite the continued presence of lead in the environment, lead poisoning is entirely preventable. Parents can reduce a child's exposure to lead in many ways. Here are some simple things you can do to help protect your family:

- Ask your doctor to test your young children for lead even if they seem healthy, as there often are no signs or symptoms present.
- Report chipped or cracked paint to your landlord if you live in an older home built before 1978.
- Make sure your children do not chew on painted surfaces, such as toys or windowsills.
- Keep the area where your children play as dust free and clean as possible.
- Learn about and avoid toys that contain lead.

Falls leading cause of injuries

Falls are the leading cause of injury, deaths and hospitalizations for adults age 65 and older. In the last five years, an average of 130 Nebraskans died from injuries related to falls; more than 8,200 visited an emergency room and 3,200 were hospitalized due to a fall-related injury.

The most common injuries associated with falls are fractures, particularly of the hip, spine, ankle or arm and most falls happen from slipping, tripping, or stumbling on a level surface.

"Injuries related to falls are preventable," Kim Engel, director of Panhandle Public Health said. "The easiest and most enjoyable way of preventing falls is to improve strength and balance with exercise such as tai chi. There are classes in many Panhandle communities, led by trained facilitators, with programs for those who are able to sit or stand."

Other fall prevention methods include reviewing medications with your health care provider for side effects or interactions, getting regular eye exams, improving lighting and reducing hazards in your home. More than half of all fall-related injuries occur at home.

Suicide awareness walk draws crowd on rainy day in Alliance



They walked arm-in-arm for more than a mile. They laughed, they cried, they prayed, they cursed.

Nearly 150 people came together September 18 to remember those who have been victims of suicide -- both those who have died and those left behind -- at the Out of the Darkness community walk in Alliance.

This was the first of what regional organizers hope will become an annual event for the Panhandle, one of nearly 200 walks nationwide to help promote awareness of suicide prevention.

Those walking included families honoring their loved ones with T-shirts emblazoned with the victim's names and the date they died. Others wore bracelets with the name of a young man who took his life this spring. All were there to remember.

Despite chilling rain the crowd started to swell by 9 a.m. Just before the walk commenced, emcee Tony Amill led the group in a prayer written by local minister William Graham. The launch of nearly 150 blue balloons gave the dreary gray sky its only touch of blue as mist continued to dog the walkers throughout the morning.

The community awareness walk was initiated by Donna Jones, who lost her son Logan Anderson to suicide in March 2009. Many members of Jones' family joined in the walk, including members of her church. Jones thanked the walk's supporters from the event's Facebook site. She called the event "a big step to bring suicide 'out of the darkness.'"

With more than \$8,500 raised locally for the American Foundation for Suicide Prevention, Kim Engel of Panhandle Public Health District said she was very pleased by the turnout. "We thought the weather might slow people down," she said. "But the turnout was amazing and exceeded our expectations."

Sponsors for the event were the Panhandle Suicide Prevention Coalition, Western Heritage Credit Union, Bank of the West, Box Butte General Hospital, Panhandle Public Health District and the City of Alliance.

The suicide prevention coalition meets the third Tuesday of each month from 6-8 p.m. Call PPHD at 487-3600 for more information.

QPR training offers skills to lay person

Suicide is a gut-wrenching topic for everyone involved and many people feel helpless to prevent it. A common misconception is that only professionals can have any impact on preventing suicide in our community. However, trained individuals are empowered to help prevent suicide by learning a simple method of Question, Persuade and Refer.

QPR training is offered free of charge several times each year. This two-hour emergency intervention is offered to both lay people and professionals.

Like CPR, QPR uses a "chain of survival" approach in which the individual learns to recognize early suicide warning signs, question their meaning to determine suicide intent or desire, persuade the person to accept or seek help and refer the person to the appropriate resources.

The QPR training is offered in response to a region-wide suicide prevention task force's plans to help prevent suicide in the area through training and education, visible and accessible assistance, and community awareness.

Risk Factors for Suicide

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

- Family history of suicide
- Family history of child maltreatment
- Previous suicide attempt(s)
- History of mental disorders, particularly depression
- History of alcohol and/or substance abuse
- Feelings of hopelessness
- Impulsive or aggressive tendencies
- Cultural and religious beliefs (e.g., belief that suicide is a noble resolution of a personal dilemma)
- Local epidemics of suicide
- Isolation, a feeling of being cut off from others
- Barriers to accessing mental health treatment
- Loss (relational, social, work or financial)
- Physical illness
- Easy access to lethal methods
- Unwillingness to seek help because of the stigma attached to mental health and substance abuse disorders or to suicidal thoughts

If you or someone you know is considering suicide, contact the National Suicide Prevention Lifeline at 1-800-273-8255 (TALK).

Training academy assures competent workforce



Mary Wernke
Training Academy,
Communications and Grants
Development Coordinator

Small businesses in the Panhandle are often required to travel huge distances to attend national caliber conferences with expert trainers. However, a local group is using collaborative efforts to bring the trainers to the Panhandle, lowering costs and building the capacity of employees here.

“Most often, it’s impractical to send two or three individuals to an expensive training in California or the

east coast,” Mary Wernke, coordinator for the Panhandle Partnership Training Academy said. “Instead, we partner to bring the best trainers to the Panhandle and make the training available to dozens, if not hundreds of individuals.”

The Partnership is a mix of more than 60 health and human service agencies who collaborate on not only trainings, but also do many planning exercises together and apply for grant funds to finance those projects.

Responsible Beverage Server Training is a training offered through the Partnership to train individuals who serve or sell alcohol and/or tobacco in retail establishments like bars, convenience and liquor stores. RBST training was developed in cooperation with Tami Otto of the Nebraska State Patrol and the Panhandle Prevention Coalition.

The two-hour course originates in Scottsbluff, but is broadcast via televideo into as many as 10 or 12 other locations across the Panhandle, so small town merchants are not forced to travel outside their own county for this worthwhile certification.

“Much of the beauty of the training academy is braiding limited funds available for training,” Wernke added. “Western Nebraska Community College is a major partner in developing for-credit courses and providing resources for other noncredit classes. The end result of the academy’s mission is better trained individuals – a complement to any agency and a service to the consumers they serve.”

Classes offered by the training academy during the past year include:

- 40 Developmental Assets
- Adobe Dreamweaver, Flash, Fireworks and Photoshop
- Bridges out of Poverty
- Communities Mobilizing for Change on Alcohol (beginners and advanced)

- Cultural Competency
- CAP-WN staff trainings
- Community Emergency Response Team training
- Digital Camera I
- Intentional Peer Support
- Legal Issues I
- Multidisciplinary Team training
- Nonprofit Leadership Institute
- (Pediatric) Sexual Assault Nurse training
- Perspectives: Does It Make a Difference?
- Question, Persuade and Refer (suicide prevention training for lay people)
- Responsible Beverage Server Training
- School Refusal Behavior
- Sensory Processing
- Senior Health Insurance Information Program (SHIIP) training
- Trauma Informed Care
- Worksite Wellness
- Welfare Reform

Upcoming trainings include additional episodes of Digital Camera I, Pure Performance (a seminar by John Underwood regarding athletes and alcohol), and Prevention Institute’s workshop on using policies, system and environmental changes to promote community well-being. For more information about trainings for your agency or yourself, please contact Wernke at 308-487-3600, ext. 103.

Brush ‘n’ Up teaches youngest students good dental care

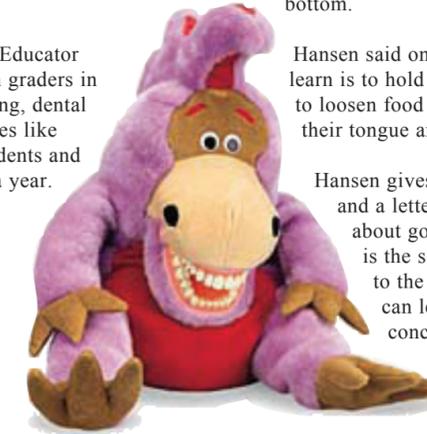
Each year more Panhandle youth are ready to flash their pearly whites, as they learn proper oral health techniques and receive better access to dental visits.

Panhandle Public Health District Health 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. Students and adults should see a dentist at least once a year.

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 preschool, kindergarten, 1st and 2nd grades enjoy a visit from Freddy Flossisaurus or Buggy

Malone, crazy-clad stuffed animals who extol the virtues of brushing inside and out, way in the back, top and bottom.



Freddy Flossisaurus

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 February through May, with a kickoff in

February for Dental Health Month.

Kids fitness day a hit with kids

Each year, Panhandle Public Health District holds a special event for area third-graders to learn about fitness and nutrition. Activities at the events include both physical activity and nutrition stations.

This year there were Kids Fitness & Nutrition Days in Alliance on October 14, in Chadron on October 26, and in Sidney on November 4. Each of the events drew students from area schools, with 200 third-graders attending the Sidney event from Leyton, Banner County, Creek Valley, Potter-Dix, South Platte, Kimball and Sidney public schools.

The Alliance event had 164 children from Hemingford, St. Agnes and Alliance Public Schools.

In Chadron, 123 students from Gordon-Rushville and Chadron Public Schools attended.

This event is sponsored by the Nebraska Beef Council, University of Nebraska at Kearney and Panhandle Public Health.

Prescription drug assistance available through PPHD and WCHR

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

Instead, Panhandle Public Health District provides WCHR with a portion of the funds to administer the program. This is available through WCHR in Sioux, Dawes, Sheridan and Box Butte counties.

Beal said the income guidelines are not overly restrictive and the programs can provide a wide variety of name brand prescriptions and even a few generic drugs through the drug companies’ charitable program.

The drugs obtained through the assistance program are provided by the drug manufacturers and sent directly to the doctors, Beal said. She said the program does not meet an immediate need for a prescription that

day. Instead, the drugs take four to six weeks to arrive in the first shipment and are refilled over the long term.

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

Children’s Outreach Program touches lives of new moms and babies

Most mothers and newborns leave the hospital within 48 hours of a child’s birth, even if they are covered by insurance, Jean Jensen with Volunteers of America in Wellen said. Jensen coordinates Children’s Outreach Program throughout the 10 county area.

Doctors and other health care providers know the first few days of a child’s life are important for medical, social and emotional reasons. As part of the Children’s Outreach Program, nurses from area hospitals and home health

programs visit mothers and their new babies 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, often young mother.

Jensen said without the outreach program, most moms will not receive their first checkup with the doctor until two weeks after the delivery. The most common concern is breast-feeding. Without support within a few days, women

having problems with breast-feeding will often quit. At the home visit, the nurse can make referrals for medical problems like failure to gain weight, jaundice, infection or other problems for the child or post partum concerns for the mother. A family might also need help with health insurance, car seat safety or nutrition programs like WIC (Women, Infants and Children). The program is voluntary and free to parents. Funding for this service is shared between the hospitals and PPHD.

Healthy habits learned early: kids scrub up

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 program called “Scrub Club.”

PPHD Health Educator Janelle Hansen targets preschool through fourth grade students throughout the Panhandle to teach the importance of washing up thoroughly and regularly. Hansen said she carries along her own “germs,” a bag of harmless 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



Health Educator Janelle Hansen shows Matthew Moomey, Jamyson Red Bear, Henry Haskell and Olowan Dubray from the Alliance Early Childhood Preschool a bag of germs, simulating what might be on their hands before they scrub up.

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 to wet their hands. After adding soap, children are taught to scrub for 20 seconds by singing or reciting their ABCs.

While hand washing is a year ‘round activity, Hansen primarily visits day cares, preschools and elementary schools in the late fall and early winter. The main message behind hand washing is the importance of being healthy over all, she said.

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. More information is available by calling Hansen at PPHD, 308-487-3600, ext. 105.

No I.D. No Sale. No Way. Retailers trained as responsible servers



Tami Otto
Nebraska State
Patrol

The Panhandle Prevention Coalition stepped up further into the realm of environmental strategies in 2010. The coalition has accomplished advanced training in the evidence-based strategy Communities Mobilizing for Change on Alcohol and the success

of sobriety checks, compliance checks and Responsible Beverage Server Training this past year.

Local and regional community coalition members received advanced CMCA training in March, May and October of 2010. The training, provided by Youth Leadership Institute of Marin County, took place in three 2-day modules to allow coalition members time between the sessions to coordinate activities and test implementations of the strategies.

CMCA uses community organizing to

reduce adolescent (13-20 year olds) access to alcohol by changing community policies and practices, and thus community norms.

Community organizing is a process where people who live in proximity to each other come together to act in their shared interest. Initiated in 1991, CMCA has proven effective in limiting alcohol access to underage youth. It not only reduces underage drinking, but also communicates a clear message to the community that underage drinking is inappropriate and unacceptable. The goal is to reduce youth access to alcohol by eliminating illegal sales and by preventing procurement of alcohol for youth by adults.

Environmental strategies use policy and system changes -- changes in norms or the "way things have always been," -- to create changes in unacceptable behavior, such as underage drinking.

Through environmental strategies, the coalitions now sponsor quarterly Responsible Beverage Server Training throughout the Panhandle. The training originates in Scottsbluff, under the instruction of State Trooper Tami Otto, and can be televised into every local hospital and public health department upon request.

RBST provides training to special use permit holders (community organizations with beer gardens at town festivals) as well as retailers in both on-sale (bars and restaurants) and off-sale (liquor stores) locations in checking IDs, recognizing fake or illegal IDs, as well as addressing things like over-serving and educating servers on existing laws.

The RBST training was offered four times in 2010 and will be repeated four times in 2011. Dates and times are:

- Saturday, March 12, 9a.m. - noon
- Tuesday, June 14, 1-4 p.m.
- Saturday, September 17, 9 a.m. - noon
- Tuesday, December 13, 1-4 p.m.

For more information, contact your local community organizer (listed below).

Each participant takes a pre-test and post-test for certification purposes. Of the 273 server/sellers trained in 2010, only 45% passed the pre-test, but 98% passed the post-test.

Oftentimes, participants will attend RBST after failing a compliance check (attempt by underage person to purchase alcohol) by the state patrol or local law enforcement. In 2010, there were 168 businesses checked, 137 passed and 31 failed.

The Nebraska State Patrol also conducted sobriety checks (stopping motorists who may have been drinking) throughout the Panhandle. There were 590 sobriety check stops in 2010. Nearly 200 of the drivers were cited; 33 of which were for alcohol or drug related offenses. Seventeen arrests were made.

Funding for the RBST, compliance checks and sobriety checks is made possible through local and regional collaboration and funding from the Strategic Prevention Framework State Incentive Grants from the State of Nebraska.

Several merchants in the Panhandle are now requiring their employees to attend RBST and the Nebraska Grocer's Association is recommending the Panhandle model for their members who sell alcohol or tobacco.

Jan Lawler, PPC coordinator, credits the success of this ongoing effort to the collaboration of law enforcement, local community coalitions, Region 1 Behavioral Health Authority, the Panhandle Partnership Training Academy and funding through the State Initiative Grant.

Panhandle Prevention Coalition goals:

- Reduce underage drinking (less than 21 years old)
- Reduce binge drinking among young adults (18-25 years old)
- Reduce the incidence of drinking and driving among all age groups

Special Needs Registry allows individuals to be less vulnerable in an emergency

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

The answer: The Panhandle Special Needs Registry enables persons who will be more vulnerable in an emergency to voluntarily provide information to emergency response agencies. The result is better emergency planning and improved disaster services for persons who need additional care and consideration.

The Panhandle Special Needs Registry links you to information about personal preparedness for emergency conditions. It will also alert search and rescue workers to the location of your residence and give them the vital information they need to help you. Finally, the registry helps local emergency agencies better plan for the needs of all our citizens.

Anyone from the list at right should register through the

local public health department, Panhandle Public Health District at 308-262-2217 or Scotts Bluff County Health Department at 308-436-6636. You may enroll yourself or help others enroll with their knowledge and permission. Please report any changes in your registration information by calling public health.

You will receive a reminder annually to update your registration information.

Please note, registration does not guarantee you'll be the first to get help in a disaster. There are so many needs during a disaster; emergency workers cannot help everyone at once. But, if you're name is in the registry, they will know the location of your residence and your need for additional assistance.

Everyone, not just those with special needs, should plan to be self-sufficient for at least two to five days with supplies including food, water and medications in

the case of a disaster.

Who should register:

- Persons relying on homemaking, personal care or nursing visits to maintain independence in their home or apartment
- Persons requiring life-sustaining equipment and uninterrupted electrical service
- Persons who are medically fragile and require special care and attention
- Persons having physical limitations that substantially impair mobility, strength, vision, hearing or comprehension

Who should not register:

- People who are fully able and usually healthy
- Persons living in assisted living facilities or other licensed residential health care facilities
- Persons who live outside the Nebraska Panhandle

Strategic National Stockpile provides emergency supplies when necessary



Becky Corman
ER Coordinator

In the event of a national emergency, the Centers for Disease Control and Prevention have large quantities of medicine and medical supplies to protect the American public.

Emergency Response Coordinator Becky Corman with PPHD said, "If there is a public health emergency, such as a terrorist attack, flu outbreak or earthquake severe enough to cause local supplies to run out, the CDC's Strategic National Stockpile will be put into service from locations around the United States."

Placed strategically around the country, the SNS can be delivered to any state within 12 hours. Each state has plans to receive and distribute the SNS medicine and medical supplies to local communities as quickly as possible."

Corman said in the case of the H1N1 flu outbreak in 2009, novel flu vaccines were distributed in a like manner across the U.S. "The medicine in the SNS is free to everyone and has a large enough stockpile to protect people in several large cities at the same time. If and when the SNS is distributed, the public will be notified through

the media or trusted community leaders like PPHD."

An act of terrorism or large scale natural disaster will require rapid access to large quantities of pharmaceuticals and medical supplies, Corman continued. Such quantities may not be readily available unless special stockpiles are created. No one can anticipate exactly where an attack or emergency will strike and few state or local governments have the resources to create sufficient stockpiles of their own, she said. Therefore, a national stockpile has been created as a resource for all. "The SNS is organized for flexible response as a first-line of support with immediate response 12-hour push packages," Corman said.

"These are caches of pharmaceuticals, antidotes and medical supplies designed to provide rapid delivery of a broad spectrum of assets for an ill-defined threat in the early hours of an event. These 'push packages' are positioned in strategically located, secure locations ready for immediate deployment."

The federal Department of Health and Human Services will transfer authority of the SNS to state and local authorities once it arrives at the designated receiving and storage site, Corman continued. State and local authorities will then begin the breakdown of the push packages for distribution locally.

The decision to deploy SNS assets rests with the U.S. DHHS, but may be requested by a state governor's office through the CDC or DHHS. In the meanwhile, health care providers, first responders and government officials are trained in the mission and operations of the SNS assets, Corman concluded.

Prevention Coalitions Contact Info

There are 11 coalitions in the Panhandle. One is regional, covering the entire Panhandle and the others are local.

If you are interested in working on prevention topics, ranging from underage drinking to suicide or tobacco prevention, please contact a prevention specialist or community organizer in your community.

Panhandle Prevention Coalition
Faith Mills
fmills@region1bhs.net
Prevention System Coordinator
Phone: 308-633-2070, X2123

Jann Lawler
jlawler@region1bhs.net
Prevention Grant Manager
Phone: 308-633-2070

Dawn Bahan
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Administrative Assistant
Phone 308-633-2092

Banner County
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Box Butte County
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Dawes County
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Phone: 308-432-2747, X111

Scotts Bluff County
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Phone: 308-631-7999

Project Extra Mile
Lanette Richards
scottsbuff@projectextramile.org
308-220-4137

Sioux County
Sandy Roes
director@wchr.net
Phone: 308-432-2474, X104

Preventing, Promoting, Protecting

40 Developmental Assets Message: All kids are our kids

The measure of a society's health is how well it takes care of the youngest generation. By this standard, Dr. Peter Benson, a leader in the field of child and adolescent development, says we fail.

(Panhandle) "rates of any indicator of child well-being – alcohol, tobacco, too early sexual activity, violence, school dropout, the percentage of children raised in poverty – are unsavory, whether you take them in absolute terms or in comparison to other (regions, states or) nations."

This year, Panhandle Partnership for Health and Human Services and Panhandle Public Health District began work with other Panhandle youth-serving agencies to develop Healthy Youth, Healthy Communities through the 40 Developmental Assets – building blocks of healthy development essential for all youth, regardless of their background.

The challenge, Benson said, is for all segments of the community – families, neighbors, schools, congregations, employers, youth organizations and more – to share in the responsibility for taking action to ensure all kids have what they need to grow up healthy, successful and caring.

Building Developmental Assets begins in the home, and flows into schools, where children spend much of their waking hours, and rolls out into the community through community champions. There are five inter-related strategies to achieving healthy youth in a healthy community:

- Engage adults from all walks of life to develop sustained strength-building relationships with children and adolescents both within families and in neighborhoods
- Mobilize young people to use their power as asset builders and change agents
- Activate sectors of the community to create an asset-building culture and to contribute fully to young people's healthy development
- Invigorate programs to become more asset rich and to be available to and accessed by all children and youth
- Influence civic decisions by influencing decision makers and opinion leaders to leverage financial, media and policy resources in support of this positive transformation of communities and society



Clay Roberts

The Panhandle Partnership's training academy brought Search Institute's 40 Asset training to schools and community youth workers in the Panhandle in August 2010, with Clay Roberts of Washington state, as the lead instructor.

Search Institute is an independent nonprofit organization providing leadership, knowledge and resources to promote healthy children, youth and communities. Roberts will return to the Panhandle more than once this spring to train six to eight more schools' staff.

Benson asks communities to consider three interlocking approaches:

1. meeting basic human needs
2. target and reduce, if not eliminate, the risks and deficits that diminish or thwart healthy development of children and adolescents (guns, predators, domestic and substance abuse, etc.)

3. unleashing the extraordinary power of community when people unite around a widely-shared vision of healthy child and adolescent development.

The third approach is as important as the first two and must be considered a long-term investment in the community. It includes both grassroots and top-down changes, residents taking individual action and leaders altering systems.

"If there is anything I know," Benson said, "it is that healthier development for America's children and adolescents is not about staring another short-term, professional-led program. Rather, it is about some combination of shared vision, passion and sustained actions that touches, encourages and changes most Americans and most communities."

In addition, key individuals in each community volunteer to "Share the Asset Message" with others in the community. Sharing the Asset Message begins when a person, sometimes a known leader but oftentimes not, begins to imagine, discuss and advocate for children. "One person at a time, one community at a time; that's how it begins and how it spreads and continues," Benson concluded.

Juvenile Justice planning renewed

Anyone with an interest in Panhandle youth, especially those involved in the juvenile justice system, is invited to participate in a series of regional meetings to assess the system for the Nebraska Crime Commission. Representatives of law enforcement, county attorneys, public defenders, probation, schools, youth-serving organizations, health and human service providers, faith organizations, citizens and community organizers may be particularly interested.

County commissioners in all 11 counties of the Panhandle have entered into agreements to complete the assessment and a three-year plan. The plan will be used as a foundation for all grant applications for county aid, juvenile services enhancements and violence prevention funds through Nebraska Crime Commission.

The first step in the assessment process was a community capacity survey of services and programs for youth up to age 19 in each county.

"This was an opportunity to identify the good work that many volunteers, schools, faith-based organizations, community recreation and formal programs are doing to support young people," said Joan Frances, assessment coordinator.

—turn to page 10

| Child well-being indicators | High School graduation rates 06-07 | Infant Mortality | % Babies low birth weight: | % Teen births | Juveniles arrested per 1,000 | Children with substantiated abuse/neglect report per 1,000 |
|-----------------------------|------------------------------------|------------------|----------------------------|---------------|------------------------------|--|
| Banner | 94.74 | 0.00 | 3.85 | 26.92 | 7.50 | 5.70 |
| Box Butte | 97.79 | 0.00 | 8.24 | 10.41 | 68.60 | 13.40 |
| Cheyenne | 92.25 | 5.69 | 6.69 | 8.96 | 34.50 | 7.50 |
| Dawes | 81.90 | 4.06 | 6.09 | 9.53 | 9.00 | 5.00 |
| Deuel | 92.31 | 0.00 | 4.95 | 10.89 | 11.90 | 0.00 |
| Garden | 94.29 | 0.00 | 4.60 | 5.75 | 0.00 | 2.90 |
| Kimball | 80.43 | 4.88 | 8.78 | 14.63 | 2.70 | 4.50 |
| Morrill | 98.68 | 10.07 | 9.40 | 11.07 | 48.10 | 8.00 |
| Scotts Bluff | 87.44 | 6.58 | 7.57 | 14.08 | 65.20 | 16.80 |
| Sheridan | 96.32 | 6.23 | 5.61 | 10.90 | 31.70 | 8.10 |
| Sioux | 100.00 | 0.00 | 1.72 | 6.90 | 27.70 | 0.00 |
| State Avg | 89.33 | 5.99 | 7.06 | 8.43 | 35.00 | 10.00 |

Sources: Nebraska Departments of Education, Health & Human Services, Nebraska Crime Commission

Radon 2nd leading cause of lung cancer



Tabi Prochazka
Environmental Health Coordinator

"Over half the homes in Nebraska have an elevated radon level," said Tabi Prochazka, environmental health coordinator for Panhandle Public Health District. "Fortunately, there are simple solutions to lower elevated levels of radon in homes."

She was joined by Mark Versch, environmental health analyst from the Nebraska Department of Health and Human Services, to inform residents how to protect their families from the negative health risks posed by radon and answer any questions regarding radon and radon mitigation.

In 2010 they held educational events in Chadron and Sidney and in 2011 they were in Alliance and Chadron. "We've had great turnouts at the Chadron Housing Fair and plan to participate each year," Prochazka said.

The general public as well as realtors, plumbers, heating and air conditioning contractors, home builders and other interested contractors were invited to attend. One topic

discussed was radon resistant new construction.

According to the environmental protective agency, radon resistant new construction costs much less than the cost to fix a radon problem if a homeowner tests for radon and finds elevated levels. "People looking at building a new home should consider the radon resistant construction techniques. It's easy to add to the building process and can protect their family from the risk of radon exposure and lung cancer," Prochazka said.

For homeowners that find out their house has an elevated radon level, mitigation techniques can still be implemented, but the first step is to test.

January is National Radon Action Month. PPHD will be kicking off a radon test kit contest in area schools in a campaign to draw attention to radon as a serious public health issue and, more importantly, to motivate Panhandle residents to take action to protect themselves and their families from the negative health risks posed by radon by testing their homes.

Radon is a naturally occurring, invisible, odorless gas that is harmless when dispersed in outdoor air, but when trapped in buildings, can be harmful at elevated levels. Radon is the second leading cause of lung cancer.

Free Lifesaving Radon Test Kit

Yes, I want to test my home for Radon. Please rush me my free radon test kit.

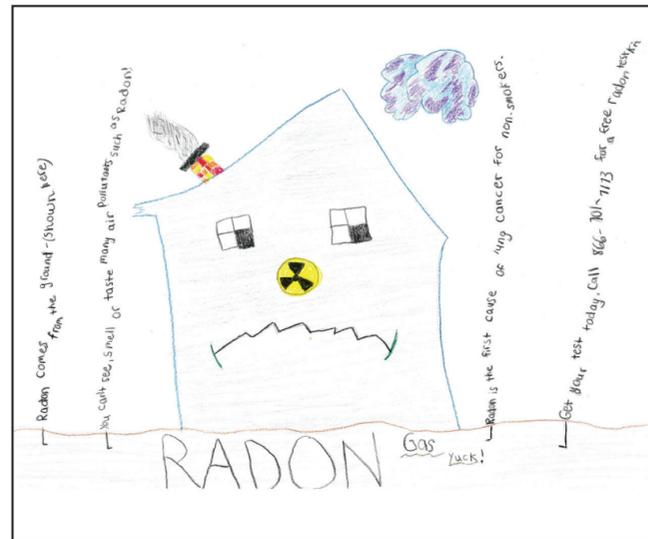
Get your free radon test kit from PPHD by mailing this coupon to Panhandle Public Health District, PO Box 337, Hemingford NE 69348, calling (866)701-7173, or emailing tprochazka@pphd.org. Be sure to tell us you received this coupon in the annual report!

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

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

Signature: _____

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



Jaydn McCartney of Chadron was the first place winner in PPHD's 2010 radon poster contest. Her prize was an iPod Nano. Other winners include Shaylee Gunwall, Chadron Middle School; Sydney Nordeen, Grandview, Alliance Schools; Ahlaura Pourier, Chadron Middle School; Eric Escajeda & Spencer Shields, Mary Lynch, Kimball Schools; Alexandria Noblin, Brendan Brehmer, Danielle Johnson, Kaci Waugh, Kaitlyn Haug and Teagan Westemeier, Chadron Middle School.



The fourth grade at Grandview Elementary school in Alliance was the winner in a contest to get the message out about radon. The students asked area homeowners to test their homes for radon, the second leading cause of lung cancer. Pictured above are the members of Shannon Underwood's class: Front Row (L-R) Angela Figueroa, Madison Franklin, Parker Knapp, Nathaniel Jensen, Domonique Harris, Brigitte Blankenship, Johnathan Sieggs, Bailey Buddemeyer, Abbagale Serl, Marcus Gonzales, Preston Pohlman. Back Row (L-R) Shayla Foote, Jessica Debus, Crystal Johnson, Hailee McCain, Brayden Du Bray, McKenzie Rainwater, Tyler Girard, Brandon Uhley, Grace Tolstedt. Not pictured: Dylan Hickox, Liam Swires, Mia Kravitz, Scarrlett Allen, Stephanie Hagler.

Where we live matters to our health: county rankings released

Nebraska is often touted as The Good Life and many, if not most, Panhandle residents would probably agree that living in a rural area like western Nebraska makes their life healthier.

However, from a scientific point of view, the health of a community depends on many different factors, including quality of health care, individual behavior, education and jobs, and the environment. We can improve a community's health through programs and policies.

For example, people who live in communities with ample park and recreation space are more likely to exercise, which reduces heart disease risk. People who live in communities with smoke-free laws are less likely to smoke or to be exposed to sec-

ondhand smoke, which reduces lung cancer risk, cardiovascular and other chronic diseases.

The problem is there are big differences in health across communities, with some places being much healthier than others. And, up until now, it has been hard to get a standard way to measure how healthy a county is and see where they improve.

In 2010, the Robert Wood Johnson Foundation contracted with the University of Wisconsin Population Health Institute to collect data to reflect the overall health of counties in every state in the U.S.

Panhandle Public Health District Director Kim Engel said Panhandle counties were in the mid-range in recent rankings for

Nebraska. "Overall health is measured by death and illness rates. Factors measured include behaviors, access to care, socioeconomic and environmental factors."

The county health rankings are based on a model of "population health improvement" more commonly known as public health. "Additionally, health factors are weighted with 40% going to social and economic factors such as education, employment, income, family and social support and community safety."

"While human behaviors (tobacco use, diet and exercise, alcohol use and unsafe sex) are a close second with 30% of the weighted averages, it may be surprising to some how important those social and economic factors are in determining the health of a

community." Access to care and quality of care account for 20% of the county health rankings, with 10% accorded the physical environment of the community, such as the environmental quality (air pollution) and built physical environment such as access to healthy foods and liquor store density.

"The county health rankings will provide a good base for the MAPP planning we hope to complete in 2011 across the Panhandle (see page two)," Engel concluded.

"Everyone has a stake in the health of their community. We all need to work together to find solutions. The county health rankings serve as both a call to action and a needed tool in this effort."

Sports fans encouraged: *Just Move It!*

In an effort to encourage physical fitness among all ages, high school teams are asking fans to *Just Move It!*

"During halftime of high school athletic games throughout the Panhandle, groups in participating communities will lead fans through a series of simple steps set to the tune of *I Like to Move It*," said Jessica Davies, Panhandle Public Health District wellness coordinator.

"The *Just Move It!* dance is choreographed in such a way that anyone, young or old, can participate in the stands."

The dance movement is part of a Panhandle-wide marketing campaign to increase public awareness about the importance of increasing fitness, improving nutrition and decreasing exposure to secondhand tobacco smoke.

"If we can educate the community at-large that simple lifestyle changes can be fun AND make a world of difference in a person's overall health and outlook on life, then I'd say the campaign was a success," said Davies.

"It's all just a fun way to encourage people to move it," Davies said. "Exercising just a few minutes a day, is the first step to a healthier community. We're proud to be a part of such an important message."

The Centers for Disease Control and Prevention (CDC) recommends that adults participate in at least 30 minutes of activity on most days of the week. This can be done all at once or broken into segments completed throughout each day.



Simply using your work breaks for brief bouts of exercise, parking farther away from the store, and choosing the stairs instead of the elevator are all great ways to increase your daily activity levels.

Exercise coupled with a balanced diet of fruits, vegetables, dairy, and whole grains has been proven to decrease the risk of developing chronic diseases such as cardiovascular disease, diabetes, and cancer. Avoiding exposure to secondhand tobacco smoke is also an important factor in chronic disease reduction.

The *Just Move It!* campaign was made possible through funding issued by the Nebraska Department of Health and Human Services.

Participating groups include Banner County Music Department, Bridgeport High School, Creek Valley High School Cheerleaders, Garden County High School, Hay Springs High School, Hemingford High School Cheerleaders, Leyton High School Cheerleaders, Potter-Dix Close-Up, Sidney High School Danz Team and South Platte High School.

Basketball tournament organizers invite teams to move it

Local teams, comprised of adult men and older teens, may participate in the Fifth Annual Circle of Courage Lakota Invitational Basketball Tournament in April in Chadron. Spectators are encouraged to attend in support of the local teams. Concessions will be available.

Prizes will be awarded for first, second and third place teams, the most valuable player, sportsmanship and an all-tourney team. Last year's tournament winners were from the Chadron Native American Center and the Job Corps.

Entry fees are waived if players participate in a free health screening. Otherwise, teams may pay to participate -- \$100 per team. Register early as the tournament can only accommodate up to 10 teams.

The simple health screening includes a finger-poke blood test for cholesterol, triglycerides and glucose and is available at the tournament. Panhandle Public Health District and Western Community Health Resources will complete the health screenings as part of the *Just Move It!* campaign in the Panhandle -- a fitness and nutrition campaign designed to encourage adults to enjoy fitness and healthy eating, two of the major prevention factors to reduce the risk of cardiovascular disease.

For more information or to register, call Joe Simmons at 308-432-2174 or 308-430-4619.



Dean offers new recommendations for well-child exams



Kelly Dean, RN
Public Health Nurse

Well-child checks are just as important as taking your child to the doctor when they are ill. Prevention is the best medicine and will often protect your child from becoming ill.

Kelly Dean, public health nurse with Panhandle Public Health District, said a lot happens at the average well-child checkup. "The doctor and nurse will check the growth and development of the child," she said. "The height and weight measurements and hearing and vision tests will help identify possible problems early."

A normal medical assessment will rule out any problems with the heart, lungs, or other areas. At the 1 and 2 year appointments, a lead level will be drawn to determine if your child has been exposed to lead.

This preventative measure will determine if intervention is necessary. In addition, your health care provider can provide necessary immunizations or refer you to a free clinic in your area.

Dean said Nebraska has a new online record system (NESSIS) to keep children's immunization records up to date. Because it is on the web, health care providers as well as the immunization clinics are all working from the same, most recent information.

If children's immunizations are not covered by their parents' insurance, there are free immunization clinics in the Panhandle that ask for a donation only. See list of public immunization clinics on page 14.

"Don't forget the dentist and eye doctor," Dean added. Dental exams should begin as early as one year of age. "You can start cleaning your baby's teeth when they first sprout, make brushing a habit early on," she said.

Eye exams may not be necessary until the child is three, unless you notice a vision problem before then. Many parents wait until their child enters school for the first vision exam, but Dean advises erring on the side of caution, even if there are no noticeable defects.

Your child should have a well-child exam at:

- birth
- 1 month
- 2 months
- 4 months
- 6 months
- 9 months
- 1 year
- 15 months
- 18 months
- 2 years
- 2 1/2 years
- annually beginning at age 3

Vaccination: keeping healthy futures in focus

The Centers for Disease Control and Prevention has identified vaccination as one of the 10 great public health achievements of the 20th Century in the U.S.

2010 Recommended Immunization Schedule for Children from Birth through 6 years old

The Recommended Immunization Schedule for Persons Aged Birth Through 6 Years Old is approved by the Centers for Disease Control and Prevention, the American Academy of Pediatrics, and the American Academy of Family Physicians

| Birth | 1 month | 2 months | 4 months | 6 months | 12 months | 15 months | 18 months | 19-23 months | 2-3 years | 4-6 years |
|-------|---------|----------|----------|----------|---------------------------------|-----------|-----------|--------------|-----------|-----------|
| HepB | HepB | | | | HepB | | | | | |
| | RV | RV | RV | RV | | | | | | |
| | DTaP | DTaP | DTaP | DTaP | | | DTaP | | | DTaP |
| | Hib | Hib | Hib | | Hib | | | | | |
| | PCV | PCV | PCV | PCV | PCV ⁵ | | | | | |
| | IPV | IPV | | | IPV | | | | | IPV |
| | | | | | Influenza (Yearly) [*] | | | | | |
| | | | | | MMR | | | | | MMR |
| | | | | | Varicella | | | | | Varicella |
| | | | | | HepA, 2 doses [†] | | | | | |

Shaded boxes indicate the vaccine can be given during shown age range.
 See second page for more information on vaccine-preventable diseases and the vaccines that prevent them.

NOTE: If your children miss a shot, you don't need to start over, just go back to your healthcare provider for the next shot. The healthcare provider will keep your children up-to-date on vaccinations. Talk with your healthcare provider if you have questions. See back for further information on vaccine-preventable diseases and the vaccines that prevent them.

FOOTNOTES
[†] HepA vaccination is recommended for high-risk children older than 2 years, along with a dose of meningococcal vaccine (MCV4) and pneumococcal vaccine (PPSV). HepA vaccination may be administered to any child over 2 for whom immunity is desired. See vaccine-specific recommendations at <http://www.cdc.gov/vaccines/imz/ACIP-2010.htm>.
^{*} Children 6 months or older should receive flu vaccination every flu season. If this is the first time for flu vaccine, a child 6 months through 8 years of age should receive two doses, separated by at least 4 weeks. If this child only receives one dose in the first season, he or she should receive two doses the next season, if still younger than 9 years. Ask your child's healthcare provider if a second dose is needed.

For more information, call toll free **1-800-CDC-INFO (1-800-232-4636)**
 or visit <http://www.cdc.gov/vaccines>

PPHD takes a closer look: communicable disease surveillance

Panhandle Public Health District strives to prevent the incidence of disease by promoting healthy communities, families and individuals through communicable disease surveillance.

Communicable disease surveillance includes but is not limited to food borne illness, vaccine-preventable diseases, influenza, vector borne diseases, and animal related diseases such as rabies and West Nile Virus. The diseases and conditions that fall under the category of communicable disease are quite diverse but can be identified by the following characteristics: they are contracted from the human living environment, including disease passed from person to person such as pertussis or influenza, food or water (ie. e coli), animals or insects (ie. West Nile Virus).

Health departments across the state use the Nebraska Electronic Disease Surveillance System (NEDSS) to track and report many communicable diseases. PPHD may also be notified of a communicable disease by a health care provider.

In 2010 there were 57 disease investigations done in

PPHD's jurisdiction. The most reported was Hepatitis C, a common illness in Nebraska. There were also 12 chicken pox cases, four pertussis cases and three mumps cases, all of which are vaccine-preventable diseases.

There are several reasons a vaccine-preventable disease can rear its ugly head. Becky Corman, public health nurse with PPHD, said, "Not everyone gets vaccinated and there is increased international travel providing additional exposure to diseases not common in the U.S."



Corman said the purpose of surveillance is to detect, promptly investigate and monitor the occurrence and distribution of disease. "Timely recognition of the disease within the community, coupled with rapid investigation, enables the proper implementation of prevention and control activities."

"These activities can contain the spread of disease within the population, reducing the risk of disease transmission before the illness becomes a major public health crisis," Corman said. "Effective surveillance systems also play a role in identifying emerging infectious diseases, acts of bioterrorism, and potential influenza pandemics, as well as providing a basis for evaluating the outcome of public health prevention programs."

School Surveillance

PPHD also participates in a school surveillance program. This program tracks and reports the absenteeism of ill students throughout the school year for all ten counties in the PPHD district. School surveillance for early detection of illness is done on a weekly basis and is reported to Nebraska Health and Human Services in Lincoln every Wednesday. Tracking of specific symptoms and illnesses in children enables public health to determine if there is an outbreak or a public health emergency in a timely manner.

Influenza-like Illness Surveillance

During flu season, October through March, PPHD tracks hospital admissions with influenza-like symptoms. Registered Nurse Melody Leisy said those symptoms might include a fever of more than 101 degrees and/or respiratory problems. Leisy also tracks hospital's bed occupancy for the average week to determine capacity.

Planning, continued ...

"The survey will not only help to develop an accurate list of the resources that exist in each community, but also the unique ways in which programs and people make a difference in developing youth assets and reducing risks."

Details of the planning process and upcoming meetings may be found at www.pphd.org. For more information, contact Panhandle Public Health District at 308-487-3600.

Meeting Dates include:

- February 18 – develop priorities and strategies
- March 18 – final review, revision and plan approval
- April 15 – alternate date in case of postponement

2011 Dental Days planned for May 20 - 21



Four-year-old Riley Holthus was a little tense as he prepped for dental surgery during the 2010 Dental Days held June 4 and 5. Holthus was having an operation for crowns on two back teeth and a reduction of a Gemini tooth (partial division of a tooth bud attempting to form two teeth).

Butterflies, dragonflies and jack-o-lanterns

in the operating room may have made it easier for the youngster, however.

The insects and Halloween decorations were part of the surgical caps offered by Surgery Coordinator Jeanette Sartain at Box Butte General Hospital.

BBGH is a major player in the annual

Dental Days that offers free dental services to children across the Panhandle. Kelly Dean and Janelle Hansen of Panhandle Public Health District coordinated the event with the assistance of contacts in each of the participating clinics, hospitals and communities.

Riley's older brother Colton received treatment at the office of D.N. Taylor, Jr., DDS in Alliance. Taylor is the spark plug behind the decision to bring Dental Day to the Panhandle six years ago.

The program began in the Beatrice, Fremont and Norfolk areas as a dental outreach program and quickly expanded into western Nebraska at Dr. Taylor's urging.

Taylor and Peter Maxwell, DDS, are just two of a dozen participating Panhandle dentists. Prescreening at dental offices in Bridgeport, Chappell, Crawford, Hemingford and Oshkosh referred children into the clinic sites in Alliance, Chadron, Gordon and Sidney where they received services. The Gordon Dental Days is at the Gordon Memorial Hospital.

Dean, a public health nurse with PPHD, said the total UNMC personnel for the Panhandle-wide effort were 49 dental and hygiene students and 20 faculty members. These totals do not include the dental assistants and other staff from UNMC, nor local personnel such as nursing and surgery staff, hospital and medical clinic staff completing pre-operative histories and physicals, as well as the dental clinic staff in the above-named communities.

"I can't begin to describe how much cooperation takes place among all involved," Dean said. "There were so many people helping in just the planning stages of the program from both ends of the state, let alone all those involved in the actual procedures during Dental Days. And, we haven't even talked about the planning for food, lodging and travel. It's pretty impressive."

"The dental students from UNMC get to see the good life here in western Nebraska, while getting a wide variety of hands-on experience in our dental clinics. So, the students and the kids benefit greatly." PPHD and UNMC appreciate the time and effort of local dentists.

Hansen warns of dangers of sun and salon tanning beds



Janelle Hansen
Health Educator

Skin cancer is the most common type of cancer in the United States with more than a million new cases diagnosed each year. However, 90% of all skin cancers can be prevented by protection from the sun's rays or ultraviolet radiation. Eighty percent of total lifetime sun exposure is received during childhood and kids receive three times as much ultraviolet radiation as adults do in a year.

Pool Cool, a program implemented at 19 pools across the Panhandle, encourages positive sun safety for children, their families and staff at swimming pools. Janelle Hansen is a health educator at Panhandle Public Health District. "Pool Cool has been shown to improve children's sun safety habits and sunscreen use, while also improving sun protection policies at swimming pools," she said.

The sun protection basics include using sunscreen,

wearing protective clothing, minimizing exposure and seeking shade whenever possible. Pool Cool includes sunscreen provided at pools, sun protection lessons, sun safety signs, sunscreen tip posters, and poolside activities.

This year's Pool Cool program includes a new caution about tanning beds. "The odds for deadly skin cancer rise more than fourfold with some devices," Hansen said. "People who use tanning beds to keep that year-round glow are dramatically increasing their risk for developing melanoma, the deadliest of skin cancers. In fact, the more you tan and the longer you tan, the more your risk increases."

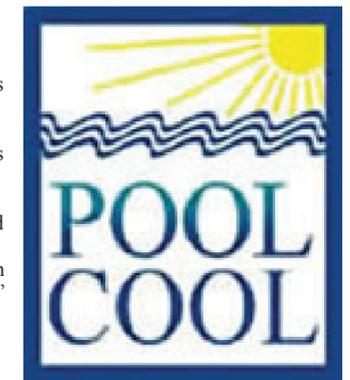
Hansen cited the case of sisters from Shelby, Nebr., Deana and Lindsey. "In high school, I never thought my love for the look of the California beach queen would ever have an effect on me," Lindsey tells. "Oh boy, was I wrong! My junior year, I got a job as a lifeguard. I rarely wore sunscreen. For homecoming and prom, I was in the tanning beds at least once a week."

"Three years ago, when I was 19, I had five moles removed from my back and neck. One mole on my back came back positive for skin cancer. Fortunately, it was caught early so I didn't need chemotherapy or radiation

treatment. However, I continue to have regular checkups and have had many more suspicious moles removed. I have stayed out of tanning beds and apply sunscreen every day – even on cloudy days!"

"I don't lie out and tan any more. Once you have had pieces of your body cut away because of sun damage, you don't find it appealing to sunbathe anymore," Lindsey continued.

"If I knew then what I know now, I would have never tanned. If you have to, use the spray-on tans. Protect yourself, learn to love your skin; be confident and comfortable the way you look without the fake bake!"



| Panhandle Public Health District | 2010 | 2009 |
|--|------|------|
| Total confirmed, probable and suspect cases | 57 | 69 |
| Campylobacter | 1 | 4 |
| Coccidioidomycosis | 1 | 0 |
| Giardia | 1 | 0 |
| Haemophilus influenzae, invasive | 0 | 1 |
| Hepatitis A, acute | 1 | 0 |
| Hepatitis B virus infection, chronic | 0 | 1 |
| Hepatitis B, acute | 0 | 1 |
| Hepatitis C virus infection, chronic or resolved | 26 | 25 |
| Histoplasmosis | 0 | 1 |
| Influenza, human isolates | 1 | 6 |
| Lyme disease | 0 | 2 |
| Mumps | 3 | 1 |
| Novel Influenza A virus infections | 0 | 14 |
| Pertussis (whooping cough) | 4 | 5 |
| Rabies, animal | 1 | 0 |
| Salmonella | 0 | 2 |
| E-coli | 0 | 1 |
| Varicella (chicken pox) | 12 | 0 |
| West Nile Fever | 5 | 5 |
| West Nile Encephalitis/meningitis | 1 | 0 |

Box Butte county students asked to “Just Drive”

Students in Box Butte County will be asked to sign the JUST DRIVE (JST DRV) pledge beginning in 2011. Panhandle Public Health District will work with leadership groups in Alliance and Hemingford high schools to implement the *Just Drive* campaign to encourage students in grades 9-12 to take the pledge.

Both JUST DRIVE leadership teams will receive a \$500 stipend. An additional \$250 incentive will go to the high school class in each community with the largest percentage of students taking the pledge. Participating students, including the leadership team, must take a pledge to avoid distracted driving, not to text, make or take cell phone calls while driving.

In addition, the simple, one-page pledge will include language to prevent other distractions such as loud music, speeding, drinking and/or singing and dancing.

The campaign will include focus groups with student leaders and the dissemination of campaign materials. Campaign marketing tools will include vinyl clings and magnets for school lockers, notebooks, laptops and perhaps the cell phones themselves.

Lastly, JUST DRIVE participants can sign the pledge, view student-created podcasts and track the competition data through the PPHD website and a Facebook JUST DRIVE fan page.

Among all age groups, teen drivers are at the greatest risk. Per mile driven, teen drivers are four times more likely than adult drivers to crash. Motor vehicle crashes are the leading cause of death for teens.

Contributing factors include driver inexperience, driving with teen passengers, nighttime driving, not wearing seat belts and distracted driving. Teens report these distractions: other teens in car (93%), loud music in car (85%), passenger/driver dancing or singing (79%), passengers acting wild (69%), loud younger kids in car (67%), passengers have been drinking alcohol (48%), passengers get driver to

speed (45%) and passenger have been smoking pot (38%).

To keep teens safe on the road, the Centers for Disease Control & Prevention recommend graduated driver licensing policies, prohibiting cell phone use for teen drivers, primary enforcement of seat belt laws and vigorous enforcement of the zero tolerance policies for underage drinking and driving.



“It is the dynamic combination of increased enforcement and public education that has proved effective in changing behavior,” reports the National Highway Traffic Safety Administration.

Nebraska has a graduated licensing system for drivers beginning with a school learner’s permit, graduating to a school permit, learner’s permit and then a provisional operator’s license. However,

the Insurance Institute for Highway Safety reports when parents are watching their teenage children drive differently than when they’re alone or with friends. Unsupervised teens take more risks behind the wheel.

In Nebraska, LB945 was approved by the governor in April 2010. It bans all cell phone use for novice drivers (under age 18, with a learner’s permit or graduated driver’s license) and bans texting for all drivers. Both offenses are primary offenses, so a driver can be pulled over and cited for the offense without first committing another (driving) infraction.

PPHD will also use an ancillary educational promotion campaign from the CDC, “Parents Are the Key,” to get adults involved in teen driving through these proven facts:

- practice driving with the teen
- parent-teen driving agreements to set the rules of the road
- parents must lead by example (modeling safe driving behaviors)
- share information/support on Facebook.

Podcast series available for download or DVD

PPHD took two more steps into the world of social networking in 2010 with the addition of a Facebook “fan” page (www.facebook.com/pphd) and production of four additional podcast series, plus a standalone podcast in the “Health Tips for Living the Nebraska Good Life” series promoting healthily lifestyles. See list at right for individual podcast titles.

Know Your Numbers is presented by Kelly Dean, RN and public health nurse with PPHD. Join her as she walks women through a basic health screening including the essentials of blood pressure, cholesterol and blood sugar.

The MyPyramid series is presented by Lisa Franzen-Castle, a UNL Extension Educator and registered dietician with a doctorate in nutrition. Learn some valuable information as she shares tips and ideas on how to get

the nutrients you need every day. In the Stress Awareness series Franzen-Castle breaks stress down in a four part series offering tips, ideas and ways to understand what causes your stress and how to deal with it.

Osteoporosis Awareness & Prevention, presented by Franzen-Castle, is a two part series on the risks and strategies to prevent osteoporosis.

Tai Chi Moving for Better Balance is presented by Jamie Goffena, MA, a UNL Extension

Educator and Tai Chi Facilitator. In this series, she guides viewers through eight Tai Chi movements. Join her in your home or office for short, guided sessions working towards inner peace and vitality.

Tai Chi is an evidence-based fall prevention strategy proven to enhance balance, increase flexibility, relieve pain, and diminish the effects of daily stress.

These podcasts will be introduced on a monthly basis starting January on our website www.pphd.org. You are invited to download the podcasts to your personal computer, MP3 player or iPod.

A DVD will also be available this spring for viewing. If you would like to request a copy of the DVD please send in the coupon or contact Tabi Prochazka at tprochazka@pphd.org or 308-487-3600 ext. 107.

The podcasts were produced with funding from the Nebraska Department of Health and Human Services Office of Women and Men’s Health.

2010 Podcast DVD
Free with this Coupon



Get your free podcast DVD from PPHD by mailin this coupon to PPHD, PO Box 337, Hemingford NE 69348, calling (866) 701-7173, or emailing tprochazka@pphd.org.

Name: _____
Address: _____
City: _____

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

We hope you enjoy the podcasts!

Report dead birds to PPHD to control spread of West Nile Virus

Panhandle Public Health District tracks the incidence of West Nile Virus in three ways: the collection and testing of dead birds, the trapping of mosquitoes, and disease investigation and follow-up of people who have been diagnosed as having WNV. The Panhandle reported the first positive test for West Nile Virus in a bird found in August in Box Butte County.

“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 Tabi Prochazka, environmental health coordinator for PPHD.

During the summer and early fall months. Testing will only be conducted on birds that have died within 24 hours, 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, Prochazka 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 older than 50 and those with weak immune systems are especially vulnerable to the disease.

“Simple precautions are available to “fight the bite,” Prochazka 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 and
- removing standing water where mosquitoes breed.

For additional information about West Nile Virus, visit www.pphd.org/wnv or call Prochazka at 308-487-3600, ext. 107.



Panhandle Immunization Clinic Schedule

Box Butte County Immunization Clinic
Box Butte General Hospital
every other Friday by appointment
308-762-3835

Cheyenne County Immunization Clinic
Memorial Health Center
2nd and 4th Tuesday by appointment
308-254-4715

Dawes County Immunization Clinic
Western Community health Services
4th Tuesday except December
call 308-432-2747 and ask for DCIC scheduling

Deuel County Immunization Clinic
Fire Hall in Chappell
3rd Tuesday by appointment
308-874-2255



Garden County Health Services
308-772-3283

Kimball Health Services
PCS/Community Service satellite
1st Tuesday every month and 3rd Tuesday every other month by appointment
308-235-1951

Morrill County Immunization Clinic
Morrill County Hospital
1st Monday every month
308-262-1600

Community Action Partnership of Western Nebraska
Monday thru Friday from 9a-6:30p
308-630-2540 ext 314

Scotts Bluff County Community Health
Monday and Thursdays
308-630-1650

Sheridan County Immunization Clinic
807 N. Ash Street
1st Tuesday
Call 308-282-1442

Sioux & Dawes County Immunization Clinic
Legend Buttes Health Services in Crawford
Call for appointment, 308-665-1770

You may also contact your private health care provider to receive your child’s immunizations.

Success with wellness in the workplace: three businesses offer ideas

Chadron Community Hospital ready to GO!

Diana Lecher, coordinator for the Chadron Community Hospital wellness team, said the hospital is winding up a program designed simply to keep from gaining weight during the holidays and is ready to move on to a more proactive program called "Go!" from Tavi Health in January.

Go gives employees points for exercise, maintaining weight and cutting calories, but double points for losing weight, Lecher said. "When it comes to making healthy lifestyle changes that result in weight loss, you simply need to Go. Go exercise, Go eat right, and Go forward feeling better about yourself."

Lecher said the CCH/Western Community Health Resources program started simply with water bottles and a one-year commitment from each employee to stick with the new wellness program. In exchange, staff received a free comprehensive blood workup and a health risk assessment through Panhandle Public Health District. A committee meets monthly to devise new goals and programs, with plans for the coming year to be based on the results of those assessments through PPHD.

Already, the administration has joined the effort with a change to the local vending machine. There are no sugar-filled items in the vending machine, Lecher said. "We have a totally smoke free campus in our new building."

"Our December employee birthday party didn't have a cake this year," she said proudly. For the first time, organizers went the healthy route and created tasty snacks from fruits and vegetables on their own. She sees this as a watershed moment and next year, Lecher plans to ask for healthy event guidelines, limiting or eliminating the number of donuts and cookies at coffee breaks and staff meetings.

Another creative idea at the new hospital is having as many office dwellers as possible walk together on three one-mile walking breaks during their break each day. Lecher said they used a wheel to measure out

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South Platte NRD has wellness champion

The donut-loving dudes at South Platte Natural District didn't pay much attention to the effects of their eating habits before last year. They embraced a good meal or a fatty snack without a lot of thought. That was before Linda Suhr, NRD staff member, made office wellness a priority.

NRD Manager Rod Horn said, each staff member now knows well the number of fruit and vegetable serving they should be eating, the benefits of proper hydration and how increased activity or the lack thereof, affects them.

"Last spring, Linda took charge of forming a wellness program at the office," Horn said. "Through Panhandle Public Health District, WorkWell of Nebraska and the Nebraska Association of Resource Districts, there was plenty of base information to get started.

Horn said Suhr began with basic water intake, showing participants how to build toward the amount they needed for their bodies. Once everyone acclimated to correct water intake, Suhr helped them track servings of fruits and vegetables. Pedometers were provided for staff members, who were also able to see in hard numbers the benefits of increased activity.

Beyond those basics, Horn continued, Linda used a series of fun competitions to bring the program to life. She formed a pedometer race for staff, with a gift certificate going to the first person "walking across the district." A roll of the dice added an element of fun as they gambled for total fruit and vegetable servings. The prizes were healthy snacks that have come to be appreciated.

Because of her ingenuity and caring, Horn nominated Suhr for the Wellness Champion award with WorkWell, Inc., of Nebraska. Suhr attended the WorkWell annual meeting in October in Lincoln and was recognized by Governor Dave Heineman.

Rainbow provides inspiration for Kimball Health Services

From the red apples and peppers to the orange mangoes and peaches... green limes and broccoli to blueberries and blackberries...and finally, the white of bananas, onions, potatoes and cauliflower – if you're like many Americans your plate may benefit from some added color from fruits and vegetables.

A rainbow of colorful fruits and vegetables are the base of a new worksite wellness program at Kimball Health Services. Pennie Anderson, worksite wellness coordinator, said the program is a little less competitive than previous programs on exercise and water intake, but still provides a good incentive for employees to eat two of each color of fruit and vegetables every week.



Anderson said KHS started their wellness program more than two years ago, but it really took off in the last year, with more than a third of employees participating. A rotating wellness trophy makes

the rounds among teams of two to four employees, inspired by staff-only health fairs, flu clinics and blood drives.

The employees recently completed their health risk assessments and will base much of their future programming on the results of those assessments. PPHD Wellness Coordinator Jessica Davies provides many of the resources used in the Kimball program.

Wellness Council formation imminent: employee recruitment and retention targeted

An exciting new venture for businesses will be developed in 2011. Jessica Davies, worksite wellness coordinator, is organizing a Worksite Wellness Council for the Panhandle to offer networking and educational opportunities for businesses ready to promote health and wellness to their employees.



Jessica Davies
Wellness Coordinator

Mentored by WorkWell, Inc., a fellow council housed out of Lincoln-Lancaster County Health Department with a 25+ year long history of providing service to Lincoln-area worksites, the Panhandle council will offer benefits such as onsite technical assistance, networking, large-scale training, free brochures and newsletters for employees, a library of wellness materials and an annual healthy living challenge.

The principal benefit of worksite wellness is the improved health of the employees, Davies said. "Most adults spend more of their waking hours at work than anywhere else, making it a prime venue for promoting healthful habits."

Benefits of worksite wellness programs for employees include weight reduction, improved physical fitness, increased stamina, lower levels of stress and increased well-being, self-image and self-esteem.

Employers can also benefit from worksite wellness programs. According to recent research, employers' benefits include:

- Enhanced recruitment and retention
- Reduced healthcare costs
- Decreased rates of illness and injuries
- Reduced employee absenteeism
- Improved employee relations and morale

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Breastfeeding-friendly worksites benefit new mothers, employers

One of the most pivotal times in a woman's career, both for herself and her employer, is the months immediately following the birth of a baby. Making the decision to return to work is both an emotional and a financial decision – one an employer can make easier by supporting breastfeeding for working mothers.

"A woman employed away from her home can continue to breastfeed her child," said Jessica Davies, worksite wellness coordinator with Panhandle Public Health District. "She should breastfeed as often as possible when she is with the infant and express her breast milk when they are apart so that another caregiver can feed it to the baby in a clean and safe way."

The benefits are also obvious for employers, Davies added. "Creating a breastfeeding-friendly work environment reduces the risk of absenteeism, reduces health claims to employers and increases retention of female employees," Davies said. "Basic accommodations such as reasonable time and a clean, private space for breastfeeding offer a 2:1 return on investment. More comprehensive accommodations, like supportive

policies, lactation consultants, providing breast pumps, flexible schedules and on-site childcare offer a 3:1 investment for employers."

Davies offers free consultations with employers to develop policies and environmental supports such as those described above. Recent healthcare reform legislation includes several sections boosting support for nursing mothers, so new information is available and the laws are already in effect.

The law was effective immediately, however the Department of Labor will give employers time to comply once the rules take effect. While the DOL works to define terms and processes for enforcement of the law, Davies said PPHD is ready to support employers and breastfeeding employees with tools, information and resources.

Mother-child separation due to work presents a serious challenge to meeting breastfeeding goals when employers do not meet the relatively simple needs of breastfeeding employees. Women now make up half the U.S. workforce, Davies said.

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January 2010

- » National Radon Action Month, events in schools & communities with 536 test kits distributed
- » 2009 Annual Report published
- » H1N1 clinics continue
- » Board retreat
- » Bob Hessler Volunteer of the Year

February 2010

- » PRMRS Leadership meeting
- » Child Well Being assessment/planning
- » Standards & Measures self assessments begin
- » County Health Rankings released
- » Chronic Disease Summit
- » Suicide Prevention Task force established

March 2010

- » Health fairs in many counties
- » Spring Worksite Wellness gathering
- » Strategic plan for training academy completed
- » 11,614 H1N1 vaccinations given
- » Communities Mobilizing Against Alcohol training

April 2010

- » New PPHD website launched
- » 250 at Bridges out of Poverty training
- » Responsible Beverage Server Training continues
- » Bioterrorism symposium - Gering
- » Appreciation dinner for H1N1 nurses
- » 25 MRC members recruited
- » First QPR (suicide prevention) training

May 2010

- » Game & Parks hearing on alcohol ban in state parks
- » Pool Cool skin cancer prevention materials distributed to panhandle pools

June 2010

- » Chadron Hospital evacuation exercise
- » Dental Days serves 219 children in Gordon, Chadron, Alliance and Sidney
- » Intertribal Gathering
- » Freedom from Smoking Facilitator Training
- » Cancer Coalition Kickoff Meeting
- » Training academy exceeds goal and quadruples training hours
- » Flooding in Cheyenne and Deuel County

July 2010

- » PPHD coordinated disaster triage exercise
- » Dr. Richard Jagers is first veterinarian appointed to Board of Health
- » County Health Ranking presentations
- » Counties sign MOU for regional Juvenile Justice plan
- » Focus groups conducted for podcast evaluation

August 2010

- » Region IV Trauma, Airlink, PRMRS Education Session
- » PPHD launches Facebook page
- » NALBOH national conference in Omaha, 5 PPHD board members attend
- » 40 Assets training in Scottsbluff

September 2010

- » Strategic National Stockpile planning
- » Statewide breastfeeding coalition
- » Unnatural Causes presentation at Chadron Native American Center
- » Deet packets to area high schools for football games
- » First annual "Out of the Darkness" walk-Suicide Prevention Awareness
- » National Physical Activity in the Workplace Summit

October 2010

- » Special Needs Registration presentations
- » City Councils consider extended hours for bar closing
- » Alliance & Chadron Kids Fitness and Nutrition Days
- » PPHD Awarded Governor's Excellence in Wellness Sower Award
- » Worksite Wellness Toolkit Gatherings

November 2010

- » Sidney Kids Fitness & Nutrition Day
- » Prevention Institute in Lincoln focused on environmental & policy changes
- » National Suicide Survivors Day event
- » More schools consider random student drug testing
- » Annual Just Move It Campaign launched
- » American Public Health Conference in Denver – 4 PPHD staff attend

December 2010

- » Tobacco Free Nebraska project launched for environmental and policy changes
- » Prepare for Safe Communities site visit
- » Prepare 2010 annual report for distribution to stakeholders throughout the Panhandle