

**Panhandle Public Health District  
Board of Health Agenda**

| <b>Date:</b> July 29, 2025<br><b>Time:</b> 8:00 am – 9:30 am<br><b>Location:</b> Pioneer Room, Platte Valley Company Community Rooms, 2019 11 <sup>th</sup> Ave, Scottsbluff, NE 69361                     |                                                       |               |                |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|---------------|----------------|
| <b>Topic</b>                                                                                                                                                                                               | <b>Exhibit – number indicates electronic copy</b>     | <b>Who</b>    | <b>Outcome</b> |
| Call to Order, Open Meeting Act, & Introductions                                                                                                                                                           |                                                       | D. Kling      |                |
| Consent Agenda <ul style="list-style-type: none"> <li>• Approval of Agenda</li> <li>• May 2025 Meeting Minutes</li> <li>• July 2025 Directors Report</li> <li>• Upcoming Training Opportunities</li> </ul> | 00 – White<br>01 – White<br>02 – Purple<br>03 – White | D. Kling      | Motion         |
| Finance Committee Report<br>Apr-May 2025 Financial Statements & Program Spreadsheets                                                                                                                       | 04 – Orange<br>05-07 – Blue                           | S. Williamson | Vote           |
| Board Terms                                                                                                                                                                                                |                                                       | J. Davies     | Status Update  |
| Election of Officers – reappoint current officers for second year of term                                                                                                                                  |                                                       | J. Davies     | Motion         |
| Measles Update                                                                                                                                                                                             |                                                       | J. Davies     | Motion         |
| Director’s Performance Evaluation                                                                                                                                                                          | 08 – White                                            | J. Davies     | Motion         |
| 2024 CHIP Annual Report Approval                                                                                                                                                                           | 09 – White                                            | J. Davies     | Motion         |
| 2025-2028 Strategic Plan Approval                                                                                                                                                                          | 10 – handout                                          | S. Williamson | Motion         |
| Obesity Funding Update                                                                                                                                                                                     |                                                       | N. Berossek   | Status Update  |
| NE Medical Cannabis Regulation Act                                                                                                                                                                         |                                                       | J. Davies     | Status Update  |
| Legislative Update                                                                                                                                                                                         |                                                       | J. Davies     | Status Update  |
| Accreditation Update                                                                                                                                                                                       |                                                       | S. Williamson | Status Update  |
| Other Business                                                                                                                                                                                             |                                                       | D. Kling      | Status Update  |
| Public Comment                                                                                                                                                                                             |                                                       |               |                |
| Meeting Adjourns                                                                                                                                                                                           |                                                       | D. Kling      | Motion         |

**Next Meeting Date: September 11, 2025**

**Time: 8:00 am – 9:30 am**

**Place: Virtual, Zoom**

See back for a glossary of program, process, and partner names

| <b>Program &amp; Processes:</b>                                |                                                    |
|----------------------------------------------------------------|----------------------------------------------------|
| BT – Bioterrorism                                              | MRC – Medical Reserve Corps                        |
| CIA – Clean Indoor Air Act                                     | PPC – Panhandle Prevention Coalition               |
| COP – Children’s Outreach Program                              | PRMRS – Panhandle Regional Medical Response System |
| KFND – Kids Fitness and Nutrition Day                          | PWWC – Panhandle Worksite Wellness Council         |
| HFA or HV – Healthy Families                                   | TFN – Tobacco Free Nebraska                        |
| MAPP – Mobilizing for Action through Planning and Partnerships | WNV – West Nile Virus                              |
| MHI – Minority Health Initiative                               |                                                    |

| <b>Partners &amp; Public Health Organizations:</b>                |                                                                |
|-------------------------------------------------------------------|----------------------------------------------------------------|
| CAPWN – Community Action Partnership of Western Nebraska          | PHAB – Public Health Accreditation Board                       |
| DHHS – Nebraska Department of Health and Human Services           | PPI – Panhandle Partnership aka “The Partnership”              |
| NACCHO – National Association of City and County Health Officials | SACCHO – State Association of City and County Health Officials |
| NALBOH – National Association of Local Boards of Health           | SALBOH – State Association of Local Boards of Health           |
| NALHD – Nebraska Association of Local Health Directors            | UNMC – University of Nebraska Medical Center                   |
| PHAN – Public Health Association of Nebraska                      | WCHR – Western Community Health Resources                      |
|                                                                   |                                                                |

**Panhandle Public Health District  
Board of Health Meeting Minutes  
May 8, 2025**

**Pioneer Room, Gering Civic Center, 1050 M Street, Gering, NE 69341**

| <b>Members Present</b> |                                                      | <b>Member Absent</b> |                                  |
|------------------------|------------------------------------------------------|----------------------|----------------------------------|
| Bob Gifford            | Banner County Spirited Citizen                       | Brian Brennemann     | Grant County Commissioner        |
| Dan Kling              | Sheridan County Commissioner                         | David Cornutt        | Board Physician                  |
| Diana Lecher           | Dawes County Spirited Citizen                        | Dixann Krajewski     | Garden County Commissioner       |
| Don Lease              | Banner County Commissioner                           | Elyse Lukassen       | Kimball County Commissioner      |
| Jackie Delatour        | Sioux County Spirited Citizen                        | Hal Downer           | Sioux County Commissioner        |
| Jim Reichman           | Deuel County Commissioner                            | Mandi Raffelson      | Cheyenne County Spirited Citizen |
| Jon Werth              | Grant County Spirited Citizen/<br>Board Veterinarian | Pat Wellnitz         | Sheridan County Spirited Citizen |
| Joni Jespersen         | Box Butte County Spirited Citizen                    | Randy Miller         | Cheyenne County Commissioner     |
| Judy Soper             | Deuel County Spirited Citizen                        | Vic Rivera           | Dawes County Commissioner        |
| Kay Anderson           | Morrill County Spirited Citizen                      |                      |                                  |
| Kristin Wiebe          | Scotts Bluff County Spirited Citizen                 |                      |                                  |
| Mark Harris            | Scotts Bluff County Commissioner                     |                      |                                  |
| Mike Sautter           | Box Butte County Commissioner                        |                      |                                  |
| Randy Bohac            | Kimball County Spirited Citizen                      |                      |                                  |
| Susanna Batterman      | Morrill County Commissioner                          |                      |                                  |
| Sara Quinn             | Garden County Spirited Citizen                       | Vacant               | Board Dentist                    |

| <b>Staff Present</b> |                                           | <b>Guests Present</b> |  |
|----------------------|-------------------------------------------|-----------------------|--|
| Jessica Davies       | PPHD Director                             |                       |  |
| Sara Williamson      | PPHD Dep. Dir. Finance &<br>Accreditation |                       |  |
| Dezarae Brandt       | Healthy Families Program Manager          |                       |  |
| Amanda McClaren      | PPHD Finance Coordinator                  |                       |  |

| <b>Key Actions Taken:</b>                                                                                                                                                                                                                                                                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <ul style="list-style-type: none"> <li>Renewed health insurance options for FY 2026 with NACO</li> <li>Approved HRA switch Cash in Lieu for eligible staff effective July 1</li> <li>Adopted cafeteria plan for Cash in Lieu option</li> <li>Approved 2025-2025 Salary Schedule</li> </ul> |  |

**Call to Order/Introductions:**

President Kling called the meeting to order at 8:01 am Quorum was confirmed. The meeting was publicized in the Star Herald and on the Nebraska Meeting notice repository on May 1 and posted on PPHD's website May 6. The meeting was held virtually in compliance with the Open Meeting Act, with a copy posted by the door. Roll was called, quorum confirmed, and introductions made.

**Consent Agenda:**

Motion to approve as presented by Harris and seconded by Lease. Voice vote with all in favor.

**Finance Committee:**

Williamson presented on behalf of the finance committee that met on May 1. The committee reviewed program spreadsheets, January-March financial statements and check details, and accounts receivable. Williamson reviewed the program spreadsheets and January-March financial statements with the board.

Davies updated on the immunization and infectious disease awards from the state that were cancelled by the federal government, totaling about \$415,000 for PPHD. Some states have sued and were awarded an injunction on those funds, but it only applies to the states in the lawsuit.

Lecher arrived at 8:12 am.

Davies shared that PPHD received a \$100,000 Sherwood Foundation grant to address occupant safety, social determinants of health, aging population, and hypertension. In addition to sharing that PPHD has received a contract from UNMC through a Sherwood Grant for a Centering Pregnancy program, a group opportunity for pregnant and new moms, that will be \$100,000 for 3 years.

Motion from committee to approve financial statements and spreadsheets as presented. Roll call vote with all in favor, none opposed or abstained.

### **Board Terms:**

Three board members have terms expiring June 30. Wiebe will be stepping away and PPHD will work to fill the vacancy for the Scotts Bluff County Spirited Citizen position. Werth has been reappointed for Grant County and Anderson will work with Morrill County Commissioners to be reappointed.

### **NACO Insurance Update:**

Williamson updated on the 2025-2026 renewal rates from NACO for the two BCBS plans currently offered. There was a .1% increase on premiums, that will result in just over \$11,000 in annual increases if all staff stay with current elections. Open enrollment happens in June. No board action is needed.

### **Life and Long-Term Disability Insurance:**

Williamson provided premium information for the plan currently offered by USABLE and a quote from Madison National Life, which provides life insurance for staff on one of the Blue Cross Blue Shield health insurance plans.

PPHD pays 100% of the premiums for a \$40,000 life/AD&D policy for all eligible full-time staff, and a long term disability plan that provides a 60% benefit with a monthly maximum of \$1,000. Madison prepared a quote providing exactly the same coverage as USABLE, but for a lesser cost, since current BCBS insurance participants are automatically eligible for a \$15,000 coverage, PPHD could buy up the additional \$25,000 and provide insurance for all eligible employees not currently taking PPHD's insurance.

Life/AD&D annual premiums for USABLE are \$4140 and quoted against \$1303 annual for Madison, and long-term disability annual premiums for USABLE are \$5041 and quoted against \$2731 annual from Madison. Madison's quoted premiums would be set for 3 years.

Motion to approve the switch for Life/AD&D, and long-term disability insurance from USABLE to Madison National Life made by Lecher and seconded by Bohac. Roll call vote with all in favor, none opposed or abstained.

### **HRA to Cash in Lieu Option**

PPHD offers a \$5000 HRA contribution to those that do not take PPHD's offered health insurance. During the last meeting, the board approved language offering cash in lieu to those over 65 and then phase in the offering to all staff. PPHD received updated guidance that the language was not advised because it appears to incentivize switching to Medicare and taking the cash in lieu and did not proceed. Although not the intent of the motion, a new motion is needed to make a cash in lieu option available, including offering the cash in lieu to all eligible



staff with the July 1 plan year start. It was noted that many of the counties have made a switch to offering cash in lieu.

The proposal to the board was to dissolve the Class B HRA option for those employees that do not take PPHD's health insurance, and instead offer a cash in lieu option to those eligible employees that would provide \$208.34/pay period, \$5416.84 annually, which would be a taxable benefit to those staff and staff would have to prove they have health insurance coverage through another carrier that meets specific minimum requirements. Motion to approve dissolution of the Class B HRA and offer the cash in lieu of \$208.34 per period to eligible staff not on PPHD's health insurance was made by Lecher and seconded by Delatour. A roll call vote was held with all in favor, none opposed or abstained.

**Cafeteria Plan:**

Davies read the resolution for approval of a cash in lieu cafeteria plan for a monthly total of \$416.68 (\$208.34/period). The cafeteria plan sets the cash in lieu in effect July 1, 2025.

A motion to adopt the cafeteria resolution by Bohac and seconded by Gifford. A roll call vote was held with all in favor, none opposed or abstained.

**Salary Schedule:**

Davies reviewed the proposed salary schedule updated for 2025-2026. The schedule is approved annually by the board. The schedule includes comparison data from other NE health departments, Non-profit Association of the Midlands (NAM) salary survey, and information from the Nebraska 2023 state salary annual report. The proposed schedule includes a \$0.75 raise for all position ranges, except the director's position for the 2025-2026 year. The director's salary is set during discussion of the director's annual review. The board expressed appreciation for the equitable increase approach rather than a percentage increase.

Motion to approve the 2025-2026 salary schedule as presented by Batterman and seconded by Harris. A roll call was held with all in favor, none opposed or abstained.

Wiebe asked about policy for donating unused sick leave. PPHD does not currently have one but can investigate more if so desired. The board agreed there is no need to proceed at this time. Members discussed experience with donating leave within their organizations.

**General Insurance:**

Williamson provided an update on general and professional insurance premium renewals through J.G. Elliott. PPHD saw an increase of about 19%, due in part to a full year of coverage for the remodeled Hemingford office and the increased activity with the immunization program. PPHD goes to bid for renewals every three years and no action was needed by the board.

**Legislative Update:**

Davies provided an update on the reduction of LB585 and LB1008 as part of the governor's proposed budget, PPHD's funding will be cut about 75% from about \$231,000 to about \$55,555. The Governor's budget removes \$3.5 million of funding under those LBs and leaves about \$1 million to split across all health departments in the state. The budget is awaiting final approval from the governor.

PPHD uses these funds for required match to federal funds and for meeting essential local public health obligations such as disease investigation, such as would be needed for measles response. PPHD's current MMR vaccination rate is about 90-91% but rates are declining over the last 5 years as more people seek religious or other exemptions. Current herd immunity for measles is 95% or higher. Quinn expressed appreciation for the strong level of communication from PPHD to area hospitals.

**Executive Session:**

Davies requested the board enter executive session to discuss personnel matters at 9:00 am. Harris motioned to enter executive session for the purpose of discussing personnel matters and was seconded by Lease. Roll call vote was held with all in favor, none opposed or abstained, and the board entered executive session at 9:01 am with Davies and Williamson in attendance.

A motion was made at 9:13 am by Lease to exit executive session for personnel matters with no decision being made and was seconded by Batterman. A roll call vote was held with all in favor, none opposed or abstained.

**Healthy Families Update:**

Dez Brandt, PPHD Healthy Families Program Manager, gave a presentation on the Healthy Families program. Brandt reviewed PPHD's site profile, showing data outcomes of the program, including 1,893 visits completed in 2024. This is a steady number from previous years, but the number of families being served is increasing and more families are staying in the program longer. The program starts with weekly visits, switching to biweekly, and then monthly as the family nears graduation. Brandt noted the program serving 149 families and reviewed demographic data. There are a broad variety of referral sources for the program and participation is completely voluntarily. The program has been running for 14 consecutive years and recently expanded to now cover the whole Panhandle.

The board commended the program's success and Brandt's passion for the work.

**Accreditation Update:**

No update at this time.

**Other Business:**

Wiebe noted NDE will be in Scottsbluff for a listening session tonight, may be happening in other Panhandle communities.

Williamson advised board members to watch for a survey link via email to provide feedback for the Director's evaluation. The information will be included for the full evaluation by the executive committee and presented to the board at the next meeting.

**Public Comment:**

No members of the public present for comment.

**Next Meeting Date:**

Next meeting date be moved to the end of July due commissioner attendance at protest hearings. Watch for an email to confirm.

Wiebe extended her appreciation for her time on the board and the functioning of PPHD.

**Adjourn:**

Motion to adjourn by Batterman and seconded by Harris. Meeting adjourned at 9:41.

## **July 2025**

### **Board of Health Report**

#### **From the Director**

##### ***Board of Health***

Dr. Haley Beaudette is the new Dentist on the Panhandle Public Health District Board of Health! She is unable to attend the July board meeting, but we look forward to having her join an upcoming meeting. Jess will be conducting an orientation with her on August 15. The Scotts Bluff County Community-Spirited Citizen is currently open for letters of intent and will be confirmed at the July 21 Scotts Bluff County Commissioner meeting.

##### ***Public Health Planning & Partner Coordination***

We have engaged in strategic planning meetings with CAPWN and WCHR to address current and potential funding cuts, as well as the coordination of services. These discussions focus on maintaining access to critical services while reviewing each service provided to ensure they are well-coordinated across the region and delivered efficiently within the regional public health system.

We have maintained bi-weekly Senior Leadership Finance meetings to monitor and prepare for potential impacts to funding.

##### ***Measles Response***

In late May, we became the first local health district in Nebraska to respond to a confirmed case of measles. Details of our initial and ongoing response efforts are provided later in this report. We continue to prioritize strong coordination with partners and actively provide education on the importance of MMR vaccination as a key defense against this highly infectious virus.

##### ***New Grant Applications & Contracts***

###### ***Obesity Prevention***

A new state contract will support strategies on physical activity and nutrition. Goals include enhancing worksite wellness (e.g., Walk at Lunch Day, Living Well), promoting CredibleMind, and supporting physical activity programs and environmental supports in schools and communities.

###### ***Dental Care Coordination Application***

We have submitted an application to CareQuest Institute to improve access to urgent dental care for children by coordinating referrals, developing a network of dental providers (through insurance or pro bono), and establishing transportation support to ensure families can attend appointments.

##### ***Legislative***

Jess and Sandy Roes met with Senator Strommen and Senator Storer to maintain important communication and advocacy with our area senators. During his visit to the Hemingford office, Senator Strommen shared a presentation with local community leaders highlighting grant opportunities for economic development, parks, and recycling—resources he hopes to see western Nebraska utilize more fully. We look forward to supporting his efforts to share this information across other Panhandle communities and will work to connect our Active Living Advisory Committees with these valuable opportunities. A meeting with Senator Hardin is also being planned in the coming weeks.

##### ***Staffing***

Tabi Prochazka has transitioned to Assistant Health Director, and Ashleigh Rada has transitioned to Family Outreach Coordinator. Rebecca Needels has resigned as a Home Visitation Specialist, and we have hired Brittney Todd. Her first day was July 15.

## Promotional Campaigns

May Facebook Posts: 254 | Reach: 104,209 | Reactions: 1,345

June Facebook Posts: 193 | Reach: 58,594 | Reactions: 78

## Community Health Assessment and Community Health Improvement Plan

The CHIP annual report is complete and is included in your packet. The most recent MAPP steering committee was held on June 27 at the Prairie Winds Community Center in Bridgeport. During this meeting, the survey was reviewed as hospital partners shared updates on projects related to the priority areas.

*Lead– Megan Barhafer*

## Minority Health Initiative

Social determinants of health resource forms have been created for all Panhandle counties. We have distributed all funds for our travel voucher program, which has reimbursed medical travel expenses in the Northern Panhandle through our partnership with NMRC.

*Lead– Kelsy Sasse*

## Performance Management and Quality Improvement

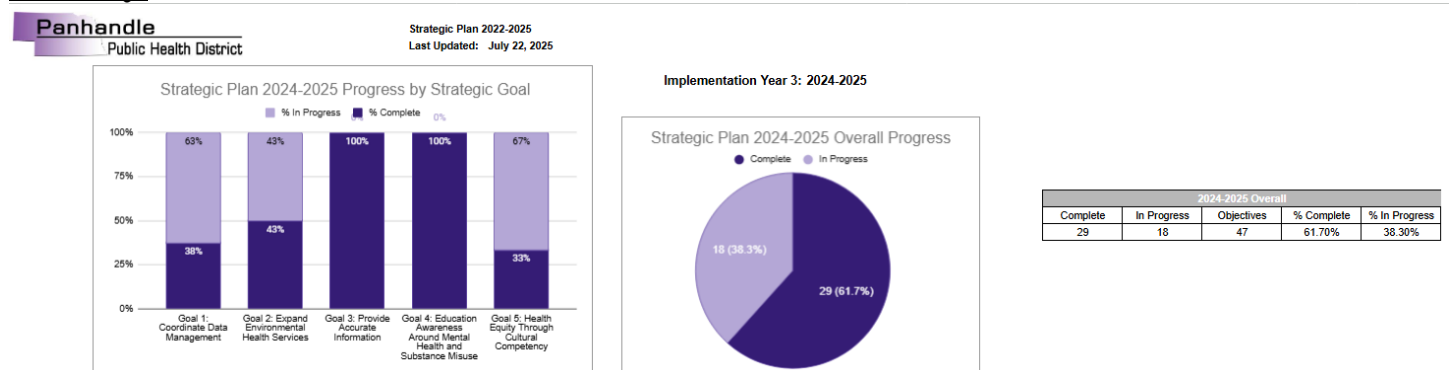
Metrics are available on the website here: [http://www.pphd.org/performance\\_management.htm](http://www.pphd.org/performance_management.htm)

*Lead – Megan Barhafer*

## Strategic Plan

Staff are implementing the goals of the 2025-2028 strategic plan as we close out the 2022-2025 plan.

### Year 3 - Q4



*Lead - Leadership Team*

## Clinical Services

### Vaccinations

In May and June, PPHD continued offering walk-in immunizations at our clinic and expanded outreach through several community partnerships. We administered vaccines at a local long-term care facility and collaborated with Alliance Middle School and Box Butte General Hospital providers to deliver immunizations during the school day alongside school physicals. Our team also participated in free sports physical nights at Regional West Medical Center and Morrill Clinic, where we offered vaccines to students. Additionally, we attended health fairs at Mitchell Elementary School and Box Butte General Hospital to provide on-site immunizations. In response to Nebraska's first confirmed measles case, we partnered with Gordon Memorial Hospital to hold MMR vaccine clinics in Sheridan County for both VFC and Medicare-eligible individuals.

*Lead – Tina Cook and Allyson De Los Santos*

### HPV

HPV promotion included a page in the annual report to promote the Why 9 HPV project. We launched a YouTube and Spotify ad promoting the HPV vaccine. We were also able to obtain specific data about HPV completion rates by county from the state and will be working with local providers to increase the completion rate for the HPV series.

Nebraska Comp Cancer was selected to participate in the Tri-Networks Cancer Prevention Community of Practice. This initiative is designed to build the capacity of National Comprehensive Cancer Control Programs, cancer coalitions, and other partners to implement policy, systems, and environmental (PSE) change. The coalition is named the Nebraska Cancer Alliance. Allyson has taken on the role as part of the leadership team for the state HPV work group. The state launched the Nebraska Cancer Strategy Plan in January. The workgroup that Ally is the chair for, is a statewide effort to increase HPV vaccination. The local HPV campaign that was put into place last year by PPHD is being used as a template across Nebraska for HPV promotion. The HPV workgroup is currently working on a HPV data fact sheet that will focus on Panhandle HPV data. This fact sheet will then be used as a template for other LHD's across the State.

*Lead – Allyson De Los Santos*

### ***Munroe-Meyer Institute Clinics***

We continue to coordinate the Medical Handicapped Children's Clinics and the Genetic Clinic. Ally De Los Santos is the lead for this clinic and will train for scheduling the genetic clinic.

- Genetics Clinics
  - May 29th - 6 children seen
  - May 30th - 6 children seen
- Medically Handicapped Children's Clinic
  - June 13th - 5 children seen

*Lead – Allyson De Los Santos*

### ***Healthy Brain Initiative***

PPHD is dedicated to improving education and promoting early detection of dementia and Alzheimer's disease. Our health strategists—Nicole, Janelle, and Jessica—are leading this effort and will be presenting throughout the Panhandle. The first Dementia Coalition meeting was held on May 13 at Regional West, drawing 30 attendees. The next coalition meeting is scheduled for August 22 at the same location.

Janelle and Jessica are in the process of becoming Community Educators through training given by the Alzheimer's Association.

*Leads – Janelle Visser, Jessica Rocha, and Nicole Berosek*

### ***Fit Testing***

January=11 | February=11 | March= 4 | April= 8 | May= 7 | June= 2

*Staffing – Myrranda Kelley, Allyson De Los Santos*

### ***CPR***

- We provided CPR training for new staff in May.
- Our next CPR class is scheduled for August 12th, when we'll be training 18 Resident Assistants (RAs) from CSC.

*Staffing – Myrranda, Allyson, and Nicole*

### ***Worksite Wellness***

#### ***PWWC***

The Panhandle Worksite Wellness Council continues to provide valuable education and training opportunities across the region. Below is a summary of recent trainings and upcoming initiatives:

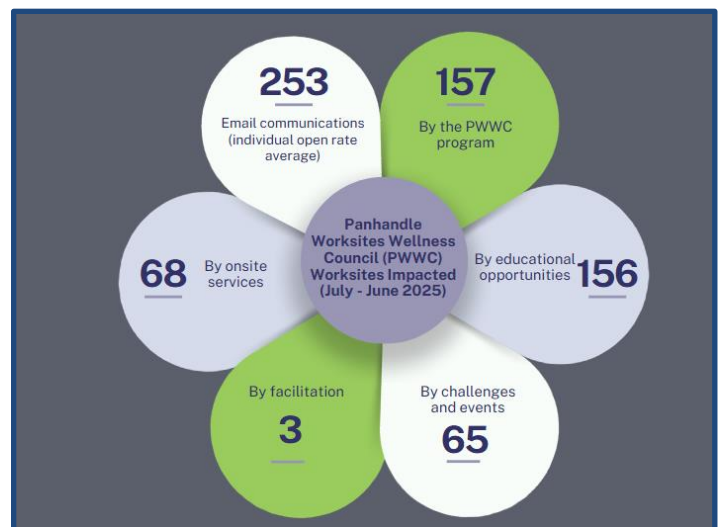
- We offered an Adult Mental Health First Aid (AMHFA) training with Suzanne, with 7 participants in

attendance.

- Met with Bayard Public Schools to discuss their after-school program.
- Met with Vine Church to support their mental health initiatives.
- Hosted the Motion and Mindfulness Challenge, with 93 registered participants, 42 tracker submissions, and 25 completed evaluations.
- April and July's Wellness Chat saw strong engagement both virtually and in-person options.
- Delivered a financial wellness presentation at CCH.

At right is a snapshot of the number of worksites impacted from July through June.

*Staffing – Nicole Berosek*



### **Governor's Wellness Award:**

We received 21 applications for the GWA. Since all recipients are from Eastern Nebraska, we will hold a single recognition event at the Capitol.

*Staffing – Nicole Berosek*

### **Chronic Disease/Obesity State Grant**

This new grant from the State supports programming and education focused on physical activity and nutrition. Our goals include strengthening worksite wellness efforts through initiatives like Walk at Lunch Day, the Living Well program, Active Living, and other evidence-based educational opportunities. In addition, we will promote CredibleMind and support physical activity programs in schools and community organizations.

We are grateful for this opportunity to enhance health and wellness across our region.

### **Preparedness**

#### **PRMRS – Panhandle Regional Medical Response System**

PRMRS members met in May to play a cybersecurity tabletop game, and a regular meeting followed. Feedback from the game was positive, noting great collaboration and thoughtful response to cybersecurity threats. Region 22 Emergency Management notified the group that RAVE (mass communication tool); facility use will no longer be supported through Region 22 after June 30th. PRMRS requested a budget shift to reallocate available funds to continue to support RAVE. DHHS denied the budget shift, requesting we budget for this in BP2, beginning July 1st. However, a Notice for Award was received on June 30th for BP2, allocating incremental funding to start the year; subaward to PRMRS is set at 60% level funding.

Emily traveled to Kearney in May for the HCC workshop with DHHS and CPERS. Discussion was held regarding upcoming ASPR and DHHS requirements for the next three budget periods, as well as the planned Statewide MRSE exercise.

PRMRS continues to provide situational awareness to our partners regarding cybersecurity breaches, infectious disease outbreaks, and reported shortages. Information regarding upcoming trainings and education are provided as they become available. PRMRS assisted in the Measles response efforts, providing information sharing, education, and just-in-time training opportunities to its members.

The new BP2 budget and workplan are complete and have been submitted to DHHS. Our next meeting will be held virtually on July 25th.

*Lead – Emily Timm*

### **Public Health Emergency Preparedness**



We continue to strengthen regional response capabilities through training, exercises, and collaboration with local emergency management, healthcare partners, and first responders. Ongoing efforts include updating emergency response plans, enhancing communication systems, and ensuring readiness for emerging threats. We continue to work with healthcare providers, schools, and the general population through surveillance efforts, vaccination guidance, and rapid response planning to mitigate potential measles outbreaks in our region. We were able to put our planning into practice.

In response to the first confirmed case of measles, we were fortunate to receive substantial support from the state, which minimized the need to expand our local response team. However, we recognize that future cases may require a more robust local response, with additional staff stepping into key support roles. We have outlined a preliminary structure for response activation and shared it with all staff. While roles may evolve depending on the situation, this structure provides a strong starting point for coordinated local action.

To ensure we are fully prepared, this scenario reinforces the importance of ongoing preparedness planning, exercises, and having outbreak response responsibilities integrated into staff job descriptions. Just-in-time (JIT) training will be provided to ensure staff are equipped and confident in their assigned roles.

*Lead – Tabi Prochazka*

### **Disease Investigation**

PPHD continues to review and/or investigate infectious disease cases. In May and June, the disease investigation team worked to provide education to respond to the first diagnosed measles case in Sheridan County on May 26th. PPHD worked in conjunction with Nebraska DHHS and Gordon Memorial Hospital to respond. *PPHD completed contact tracing for this event, which included about 90 people.* As part of this response, enhanced MMR administration guidelines were in place through July 4th, 2025 in both Sheridan and Dawes Counties. An every door direct mailing of a flyer promoting the MMR vaccine was distributed across the Panhandle. Ally went to both Regional West and CAPWN to provide a presentation to staff about measles. The QI project for rabies has continued. We have developed an algorithm that has gone live at RWMC ER and Urgent Care and will soon be expanded to the rest of the Panhandle. Reportable diseases in Nebraska are listed at: [Nebraska Reportable Diseases](#)

*Staffing – Allyson De Los Santos, Emily Timm, Kendra Lauruhn*

### **STI (Sexually Transmitted Infections) tracking**

Allyson and Emily continue to work on HIV, syphilis, gonorrhea, and chlamydia STI cases. In May and June they conducted investigations for 38 chlamydia cases and 2 syphilis cases.

*Staffing – Allyson De Los Santos, Emily Timm*

### **School Surveillance**

Nebraska DHHS continued the 2024/2025 School Absenteeism Reporting Project, finishing this year's reporting in May. PPHD is following the same infectious control measures as we did pre-COVID. PPHD will reach out to a school when over 10% of the student body is absent to discuss the situation and if there are concerns and possible solutions/suggestions. We are here to support the school in making their decisions and assist as needed.

*Lead – Emily Timm*

### **Cancer Prevention**

#### ***Colorectal Cancer Awareness and Screening Updates***

As of July 1, 2025, 73 FIT kits have been distributed in 2025, with a return rate of 74%. Currently FIT kit distribution is paused. We look forward to continuing to distribute one-sample FIT test kits and promote the awareness campaign materials developed in partnership with NC2 to Panhandle residents ages 45–74 once DHHS secures funding for the next cycle. *Lead: Cheri Farris*

## **Chronic Disease Prevention & Management**

### ***National Diabetes Prevention Program Lifestyle Coach Training and Technical Assistance***

Cheri continues to collaborate with the state to provide ongoing training and support for lifestyle coaches across Nebraska. The current grant cycle began July 1, 2025. Activities for quarters one through three are complete. Cheri recently launched monthly office hours to support lifestyle coaches and program coordinators. She has also conducted follow-up sessions with newly trained coaches to provide guidance on promotion, sustainability, CDC recognition, and other important topics to ensure successful implementation of the National DPP across Nebraska.

### ***Regional National DPP Updates***

Cheri serves as coordinator, data preparer, and coach for the National DPP in the Panhandle. The Healthy for Life virtual DPP program continues in 2025 with seven active participants. In-person cohorts are currently being held in Chadron (two cohorts) and Sidney (one cohort).

The 2024 Diabetes Prevention Recognition Standards are now in effect, and Cheri is submitting data for all three sites in the Panhandle. She also provides technical assistance to regional lifestyle coaches with DPRP data collection and submission.

*Lead – Cheri Farris*

### ***Living Well***

Cheri and Janelle co-facilitated a virtual Leader Training in February, certifying 13 new leaders. In March, they facilitated a cross-training focused on Living Well with Diabetes for existing Nebraska Living Well leaders. Cheri maintains monthly outreach to healthcare providers to increase awareness of available healthy living programs. Some providers have expressed interest. Our goal is to reach more residents who can benefit from these workshops.

A Living Well with Diabetes workshop was held in Hemingford from March 17 to April 28 with 10 participants. Another Living Well with Diabetes cohort was held May 1 through June 12 in Gering at the Northfield Apartments with 8 participants. This workshop is funded through a diabetes contract with DHHS.

*Lead – Cheri Farris and Janelle Visser*

### ***Living Well with High Blood Pressure***

Cheri has completed leader training for the Health Coaches for Hypertension Program, branded in Nebraska as Living Well with Hypertension. Janelle and Suzanne will be taking the leader training soon and offering workshops. A virtual workshop is being planned to serve residents across the Panhandle. Registration is open to all residents with high blood pressure and includes a free home blood pressure monitor for those who need one:

[https://nalhd.sjc1.qualtrics.com/jfe/form/SV\\_3qty2eAj8yGDO4e?Q\\_CHL=qr](https://nalhd.sjc1.qualtrics.com/jfe/form/SV_3qty2eAj8yGDO4e?Q_CHL=qr)

*Lead – Cheri Farris*

### ***Aging Office of Western Nebraska Partnership***

Title IIID funds from the Area Office on Aging (AOWN) support evidence-based programs like Living Well and the National DPP for Panhandle residents over age 60. The virtual worksite Living Well workshop and Healthy for Life National DPP have expanded our reach in this population. These funds have been renewed for the 2025 fiscal year, and implementation will continue. We are exploring creative ways to engage and serve older adults in the region.

*Lead – Cheri Farris*

### ***Health & Wellness Coaching***

Cheri continues to offer individual health coaching to residents and Panhandle Worksite Wellness Council members. We are also exploring new opportunities to expand healthy living programs and make coaching available to more community members..

*Lead – Cheri Farris*



### ***Falls Prevention Programs***

New DHHS funding allowed PPHD to partner to offer Tai Chi, Stepping On, and Bingocize. Currently, Tai Chi and Bingocize classes are being held at Regional West. Cheri was recently trained in Bingocize and will be offering a nearby workshop.

*Lead – Cheri Farris*

### ***Motivational Interviewing Trainings***

Cheri partnered with Dr. Kate Speck to host an Advanced MI training on March 31, funded by the State SOR grant. The session had 23 attendees and received positive feedback. Cheri facilitated two additional trainings with Snowy Peak on April 16th with 13 participants and June 11 with 8 participants.

*Lead - Cheri Farris*

### ***Bridges Out of Poverty***

Cheri completed recertification in June and is planning to facilitate a Bridges Out of Poverty training at the September Wellness Conference.

*Lead - Cheri Farris & Nicole Berosek*

### **Healthy Families – Nebraska Panhandle**

#### ***Program Highlights***

Our northern counties expansion team has officially begun accepting referrals for Dawes, Sioux, Sheridan, and Grant counties. We have been diligently working to build strong referral networks by scheduling meet-and-greets with key community partners and introducing them to the Healthy Families program's mission and services. The reception has been very positive, and we are optimistic about deepening these new relationships to bring trusted home visitation services to more families across our expanded service area.

As of July, we are currently serving 102 families, with a consistent and steady stream of referrals. In the past couple of months, we have seen a noticeable increase in referrals from the child welfare system, an area we have strategically targeted for growth. This progress reflects our ongoing efforts to reach families facing more complex challenges and offer early, supportive intervention.

We are also preparing for our upcoming Family Fun Day event, scheduled for July 30th at Pioneer Park in Scottsbluff. This event's theme is “*Bubbles, Birds, and Busy Hands*,” which centers around hands-on parent-child engagement activities. These events provide valuable opportunities for families to bond, reduce isolation, and build positive memories together. Families have expressed deep appreciation for these experiences, and our team looks forward to continuing to foster these joyful moments.

In July, Jessica Davies and Dez Brandt had the opportunity to attend a dinner hosted by First Five Nebraska, connecting with early childhood professionals from across the state and engaging in thoughtful discussions with policy leaders on shared goals for supporting children and families. Opportunities like these strengthen our regional advocacy and keep our program aligned with statewide priorities in early childhood.

### ***Maternal and Child Health Growth Opportunities Underway***

We are launching two exciting initiatives that will further support the health and well-being of pregnant individuals and families across our panhandle:

#### ***Centering Pregnancy***

This nationally recognized model of group prenatal care brings together pregnant people with similar due dates to receive medical care, participate in interactive learning, and build supportive peer relationships. We are in conversations with Chadron Community Hospital, which we are hopeful will serve as a pilot for centering pregnancy. A late July meeting is planned to discuss details around implementation, provider engagement, and the benefits for both the community and the hospital.

### *Self-Measured Blood Pressure (SMBP)*

This program empowers pregnant and postpartum individuals to monitor their own blood pressure at home with the support of trained staff and evidence-based education. SMBP can help identify and manage hypertension earlier, reducing the risk of complications such as preeclampsia. We are currently in the preparation phase, which includes developing policies and procedures, staff training, and coordination in partnership with DHHS and the American Heart Association. We are hopeful to launch the program this fall.

*Lead - Dez Brandt*

### **Panhandle Prevention Coalition**

The Panhandle Prevention Coalition (PPC) maintained strong momentum through May, June, and the beginning of July, with a focus on mental health awareness, substance misuse prevention, and community outreach across the Panhandle.

In early May, the Panhandle Prevention Coalition supported a Youth Advisory Council (YAC) meeting in Hemingford, bringing together local students to engage in youth-led prevention efforts. The meeting focused on leadership development, mental health promotion, and substance misuse prevention. Students had the opportunity to share their perspectives on challenges facing their peers, identify prevention priorities in their communities, and brainstorm outreach ideas. PPC staff helped guide the discussion and offered resources to support ongoing involvement. The students expressed enthusiasm for staying engaged and contributing to future events and awareness campaigns. There are 23 YAC participants for the upcoming school year.

In May, PPC partners launched the Green Light Bulb Campaign for Mental Health Awareness Month, distributing flyers, QR codes, and green bulbs to promote mental wellness and reduce stigma. A Mental Health Picture Contest was held to encourage community engagement, with prizes awarded to winners to support their own mental health. Social media content supported the campaign throughout the month.

PPC hosted two major virtual trainings in June, both free and open to the public. On June 18th, national speaker and recovery coach Stephen Hill presented "Speak Sobriety," sharing his powerful recovery journey and inspiring message of resilience. On June 24th, renowned addiction and mental health expert Dr. Cali Estes led the session "Substance Misuse and Behavioral Health: Core Issues and Emerging Concerns," offering insights into vaping, alcohol, trauma, and emerging drug trends. Both events were well-received and helped strengthen community awareness and professional knowledge.

PPC representatives participated in several key community outreach events, including:

- Tall Cop Training (June 10, Gering)
- VA Stand Down (June 11, Gering VFW)
- Welcoming Communities Conference (June 19, Gering Civic Center)
- Minatare Block Party (June 28, Kelso Park, Minatare)
- Across these events, PPC staff engaged with over 700 attendees, distributing medication lock boxes, deTerra pouches, 988 materials, tobacco prevention flyers, and training information.

Additional activities include:

- Suzanne held a virtual and an in person 8 to Great training. The training was well received.
- Suzanne completed her RFAST trainer certification and looks forward to offering this training soon.
- Summer youth-focused efforts included the promotion and facilitation of a *Common Sense Parenting* virtual class. Several parents completed the program and earned certificates of completion. PPC also prepared for upcoming *Youth and Adult Mental Health First Aid* trainings scheduled for July 31<sup>st</sup> and October 7<sup>th</sup>.
- In addition, PPC launched summer social media posts focusing on underage drinking prevention, medication safety, reducing binge drinking, and promoting local resources such as CredibleMind.
- The PPC meeting was held virtually on July 10th, and planning is now underway for the September 11th meeting.

*Lead – Nicole Berosek, Suzanne Crane, Tabi Prochazka*

### ***Suicide Prevention***

Suicide Prevention is such an important intervention piece in our very rural area, and we braid multiple sources of funding to implement the work.

#### ***QPR – Question, Persuade, Refer Suicide Prevention Training***

Suicide prevention remains a priority for the team at PPHD; 23 individuals were trained in May and June. The next QPR Webinar will be August 13 at noon. PPHD recommends that all adults take the QPR training to know how to help someone who is struggling. Register here for an upcoming webinar <https://tinyurl.com/2p8kb837>

We are available to offer in-person or virtual QPR training to individual organizations as requested. We are always looking for new funding opportunities to enable us to continue this important work. Additionally, the team has been involved in other mental and behavioral health trainings that strengthen our suicide prevention efforts, including partnering with the Suicide Prevention Community Engagement and Partnership Coordinator (CEPC) for veterans across most of the Panhandle.

The 2025 Mini grant funding should be announced soon. We look forward to these funds to support our suicide prevention efforts.

PFS grant funds will also support QPR training for young adults ages 18 - 24.

*Lead - Cheri Farris, Janelle Visser, Kelsy Sasse, Tabi Prochazka, Nicole Berosek, Suzanne Crane, Jessica Rocha*

### ***PFS - Performance for Success***

Region 1 Behavioral Health offered us an opportunity to help fulfill a Five (5) year contract. This grant focuses on education for students and young adults over 18 in the following areas: vaping, suicide, alcohol, and diversity in the high risk counties. Monument Prevention will provide vaping and alcohol education to Scotts Bluff County. Year 1 went over well and Year 2 is off to a great start with 3rd grade wellness day events and prevention trainings.

#### **Updates:**

- We are working with CSC and WNCC on all education.
- Janelle and Suzanne presented Power of Parents at the Freshmen and Transfer student days(SOAR) at Chadron State College.
- Jessica and Janelle will present QPR to Resident Advisors at WNCC Sidney campus in August.
- Emails have been sent to city/village offices, nursing homes/assisted living facilities, behavioral health providers, and clinics/hospitals in the Panhandle regarding our PFS offerings.
- PFS offerings have been disseminated around the Panhandle, including at Pride June 1st in Scottsbluff, Tall Cop June 10th in Gering, Veterans Stand Down Event June 11th in Gering, Welcoming Communities June 19th in Scottsbluff, and at the Mega Block Party June 28th in Minatare.

*Staff – Nicole, Janelle, Jessica R, Jess, and Tabi*

### ***Tobacco Free Nebraska***

- A Spotify ad for Great Outdoors Month ran the first three weeks of June.
- Social media posts promoting tobacco cessation have continued on our PPHD and PWWC Facebook pages.
- TFN/Quitline promotional material was offered at Pride June 1st in Scottsbluff, Tall Cop June 10th in Gering, Veterans Stand Down Event June 11th in Gering, Welcoming Communities June 19th in Scottsbluff, and at the Mega Block Party June 28th in Minatare.
- A TFN update was presented at the July PPC meeting.
- The Scotts Bluff Housing Authority implemented a smoke-free campus in Scotts Bluff County, Chappell, and Gordon. This Success Story is being submitted to DHHS/TFN this month.
- The grant application for FY26-27 was accepted.
- Janelle has reached out to each county extension office in hopes to be able to reach the Fairboard members to offer assistance with policies and signage at fairgrounds.

- Janelle has been distributing tobacco cessation information to long-term care facilities, pharmacies and businesses. Jessica has also been distributing tobacco cessation information to village and city offices, businesses, hospitals, and pharmacies.
- Janelle, Jessica and Nicole have contacted panhandle city offices, long term care facilities, assisted living to offer assistance in policies and signage for tobacco free and vape free. New signage was purchased for 12 locations across the Panhandle.

*Lead – Janelle Visser, Jessica Rocha, and Nicole Berosek*

### **Opioid Response**

Opioid Education and Narcan training continue to be offered to community groups across the Panhandle.

Suzanne coordinated with Pine Ridge Job Corp, providing education to its students utilizing the Hazelden Video Series, "Addiction: What You Need to Know" on July 8th. Feedback for the information provided was positive. Suzanne was also able to present the video at the July PPC Meeting, as well, providing attendees up-to-date information on Cannabis and Cannabis trends.

Emily, Cheri, and Nicole will be completing a WRAP facilitator refresher course in August. Plans are underway to promote and provide a WRAP training this fall.

Emily continues to provide coordination of monthly regional opioid meetings with Region 1 and CAPWN. Workplan updates are provided, as well as any successes and challenges faced during the month.

*Lead – Emily Timm*

### **Situation Table**

The Panhandle Situation Table continues to be successful in meeting acutely elevated risk individuals and families where they are.

Meeting weekly via Zoom, the Panhandle Situation Table is comprised of professionals across several service sectors committed to ensuring individuals and families receive the support and services needed in an urgent manner.

(Data from 8/31/22-7/15/25)

124 Situations Presented to Table | 84 Connected to Services (75%)

23 Informed of Services | 6 Refused Services

2 Not Deemed in Acutely Elevated Risk; connected to services | 7 Unable to Locate | 1 Open

Top Risk Factors; percentage of situations impacted:

Housing - 73% | Mental Health - 72% | Substance misuse - 63% | Basic Needs - 57% | Parenting - 42%

*Lead – Tabi Prochazka, Emily Timm, Cheri Farris*

### **Highway Safety Office**

The Highway Safety grant, which supports longer-term injury prevention strategies, is going well.

Below are a few updates:

- Monthly social media promotions
- Driver's Education classes are being offered through WNCC at Scottsbluff and Sidney. Alliance has someone interested in being an instructor.
- Janelle is continuing to work with her Activate groups to keep our communities active and safe.
- Activate Kimball painted crosswalks at the high school and elementary school in May and downtown. Kimball Health Services has chosen a crosswalk design and will be using employees and volunteers from the hospital to paint them soon.

- Walk audits had been conducted in Alliance to help the principals and school administrators to determine a school arrival and dismissal plan for kids to safely get to school. Walking, biking and rolling will be suggested.
  - Walk audits were conducted in Chadron. The group decided to start with 10th Street. The group suggested adding a new crosswalk at 10th & Cedar to connect the sidewalk at the high school to the trail on the east side of campus at the trail. The new crosswalk is done and painted.
  - Box Butte General Hospital had a bike rally on May 31. Janelle presented sun safety information. She also promoted Activate Alliance and the Bike Share Program. There were also 2 bicycles (boys and girls' sixteen inch) given away in a drawing.
  - Jessica is working on social media requests.
  - Older/senior driver billboards will be placed digitally in Scottsbluff in July/August and on physical billboards the end of July in Kimball and two locations in Scottsbluff.
  - Older/senior driver ads are running throughout July in Panhandle newspapers.
  - We continue to work with Panhandle Scanner and they are advertising HSO social media on Facebook, Instagram, and X.
  - Railroad safety Spotify and radio ads ran throughout the month of June.
  - Ag-safety/harvest radio ads are running throughout the month of July.
  - Janelle is reaching out to schools **regarding** their FCCLA involvement with the FACTS (Families Acting for Community Traffic Safety) program, and recently, county extension agents have been contacted in regards to their 4-H groups too.
  - Janelle has presented Car Fit to the Sidney Congregate Meals (Senior Center) and to CAPWN employees.
- Lead – Janelle Visser, Jessica Rocha, and Nicole Berosek*

## Children's Health

### ***3rd Grade Wellness Day(formerly referred to as 3rd Grade Kids Fitness and Nutrition Day)***

2025 3rd Grade Wellness Days are getting scheduled. This event is a great opportunity for students to explore overall well-being. This fun-filled day focuses on promoting non-competitive physical activities, prevention activities, and hands-on nutritional education among 3rd-grade students. While at the events, students and teachers are invited to participate in physical activities conducted by area health and fitness educators. Children are able to step, jump, and learn new skills as they enjoy fun, interactive physical activity stations. Participants can also visit various education stations, including those on basic nutrition, energy balance, yoga, walking, boot camp, anti-bullying, and healthy choices/just say no.

The sites and dates include:

Scottsbluff September 16 | Alliance September 25 | Sidney September 17 | Chadron September 23 or 24

*Lead-Janelle Visser*

## ***Pool Cool***

Sunscreen as well as Sun Safety tips have been delivered to all outdoor public swimming pools in the panhandle. The sun safety tips were provided by the Nebraska Cancer Coalition.

*Lead-Janelle Visser*

## Active Living

### ***Community Walkability/Bikeability***

The Kimball, Gordon, Alliance, Tri-City, and Bridgeport Active Living Advisory Committees have been meeting regularly in person and/or virtually.

There are active living meetings coming up in:

- Activate Gordon will have an in-person meeting in Gordon at the Cowboy Museum at 9:00 am on August 14
- Activate Alliance meets quarterly. They will have a virtual meeting on October 2 at 10:00 am
- Activate Kimball will have a virtual meeting on August 5 at 10:00 am

- Tri-City Active Living Advisory Committee(Gering, Scottsbluff and Terrytown) will be meeting virtually on July 15 at noon.
- Walk and Bike to School Day is October 1.
- Gering Safer Streets and Roads will be having focus groups on July 10 from 11-12 and 12-1:00 at the Gering Senior Center. Lunch will be provided.
- Janelle has also attended the Scottsbluff Safe Streets for All kick off meeting on June 25. The next meeting has not been scheduled yet.

*Lead – Nicole Berosek & Janelle Visser*

## Environmental Health

### Radon

Spending for the radon program was completed June 2025. Radon kits continue to be sent out as requested to Panhandle residents. The final report and budget will be due July 31, 2025. The final counts include:

| Month         | Short Term | Used       | Above 4.0 | % above 4.0 pCi/L | Analysis Rate | Long Term |
|---------------|------------|------------|-----------|-------------------|---------------|-----------|
| June '24      | 10         | 3          | 1         | 33%               | 30%           | 2         |
| July '24      | 5          | 3          | 0         | 0%                | 60%           | 2         |
| August '24    | 4          | 3          | 1         | 33%               | 75%           | 3         |
| September '24 | 3          | 2          | 2         | 100%              | 67%           | 2         |
| October '24   | 10         | 6          | 1         | 17%               | 60%           | 0         |
| November '24  | 18         | 5          | 1         | 20%               | 28%           | 2         |
| December '24  | 10         | 4          | 1         | 25%               | 40%           | 0         |
| January '25   | 28         | 18         | 4         | 22%               | 64%           | 1         |
| February '25  | 24         | 10         | 1         | 10%               | 42%           | 6         |
| March '25     | 132        | 47         | 12        | 26%               | 36%           | 5         |
| April '25     | 31         | 4          | 0         | 0%                | 13%           | 4         |
| May '25       | 8          | 3          | 0         | 0%                | 38%           | 1         |
| June '25      | 8          | 2          | 0         | 0%                | 25%           | 0         |
| <b>TOTAL</b>  | <b>291</b> | <b>110</b> | <b>24</b> | <b>22%</b>        | <b>38%</b>    | <b>28</b> |

*Lead – Melissa Haas*

### West Nile Virus

Information on ticks and West Nile virus awareness were sent out to all area veterinarians in June. Letters were sent out to all Village/City Clerks to offer \$250 as a stipend for increased mosquito prevention and supplies such as DEET wipes, mosquito spray, mosquito dunks, and brochures were offered. 12 communities responded to the offer. Ticks were collected for Chadron State Park and have been sent to Lincoln for testing. As of July 9, 2025, there has been one confirmed positive pool of mosquitoes from Scotts Bluff County. There are two total positive mosquito pools across the state as of July.

*Lead – Melissa Haas*

### **LEPH- Increase local capacity for lead remediation, promote safe drinking water, increase communication awareness to the public on air quality**

PPHD continues to hold quarterly meetings of the Environmental Health Coalition to discuss partnerships and opportunities for the expansion of air, water, and lead safety.



## Water

PPHD will be testing water for lead at 11 Head Start locations as a part of ESU 13's requirement. These will be completed before the start of school, so we know if the water is safe for children to drink.

## Air

Megan continues to offer the air quality school presentation to area high schools. PPHD has 5 more PurpleAir monitors that PPHD is offering to all villages/cities in the Panhandle. If you live in a community listed here or know an organization or business that would want to house the Purple Air machine, let us know!

- Rushville, Hay Springs, Lyman, Bridgeport, Big Springs, Harrison, Alliance, Bayard, Hyannis

## Lead and HUD

We have scheduled a training for contractors/carpenters to take the lead remediation training, Sept 8-12, 2025 in Scottsbluff. This training is 3 days for workers and 5 days for supervisors. All contractors are invited to attend for free (to them) if they want to bid on HUD projects.

Lead poisoning prevention outreach:

- Sidney WIC Clinic capillary lead testing and education 6/10/2025
- Sidney WIC Clinic capillary lead testing and education 7/8/2025
- Welcoming Communities Conference, exhibitor with lead poisoning prevention and HUD information, 6/19/2025
- Gave lead poisoning prevention to Region 1, 6/23/2025
- National Night Out- Lead poisoning prevention material handed out and lead house example used 8/5/2025
- Facebook posts- June 25, 27, 30, July 2, 3, 5, 7, 9, 11, 12, 14, 17, 19, 21, 23
- Presenting at Nebraska Maintenance Conference, July 18, 2025, in Scottsbluff



**Have children under 6 years of age?**

Lead is a toxic metal that can be found in and around homes, in soil, and in some consumer products. Lead poisoning can cause learning and behavior problems in children.

If you can answer YES or UNSURE to any of these questions, ask your doctor about blood lead testing

|                                                                                                                                                      |                                                                                                                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|
| <input type="radio"/> Is your child enrolled in Medicaid?                                                                                            | <input type="radio"/> Does your child have a sibling or playmate with lead poisoning?                              |
| <input type="radio"/> Does your child live in any of the following communities: Ashby, Bridgeport, Lyman, Mitchell, Oshkosh, Rushville, Scottsbluff? | <input type="radio"/> Does your child live with an adult who has a job or hobby that involves exposure to lead?    |
| <input type="radio"/> Does your child live in or often visit a home built before 1950?                                                               | <input type="radio"/> Do you use products from other countries that may contain lead? (cosmetics, spices, pottery) |
| <input type="radio"/> Does your child live in or often visit a home built before 1978 that has been recently remodeled?                              | <input type="radio"/> Is your child a refugee, migrant, foreign adoptee, or in foster care?                        |

**Schedule a capillary blood test with your doctor or PPHD to test for lead poisoning**

Scan the QR code to learn more about:

- Lead poisoning prevention
- Lead blood testing
- Home Lead Inspection/Risk Assessment
- Lead-Based Paint Abatement Certification Training
- Renovate, Repair, and Painting Rule (RRP) Training

**PUBLIC HEALTH IS FOR YOU**

PPHD  
18 W 16th St, Scottsbluff  
308-633-2866

**Panhandle**  
Public Health District  
www.pphd.ne.gov

*Lead – Melissa Haas, Megan Barhafer, Kendra Lauruhn*

## Dental Health

### Dental Health Program-Keeping Teeth Strong

PPHD's Dental Health Program provides dental screenings to detect early signs of dental disease, fluoride treatments to prevent dental decay, dental sealants to prevent dental decay on molars, silver diamine fluoride to stop the progression of decay, education to teach lifelong lessons to keep teeth clean, and dental referrals.

Our school-based dental health program services provided in 2024-25 school year:

Dental screenings: 6,922 | Fluoride treatments: 4,624 | Sealants: 156

Silver Diamine Fluoride (SDF): 1,218 applications | Dental Health Presentations: 69 presentations/2,009 attendees

Participation Rate to those offered services: 58%

*Lead – Kendra Lauruhn*

### ***Dental Day***

There was not a Dental Day for 2025. We are hoping to be able to work with UNMC-COD for Dental Day 2026.

*Lead – Janelle Visser*

## **Administrative**

### ***Human Resources***

Annual performance reviews were successfully completed using the new HRIS platform, BambooHR. Open enrollment for medical and dental coverage was conducted, and we transitioned from USABLE to NIS for company-provided Life and Long-Term Disability insurance, resulting in annual cost savings.

Work anniversaries for May - July

- |                      |          |                   |        |
|----------------------|----------|-------------------|--------|
| • Tabi Prochazka     | 16 years | • Dezirae Wilkins | 1 year |
| • Cheri Farris       | 9 years  | • Angie Shaw      | 1 year |
| • Amanda McClaren    | 4 years  | • Carol Sinner    | 1 year |
| • Ally De Los Santos | 1 year   | • Julie Brock     | 1 year |

*Lead – Erin Sorensen*

### ***Finance***

Budgets have been submitted to state partners for programs with a July 1 start date. Senior leadership continue to work on the overall agency budget for FY 26 and monitor federal and state changes to our funding. HBE will conduct the FY 25 audit starting in late August.

### ***Accreditation***

PPHD's second annual report to the Public Health Accreditation Board is due September 30. This will include documentation review that will provide feedback to continue preparation on one of the foundational documents for the next round of reaccreditation..

*Lead – Sara Williamson*



**National Association of Local Boards of Health (NALBOH)**

October 6-8, 2025

Savannah, GA

*Historic Roots, Healthy Futures: Cultivating the Growth of Board of  
Health Leaders*

**American Public Health Association (APHA)**

November 2-5, 2025

Washington, D.C.

*Making the Public's Health a National Priority*

PPHD Finance Committee  
Conference Call Minutes  
July 16, 2025 9:00 am

Present on the call were Kay Anderson, Pat Wellnitz, Susanna Batterman, Diana Lecher, Jessica Davies, Sara Williamson, and Amanda McClaren.

Williamson reviewed program spreadsheets, accounts receivable, and check detail and financial statements for April and May. Davies noted that the state is providing funding to all health departments for one year to address obesity, which is a priority for the governor and the state health improvement plan.

A motion was made by Wellnitz to approve the financial statements and spreadsheets and seconded by Batterman.

Staff are monitoring ongoing federal funding changes. Preparedness funds have been listed as being potentially cut but we have been instructed to submit budgets based on level funding. Emergency measles funding is currently available from the state for response if needed. Staff are also monitoring state activity for next budget cycle.

The meeting adjourned at 9:24 am.

**PANHANDLE PUBLIC HEALTH DISTRICT**

**FINANCIAL STATEMENTS**

**APRIL 30, 2025**

# Panhandle Public Health District

## Balance Sheet

As of April 30, 2025

Cash Basis

|                                                        | Apr 30, 25        |
|--------------------------------------------------------|-------------------|
| <b>ASSETS</b>                                          |                   |
| Current Assets                                         |                   |
| Checking/Savings                                       |                   |
| 1000 · Platte Valley National Bank                     | 190,115.73        |
| 1005 · NPAIT (Nebraska Public Agency Investment Trust) | 328,314.59        |
| Total Checking/Savings                                 | 518,430.32        |
| Total Current Assets                                   | 518,430.32        |
| <b>TOTAL ASSETS</b>                                    | <b>518,430.32</b> |
| <b>LIABILITIES &amp; EQUITY</b>                        |                   |
| Liabilities                                            |                   |
| Current Liabilities                                    |                   |
| Other Current Liabilities                              |                   |
| 2010 · State Withholding Payable                       | 5,197.96          |
| 2015 · Retirement Payable                              | 10.53             |
| 2020 · Health Insurance Payable                        | 609.09            |
| 2021 · FSA Payable - Health                            | -1,216.60         |
| 2022 · FSA Payable - Dep Care                          | -896.49           |
| 2025 · FICA Withholding Payable                        | 13.63             |
| 2026 · Garnishment                                     | 184.68            |
| 2027 · State Unemployment Payable                      | 52.48             |
| 2028 · Dental Insurance Payable                        | 17.27             |
| 2029 · Vision Insurance Payable                        | 2.10              |
| Total Other Current Liabilities                        | 3,974.65          |
| Total Current Liabilities                              | 3,974.65          |
| Long Term Liabilities                                  |                   |
| 2500 · Scottsbluff Building Loan                       | 149,071.33        |
| Total Long Term Liabilities                            | 149,071.33        |
| Total Liabilities                                      | 153,045.98        |
| Equity                                                 |                   |
| 3000 · Opening Balance Equity                          | -39,764.62        |
| 3050 · Fund Balance                                    | 510,009.89        |
| 3060 · Board Designated Funds - Autos                  | 33,525.52         |
| 3061 · Board Designated Funds - Copier                 | 67,259.26         |
| Net Income                                             | -205,645.71       |
| Total Equity                                           | 365,384.34        |
| <b>TOTAL LIABILITIES &amp; EQUITY</b>                  | <b>518,430.32</b> |

# Panhandle Public Health District Profit & Loss

April 2025

Cash Basis

|                                                | Apr 25     | Jul '24 - Apr 25 |
|------------------------------------------------|------------|------------------|
| Ordinary Income/Expense                        |            |                  |
| Income                                         |            |                  |
| 4000 - General Funds                           | 11,102.99  | 111,029.89       |
| 4010 - Infrastructure Funds                    | 11,580.36  | 113,663.68       |
| 4015 - Per Capita Funds                        | 12,377.19  | 115,922.64       |
| 4016 - LB1008 Funds                            | 6,944.46   | 69,444.60        |
| 4017 - LB 585                                  | 12,287.33  | 122,873.30       |
| 4020 - Revenue                                 | 10,138.32  | 510,354.73       |
| 4021 - Revenue (Fed Pass-Through)              | 128,902.97 | 2,034,593.75     |
| 4035 - Health Screening Supplies               | 0.00       | 3.29             |
| 4045 - Other Income                            | 3,249.99   | 12,213.49        |
| 4050 - Interest Income                         | 1,141.25   | 10,393.68        |
| 4055 - Travel Reimbursement                    | 0.00       | 2,691.81         |
| 4070 - Program Donations                       | 0.00       | 6,473.87         |
| 4072 - Program Fees (Fee for service revenues) | 47,378.99  | 331,888.96       |
| 4073 - Product Fees                            | 42,580.66  | 527,072.96       |
| 4074 - Admin Fees                              | 0.00       | 2,057.03         |
| 4075 - Copy Reimbursement                      | 0.00       | 597.34           |
| 4080 - Office Expense Reimbursement            | 0.00       | 2,589.02         |
| 4090 - Fall Conference Sponsorships            | 500.00     | 1,100.00         |
| 4092 - Fall Conference Registrations           | 0.00       | 6,322.91         |
| 4093 - Conference Registration Fees            | 60.00      | 91.00            |
| Total Income                                   | 288,244.51 | 3,981,377.95     |
| Gross Profit                                   | 288,244.51 | 3,981,377.95     |
| Expense                                        |            |                  |
| 6010 - Advertising and PR                      | 19,580.89  | 97,156.00        |
| 6020 - Auditing                                | 0.00       | 35,200.00        |
| 6030 - Bank Service Charges                    | 179.24     | 2,265.09         |
| 6035 - Board Member Travel                     | 0.00       | 4,347.14         |
| 6075 - Communication                           | 7,157.14   | 62,556.48        |
| 6080 - Contracts                               | 23,629.29  | 622,881.29       |
| 6090 - Depreciation Expense                    | 0.00       | 0.00             |
| 6091 - Depreciation Expense - Building         | 0.00       | 0.00             |
| 6095 - Dues and Subscriptions                  | 12,595.20  | 33,535.69        |
| 6110 - Equipment                               | 0.00       | 43,456.30        |
| 6115 - Health Check Supplies                   | 17.66      | 17.66            |
| 6120 - Incentives                              | 314.33     | 6,685.69         |
| 6125 - Insurance                               | 0.00       | 31,127.84        |
| 6126 - Insurance - General                     | 792.00     | 15,138.34        |
| 6128 - Interest Expense                        | 474.77     | 4,550.88         |
| 6135 - Legal Fees                              | 100.69     | 580.69           |
| 6145 - Meeting                                 | 1,947.39   | 17,484.43        |
| 6150 - Office Expense                          | 2,646.77   | 32,116.66        |
| 6154 - Vaccinations                            | 31,100.27  | 482,775.99       |
| 6155 - Office Supplies                         | 13,718.64  | 145,648.36       |
| 6156 - Medical Supplies                        | 3,596.59   | 9,411.73         |
| 6157 - Printing Supplies                       | 1,830.32   | 16,543.07        |
| 6160 - Payroll Tax Expense                     | 11,482.14  | 117,922.65       |
| 6175 - Postage                                 | 1,176.13   | 19,321.46        |
| 6180 - Printing and Publication                | 1,133.55   | 51,290.48        |
| 6190 - Radon Supplies                          | 0.00       | 3,341.00         |
| 6200 - Repairs and Maintenance                 | 1,623.00   | 45,889.22        |
| 6202 - Server Backup                           | 966.00     | 9,176.98         |
| 6205 - Training/Education                      | 10,686.00  | 69,767.96        |
| 6210 - Travel                                  | 18,393.74  | 95,318.22        |
| 6215 - Utilities                               | 1,192.00   | 12,628.11        |
| 6220 - Wages                                   | 154,604.05 | 1,593,627.15     |
| 6225 - Retirement Expense                      | 10,384.44  | 105,281.39       |
| 6230 - Health Insurance                        | 27,235.00  | 498,137.22       |
| 6231 - Dental Insurance                        | 868.48     | 17,591.79        |
| 6232 - Vision Insurance                        | 254.10     | 4,930.81         |
| 6240 - Life Insurance                          | 172.50     | 3,431.50         |
| 6245 - LT Disability                           | 210.00     | 4,193.00         |
| 6246 - FSA Expense - Health                    | 54.00      | 1.00             |
| 6247 - FSA Expense - Dep                       | 0.00       | 0.00             |
| 6819 - Program Expense Offset                  | -10,062.48 | -128,934.50      |
| Total Expense                                  | 350,053.84 | 4,186,394.77     |
| Net Ordinary Income                            | -61,809.33 | -205,016.82      |
| Other Income/Expense                           |            |                  |
| Other Expense                                  |            |                  |
| 6815 - Other Expense                           | 0.00       | 628.89           |
| Total Other Expense                            | 0.00       | 628.89           |
| Net Other Income                               | 0.00       | -628.89          |
| Net Income                                     | -61,809.33 | -205,645.71      |

**PANHANDLE PUBLIC HEALTH DISTRICT**  
**FINANCIAL STATEMENTS**  
**MAY 31, 2025**

# Panhandle Public Health District

## Balance Sheet

As of May 31, 2025

Cash Basis

|                                                        | May 31, 25        |
|--------------------------------------------------------|-------------------|
| <b>ASSETS</b>                                          |                   |
| Current Assets                                         |                   |
| Checking/Savings                                       |                   |
| 1000 · Platte Valley National Bank                     | 431,901.32        |
| 1005 · NPAIT (Nebraska Public Agency Investment Trust) | 329,498.08        |
| Total Checking/Savings                                 | 761,399.40        |
| Total Current Assets                                   | 761,399.40        |
| <b>TOTAL ASSETS</b>                                    | <b>761,399.40</b> |
| <b>LIABILITIES &amp; EQUITY</b>                        |                   |
| Liabilities                                            |                   |
| Current Liabilities                                    |                   |
| Other Current Liabilities                              |                   |
| 2010 · State Withholding Payable                       | 4,230.66          |
| 2015 · Retirement Payable                              | 10.53             |
| 2020 · Health Insurance Payable                        | 609.09            |
| 2021 · FSA Payable - Health                            | -1,594.68         |
| 2022 · FSA Payable - Dep Care                          | -868.25           |
| 2025 · FICA Withholding Payable                        | 13.63             |
| 2026 · Garnishment                                     | 184.68            |
| 2027 · State Unemployment Payable                      | 106.89            |
| 2028 · Dental Insurance Payable                        | 17.27             |
| 2029 · Vision Insurance Payable                        | 2.10              |
| Total Other Current Liabilities                        | 2,711.92          |
| Total Current Liabilities                              | 2,711.92          |
| Long Term Liabilities                                  |                   |
| 2500 · Scottsbluff Building Loan                       | 147,985.49        |
| Total Long Term Liabilities                            | 147,985.49        |
| Total Liabilities                                      | 150,697.41        |
| Equity                                                 |                   |
| 3000 · Opening Balance Equity                          | -39,764.62        |
| 3050 · Fund Balance                                    | 510,009.89        |
| 3060 · Board Designated Funds - Autos                  | 33,525.52         |
| 3061 · Board Designated Funds - Copier                 | 67,259.26         |
| Net Income                                             | 39,671.94         |
| Total Equity                                           | 610,701.99        |
| <b>TOTAL LIABILITIES &amp; EQUITY</b>                  | <b>761,399.40</b> |

# **Panhandle Public Health District** **Profit & Loss**

Cash Basis

May 2025

|                                                | May 25     | Jul '24 - May 25 |
|------------------------------------------------|------------|------------------|
| Ordinary Income/Expense                        |            |                  |
| Income                                         |            |                  |
| 4000 · General Funds                           | 11,102.99  | 122,132.88       |
| 4010 · Infrastructure Funds                    | 11,580.36  | 125,244.04       |
| 4015 · Per Capita Funds                        | 12,377.19  | 128,299.83       |
| 4016 · LB1008 Funds                            | 6,944.46   | 76,389.06        |
| 4017 · LB 585                                  | 12,287.33  | 135,160.63       |
| 4020 · Revenue                                 | 227,920.42 | 738,275.15       |
| 4021 · Revenue (Fed Pass-Through)              | 261,453.32 | 2,296,047.07     |
| 4035 · Health Screening Supplies               | 0.00       | 3.29             |
| 4045 · Other Income                            | 0.00       | 12,213.49        |
| 4050 · Interest Income                         | 1,183.49   | 11,577.17        |
| 4055 · Travel Reimbursement                    | 0.00       | 2,691.81         |
| 4070 · Program Donations                       | 0.00       | 6,473.87         |
| 4072 · Program Fees (Fee for service revenues) | 15,911.81  | 347,800.77       |
| 4073 · Product Fees                            | 20,297.00  | 547,369.96       |
| 4074 · Admin Fees                              | 0.00       | 2,057.03         |
| 4075 · Copy Reimbursement                      | 0.00       | 597.34           |
| 4080 · Office Expense Reimbursement            | 0.00       | 2,589.02         |
| 4090 · Fall Conference Sponsorships            | 500.00     | 1,600.00         |
| 4092 · Fall Conference Registrations           | 0.00       | 6,322.91         |
| 4093 · Conference Registration Fees            | 1,145.17   | 1,236.17         |
| Total Income                                   | 582,703.54 | 4,564,081.49     |
| Gross Profit                                   | 582,703.54 | 4,564,081.49     |
| Expense                                        |            |                  |
| 6010 · Advertising and PR                      | 10,638.22  | 107,794.22       |
| 6020 · Auditing                                | 0.00       | 35,200.00        |
| 6030 · Bank Service Charges                    | 109.25     | 2,374.34         |
| 6035 · Board Member Travel                     | 1,066.10   | 5,413.24         |
| 6075 · Communication                           | 7,153.53   | 69,710.01        |
| 6080 · Contracts                               | 17,505.86  | 640,387.15       |
| 6090 · Depreciation Expense                    | 0.00       | 0.00             |
| 6091 · Depreciation Expense - Building         | 0.00       | 0.00             |
| 6095 · Dues and Subscriptions                  | 0.00       | 33,535.69        |
| 6110 · Equipment                               | 0.00       | 43,456.30        |
| 6115 · Health Check Supplies                   | 0.00       | 17.66            |
| 6120 · Incentives                              | 0.00       | 6,685.69         |
| 6125 · Insurance                               | 5,763.37   | 36,891.21        |
| 6126 · Insurance - General                     | 5,722.72   | 20,861.06        |
| 6128 · Interest Expense                        | 400.13     | 4,951.01         |
| 6135 · Legal Fees                              | 0.00       | 580.69           |
| 6145 · Meeting                                 | 85.00      | 17,569.43        |
| 6150 · Office Expense                          | 3,363.96   | 35,480.62        |
| 6154 · Vaccinations                            | 54,247.78  | 537,023.77       |
| 6155 · Office Supplies                         | 14,014.13  | 159,662.49       |
| 6156 · Medical Supplies                        | 411.00     | 9,822.73         |
| 6157 · Printing Supplies                       | 1,552.43   | 18,095.50        |
| 6160 · Payroll Tax Expense                     | 9,699.57   | 127,622.22       |
| 6175 · Postage                                 | 497.86     | 19,819.32        |
| 6180 · Printing and Publication                | 1,311.03   | 52,601.51        |
| 6190 · Radon Supplies                          | 0.00       | 3,341.00         |
| 6200 · Repairs and Maintenance                 | 3,717.00   | 49,606.22        |
| 6202 · Server Backup                           | 966.00     | 10,142.98        |
| 6205 · Training/Education                      | 3,879.65   | 73,647.61        |
| 6210 · Travel                                  | 15,272.37  | 110,590.59       |
| 6215 · Utilities                               | 1,037.64   | 13,665.75        |
| 6220 · Wages                                   | 133,284.43 | 1,726,911.58     |
| 6225 · Retirement Expense                      | 8,958.46   | 114,239.85       |
| 6230 · Health Insurance                        | 48,469.56  | 546,606.78       |
| 6231 · Dental Insurance                        | 1,736.69   | 19,328.48        |
| 6232 · Vision Insurance                        | 509.57     | 5,440.38         |
| 6240 · Life Insurance                          | 345.00     | 3,776.50         |
| 6245 · LT Disability                           | 420.00     | 4,613.00         |
| 6246 · FSA Expense - Health                    | 0.00       | 1.00             |
| 6247 · FSA Expense - Dep                       | 0.00       | 0.00             |
| 6819 · Program Expense Offset                  | -14,752.42 | -143,686.92      |
| Total Expense                                  | 337,385.89 | 4,523,780.66     |
| Net Ordinary Income                            | 245,317.65 | 40,300.83        |
| Other Income/Expense                           |            |                  |
| Other Expense                                  |            |                  |
| 6815 · Other Expense                           | 0.00       | 628.89           |
| Total Other Expense                            | 0.00       | 628.89           |
| Net Other Income                               | 0.00       | -628.89          |
| Net Income                                     | 245,317.65 | 39,671.94        |



Program updates through **6/30/2025**

| Award Name/<br>Program Name                               | Total Award  | Expenses<br>to Date | % of Total | % of Performance<br>Period | Program<br>End Date |
|-----------------------------------------------------------|--------------|---------------------|------------|----------------------------|---------------------|
| <b>State Appropriated Funds</b>                           |              |                     |            |                            |                     |
| Admin 2025 (LB 692)                                       | \$276,788.15 | \$245,734.41        | 89%        | 100%                       | 6/30/2025           |
| Surveillance 2025 (LB 1060)                               | \$105,458.11 | \$93,989.03         | 89%        | 100%                       | 6/30/2025           |
| LB 1008 2025                                              | \$83,333.55  | \$75,789.68         | 91%        | 100%                       | 6/30/2025           |
| LB 585 2025                                               | \$148,161.56 | \$141,214.74        | 95%        | 100%                       | 6/30/2025           |
| MHI 2024 (Minority Health Initiative)                     | \$166,067.44 | \$162,671.20        | 98%        | 100%                       | 6/30/2025           |
| Opioid General Funds                                      | \$27,777.77  | \$27.50             | 0%         | 100%                       | 6/30/2025           |
| <b>Data, Performance, and Health Improvement Planning</b> |              |                     |            |                            |                     |
| MAPP 2025 (CHA/CHIP Work)                                 | \$18,000.00  | \$10,832.82         | <b>60%</b> | 50%                        | 12/31/2025          |
| WFD 2025 (Accreditation Readiness)                        | \$25,500.00  | \$15,810.84         | 62%        | 75%                        | 9/30/2025           |

Program updates through

6/30/2025


 Panhandle  
Public Health District

| Award Name/<br>Program Name               | Total Award  | Expenses<br>to Date | % of Total | % of Performance<br>Period | Program<br>End Date |
|-------------------------------------------|--------------|---------------------|------------|----------------------------|---------------------|
| <b>Chronic Disease Prevention Funds</b>   |              |                     |            |                            |                     |
| AOWN 2025 (Diabetes Prevention)           | \$9,830.00   | \$9,425.49          | 96%        | 100%                       | 6/30/2025           |
| LCTA 2025 (DPP Coaches Training)          | \$11,322.50  | \$10,744.41         | 95%        | 108%                       | 6/29/2025           |
| Governor's Award 2025 (Worksite Wellness) | \$10,000.00  | \$3,144.25          | 31%        | 50%                        | 12/31/2025          |
| Hub 2024 (EWM/Colon Cancer)               | \$12,737.27  | \$7,767.27          | 61%        | 104%                       | 6/29/2025           |
| TFN 2025 (Tobacco Free NE)                | \$80,989.00  | \$75,637.78         | 93%        | 100%                       | 6/30/2025           |
| <b>Injury Prevention Funds</b>            |              |                     |            |                            |                     |
| HSO 2025 (Highway/Driver Safety)          | \$125,240.00 | \$64,812.09         | 52%        | 75%                        | 9/30/2025           |

Program updates through 6/30/2025

**Panhandle**  
Public Health Distr

| Award Name/<br>Program Name                            | Total Award  | Expenses<br>to Date | % of Total | % of Performance<br>Period | Program<br>End Date |
|--------------------------------------------------------|--------------|---------------------|------------|----------------------------|---------------------|
| <b>Preparedness Funds</b>                              |              |                     |            |                            |                     |
| BT 2025 (Emergency Preparedness/Disease Investigation) | \$150,242.75 | \$134,520.54        | 90%        | 100%                       | 6/30/2025           |
| PRMRS 2025 (Hospital Preparedness Planning)            | \$125,000.00 | \$110,952.29        | 89%        | 100%                       | 6/30/2025           |
| <b>Clinical Services</b>                               |              |                     |            |                            |                     |
| Vaccination AOWN                                       | \$157,000.00 | \$139,712.34        | 89%        | 100%                       | 6/30/2025           |
| NACCHO Vaccination (school based program) - ENDED      | \$75,000.00  | \$46,124.32         | 61%        | 105%                       | 5/31/2025           |
| VFC 2025 (Vaccinations for Children)                   | \$30,000.00  | \$28,760.80         | 96%        | 100%                       | 6/30/2025           |
| Immunization Billing                                   | \$597,200.00 | \$596,995.76        | 100%       | 200%                       | 6/30/2024           |
| Vacc Cap 2025                                          | \$199,937.33 | \$186,942.70        | 94%        | 100%                       | 6/30/2025           |
| STI 2024 (Case Investigation)                          | \$57,374.99  | \$46,513.64         | 81%        | 100%                       | 6/30/2025           |
| HPV 2025 (media campaign)                              | \$15,000.00  | \$9,934.85          | 66%        | 108%                       | 6/29/2025           |

Program updates through

6/30/2025

Panhandle  
Public Health District

| Award Name/<br>Program Name        | Total Award  | Expenses<br>to Date | % of Total | % of Performance<br>Period | Program<br>End Date |
|------------------------------------|--------------|---------------------|------------|----------------------------|---------------------|
| <b>Home Visitation Funds</b>       |              |                     |            |                            |                     |
| HV 2025 (Healthy Families America) | \$819,092.00 | \$578,889.41        | 71%        | 75%                        | 9/30/2025           |
| HV CWP 2025 (DHHS Referred Cases)  | \$345,000.00 | \$153,274.40        | 44%        | 75%                        | 9/30/2025           |

Program updates through

6/30/2025


 Panhandle  
Public Health District

| Award Name/<br>Program Name                       | Total Award  | Expenses<br>to Date | % of Total | % of Performance<br>Period | Program<br>End Date |
|---------------------------------------------------|--------------|---------------------|------------|----------------------------|---------------------|
| <b>Environmental Health Funds</b>                 |              |                     |            |                            |                     |
| LEPH 2025 (Local Environmental Public Health)     | \$66,075.34  | \$49,145.42         | 74%        | 58%                        | 11/30/2025          |
| Radon 2025 (\$5,000 award, \$5388.32 PPHD Match)  | \$10,388.32  | \$12,554.97         | 121%       | 113%                       | 5/31/2025           |
| WNV 2025 (WNV Mosquito Trapping)                  | \$10,000.00  | \$4,481.77          | 45%        | 50%                        | 12/31/2025          |
| Lead Epi 2025 (Childhood Lead Case Investigation) | \$25,354.20  | \$19,205.30         | 76%        | 83%                        | 9/29/2025           |
| Hud (Lead Based Paint Remediation)                | \$148,763.03 | \$66,588.47         | 45%        | 85%                        | 8/15/2025           |

Program updates through

6/30/2025



| Award Name/<br>Program Name                          | Total Award  | Expenses<br>to Date | % of Total | % of Performance<br>Period | Program<br>End Date |
|------------------------------------------------------|--------------|---------------------|------------|----------------------------|---------------------|
| <b>Behavioral Health/Substance Misuse Prevention</b> |              |                     |            |                            |                     |
| OD2A 2025 (Statewide Opioid Prevention)              | \$50,000.00  | \$44,121.85         | 88%        | 83%                        | 8/31/2025           |
| R1SOR 2025 (Region I Opioid Response)                | \$43,713.00  | \$22,457.61         | 51%        | 83%                        | 9/29/2025           |
| State SOR 2025 (State Opioid Response)               | \$40,000.00  | \$27,065.22         | 68%        | 83%                        | 9/29/2025           |
| R1BG 2025 (Panhandle Prevention Coalition)           | \$159,500.00 | \$153,526.00        | 96%        | 100%                       | 6/30/2025           |
| PFS 2025 (Partner for Success)                       | \$94,621.61  | \$53,774.43         | 57%        | 75%                        | 9/30/2025           |
| MCH 2025 (BaseEd) (57395.39 Grant, 16703.65 Match)   | \$57,395.39  | \$26,109.39         | 45%        | 25%                        | 3/31/2026           |

Program updates through

6/30/2025



| Award Name/<br>Program Name                | Total Award | Expenses<br>to Date | % of Total | % of Performance<br>Period | Program<br>End Date |
|--------------------------------------------|-------------|---------------------|------------|----------------------------|---------------------|
| <b>Oral Health</b>                         |             |                     |            |                            |                     |
| DHP 2025 (Dental Health Program NCF Grant) | \$64,438.81 | \$11,874.77         | 18%        | 50%                        | 12/31/2025          |
| DHP HRSA 2025 (Dental Health Program)      | \$78,000.00 | \$43,601.33         | 56%        | 92%                        | 7/31/2025           |

Program updates through

6/30/2025



| Award Name/<br>Program Name | Total Award | Expenses<br>to Date | % of Total | % of Performance<br>Period | Program<br>End Date |
|-----------------------------|-------------|---------------------|------------|----------------------------|---------------------|
| <b>Other Funds</b>          |             |                     |            |                            |                     |
| MCO (United Health Care)    | \$66,550.00 | \$15,203.13         | 23%        | 67%                        | 12/31/2025          |
| NTC (NE Total Care)         | \$55,125.00 | \$59.70             | 0%         | 100%                       | 6/30/2025           |



**Q1. What do you think are two of Jessica's biggest strengths?**

- Her leadership and communication.
- Her professional dedication to her position. Always listening to others.
- A Long and familiar history with the clients of PPHD. Knowledge of PPHD operations
- Knowledge of PPHD organization. Ability to communicate
- A good communicator
- Advocacy and strategic planning

**Q2. What do you think is an area of growth for Jessica?**

- She has a good knowledge of all areas.
- Confidence in her role
- Jessica is too hard on herself
- Just keep learning

**Q3. What do you think has been a major accomplishment of Jessica's over the past year?**

- She handled the employee issue very well!
- Keeping us going and reaching out with all the cuts she has faced.
- Survival
- Work in legislation
- Being able to navigate and prioritize our programs in spite of the federal government, cutting funds and adding confusion
- Adapting to Change

**Q4. Do you have any extra comments to help in Jessica's annual review?**

- Thank you for all you have done! Keep up the Great job you are doing!!
- Nope...Shes a keeper and we are fortunate to have her working a d leading our board.
- I greatly appreciated how she handled the situation with personnel issue
- On a scale one to 10 one being low 10 being high, I would have to give her an 8.5 just needs a little more time to find her comfort zone. I think she's doing a great job.
- Appreciate compassion for her employees

## LOCAL HEALTH DIRECTOR EVALUATION FORM

### General Information:

Review of the position description prior to completing the evaluation form is a key component of the evaluation process. How the Health Director provides for the core public health functions of Assessment, Policy Development, and Assurance is essential. The annual performance evaluation should document the ongoing process of employee performance, assessment, growth, and progress.

It should be consistent and supportive of other documents used to describe employee performance and should demonstrate the effectiveness of how the employee performs the primary duties and responsibilities of the position.

### Rating Method:

A numeric rating scale and brief explanation follows: This scoring method is suggested when evaluating the individual's performance.

5 – Superior/Outstanding - Employee's performance is outstanding; consistently exceeds expectations; accepts new responsibility without challenge; and exhibits proven sound independent judgment. This is the employee who always shows extra drive and devotes efforts and may often be called upon to train and assist others.

4 – Very Good/ Exceeds Expectations – Employee's performance always meets and routinely exceeds expectations in completing all primary duties and responsibilities of the position. This rating should be used for the employee who takes the initiative and dedication to go above and beyond expected job requirements.

3 – Good/Meets Expectations - Employee routinely completes the primary duties and responsibilities of the position and performance generally meets expectations. A rating of 3 should be used when the employee demonstrates they are a valued and integral member of the team.

2 – Satisfactory/Needs Improvement - Employee generally meets minimum requirements in performing the position however, performance falls somewhat short of what is expected of a trained, experienced employee. Improvement is needed.

1 – Unsatisfactory/Unacceptable - Employee routinely fails to perform primary duties and responsibilities expected of a trained individual with experience, either due to poor job fit or disciplinary issues. Employee may fail to meet established deadlines, achieve minimal goals and/or requirements. (Describe specific examples).

|                          |                                        |
|--------------------------|----------------------------------------|
| <b>Name of Director</b>  | Jessica Davies                         |
| <b>Health Department</b> | Panhandle Public Health District       |
| <b>Evaluator</b>         | PPHD Executive Committee               |
| <b>Review Period</b>     | January – June 2025 Orientation Period |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 5=Superior                          | 4=Very Good              | 3=Good                   | 2=Satisfactory           | 1=Unsatisfactory         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>HEALTH DIRECTOR'S PRIMARY DUTIES AND RESPONSIBILITIES</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>5</b>                            | <b>4</b>                 | <b>3</b>                 | <b>2</b>                 | <b>1</b>                 |
| Plans, develops, and directs programs to provide for the core public health functions of Assessment, Policy Development, and Assurance.                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>This year brought an updated Strategic Plan with board and staff input. Workgroups have been organized and are being led by a leadership team member and implemented by a cross-section of staff. We will be working on an updated CHIP in the last quarter of 2025 with surveying communities and immersed in the assessment phase in 2026.</p>                                                                                                                                                                                                                                                                   |                                     |                          |                          |                          |                          |
| Possesses necessary knowledge of the agency's history and purpose to develop and successfully accomplish the Department's programs.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>Serving at PPHD for over 21 years has afforded me many opportunities to bring the historical knowledge and context of our programs, services, and partnerships. Additionally, a strong overall retention of staff throughout the organization maintains a strong culture and environment.</p>                                                                                                                                                                                                                                                                                                                      |                                     |                          |                          |                          |                          |
| Oversees the Department and administers policies and procedures, including but not limited to the following areas; management, finance, personnel and public relations.                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>Our Senior Leadership team, comprised of Sara Williamson, Tabi Prochazka, and myself have met on a biweekly basis to ensure responsiveness as federal and state funding cuts and changes have ensued. We maintain a high level of professionalism with policies and procedures among the entire leadership team.</p>                                                                                                                                                                                                                                                                                               |                                     |                          |                          |                          |                          |
| Displays strong communication and cultural competency skills, including verbal and written, in both formal and informal situations.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>Communication continues to be a strong point of my leadership. It's critical to remain transparent and overcommunicate with the changes we've experienced. Additionally, as we have endured an internal HR misconduct violation and externally through risk communication with measles response, it remains key to maintaining trust internally and externally. I've had multiple opportunities for interviews with local and statewide media to build upon my communication and risk communication skills.</p>                                                                                                    |                                     |                          |                          |                          |                          |
| Assures financial support of the agency's programs through funding efforts, including but not limited to grants.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>While there has been federal and state funding volatility, we are continuing to position ourselves for funding opportunities with key partners and new and diversified grant funding like Sherwood Foundation. All leadership team and staff members continue fostering important partners that have generated funding and program expansion opportunities. I testified in front of the Appropriations Committee regarding the impact of the state funding cuts and have met with our federal delegation: Congressman Adrian Smith and staff members of Senator Pete Ricketts, and Senator Deb Fischer. I have</p> |                                     |                          |                          |                          |                          |

coordinated regular meetings with Sandy Roes, Director of Western Community Health Resources, and Betsy Vidlak, CEO of Community Action Partnership of Western Nebraska so we can remain a unified front and ensure the funds we each receive continue to be maximized and to be ready for how cuts impact the vulnerable populations of the Panhandle. We will be meeting with our state senators in July to ensure continued communication about funding and service impacts in their areas.

Understands and completes assignments in a timely manner and identifies new areas of concern.

☒ ☐ ☐ ☐ ☐

I maintain monthly 1:1s with each of the staff I directly oversee and work to address areas of concern as soon as they arise. Same with our weekly leadership check-ins and monthly longer leadership team meetings. Our organization has remained expedient and responsive to any areas of concern.

Represents expertise in a variety of leadership areas needed by the agency.

☒ ☐ ☐ ☐ ☐

I maintain Board presence on the Panhandle Partnership. The transition into this director role has called upon a multitude of leadership facets that I'm continuing to grow on each and every day.

**Overall Rating: Primary Duties and Responsibilities 40/40**

#### **Board Member Comments:**

First 6 months have been a very unusual period for Jessica and PPHD.

| 5=Superior                                                                                                                                                                                                                                                                                                                                                | 4=Very Good                         | 3=Good                   | 2=Satisfactory           | 1=Unsatisfactory         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| 5                                                                                                                                                                                                                                                                                                                                                         | 4                                   | 3                        | 2                        | 1                        |
| <b>ASSESSMENT (CORE FUNCTION)</b>                                                                                                                                                                                                                                                                                                                         |                                     |                          |                          |                          |
| Assesses the health status of the community and identifies public health needs, problems and concerns.                                                                                                                                                                                                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The next cycle of our Community Health Needs Assessment will take place primarily in 2026 with surveys beginning the last quarter of 2025. We are working to refine some of the surveying pieces in addition to how we can seek input from key community representatives and                                                                              |                                     |                          |                          |                          |
| Monitors the occurrence of health hazards and investigates the effect and impact on the community.                                                                                                                                                                                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| We continue data tracking through our Community Health Needs Assessment and have a variety of methods through more immediate health hazards. More recently, we've responded to the first measles case in Nebraska and last August responded to the first death from rabies that PPHD has ever had and is a rare situation in Nebraska and nationally too. |                                     |                          |                          |                          |
| Analyzes the identified risks and other factors that contribute to specific health problems and informs and educates the public on methods of prevention and care.                                                                                                                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| We continue to monitor a number of risk factors and health issues and provide public education working to mitigate risk. We maintain a regular cycle of news releases in addition to being extremely responsive to interviews, presentations, and our annual report that goes to every household in the area.                                             |                                     |                          |                          |                          |
| Recognizes public health problems or concerns, develops relative facts, formulates alternate solutions and makes appropriate recommendations.                                                                                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| We stay at the forefront and cutting edge of recognizing health problems or concerns and the impact on the communities we serve. We've continued developing internal capacity for data monitoring and sharing of data that the community can understand and engage with for the impact of particular populations.                                         |                                     |                          |                          |                          |

**Overall Rating: Primary Duties and Responsibilities 20/20**

**Board Member's comments:**

Response to measles case in Sheridan/Dawes county was very good. Full confidence in PPHD's response to any future cases.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 5=Superior                          | 4=Very Good              | 3=Good                   | 2=Satisfactory           | 1=Unsatisfactory         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>POLICY DEVELOPMENT (CORE FUNCTION)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>5</b>                            | <b>4</b>                 | <b>3</b>                 | <b>2</b>                 | <b>1</b>                 |
| Monitors public health laws, regulations, and policies to protect the people, the environment, and assure safety.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| NALHD has developed a strategic process and procedure for how state legislature bills are monitored and organizing for senator and community education. I participate in the weekly NALHD meetings during the legislative session.                                                                                                                                                                                                                                                                                                                                                                     |                                     |                          |                          |                          |                          |
| Plans and develops policies and strategies to address priority health needs by working with community constituents and groups.                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| We have processes for prioritizing health needs through the Community Health Needs Assessment and have more formally included Minority Health in the last iteration. We've worked closely with the Nebraska Minority Resource Center to conduct a specific needs assessment and have fostered critical partnerships ensuring minority populations are included. We remain highly engaged through advisory committees, coalitions, and community groups as these are key strategies for impacting population-based health alongside the community members most closely related to the concern or issue. |                                     |                          |                          |                          |                          |
| Identifies internal and external issues that may impact delivery of essential public health services.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| This is completed through the Mobilizing for Action through Planning and Partnerships process that we remain organized with through the Rural Nebraska Healthcare Network and quarterly workgroup meetings.                                                                                                                                                                                                                                                                                                                                                                                            |                                     |                          |                          |                          |                          |
| Assures compliance with federal, state, and local laws and regulations; generates appropriate reports and oversees accurate records; and monitors contractual agreements as required.                                                                                                                                                                                                                                                                                                                                                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| We strive to maintain full compliance with all applicable laws and regulations. The recent clawback of funds and the associated need for accurate invoicing and reporting presented a new challenge for our team. We are actively learning from this experience and continuously working to strengthen our processes and ensure ongoing compliance moving forward. Sara has remained active and astute in several webinars and meetings ensuring our compliance as we are navigating these times.                                                                                                      |                                     |                          |                          |                          |                          |
| Advocates for public health support and builds constituencies to identify resources and mobilize community partnerships                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Partnerships and relationships are at the core of our public health work. A guiding principle of my leadership is "nothing about us without us." Meaning, we are in lockstep with communities as we implement public health strategy together and mobilizing partnerships and resources.                                                                                                                                                                                                                                                                                                               |                                     |                          |                          |                          |                          |

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Facilitates a community process to prioritize health needs by importance, magnitude, seriousness of consequences, economic impact, and the community's ability to prevent or control the problem.

☒ ☐ ☐ ☐ ☐

These prioritizations are identified through the Community Health Needs Assessment and we have been working to implement the following areas: Behavioral Health, Housing & Homelessness, Early Childcare & Education, and Chronic Disease Prevention.

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**Overall Rating: Policy Development 30/30**

**Board Member's comments:**

Click or tap here to enter text.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 5=Superior                          | 4=Very Good              | 3=Good                   | 2=Satisfactory           | 1=Unsatisfactory         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>ASSURANCE (CORE FUNCTION)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>5</b>                            | <b>4</b>                 | <b>3</b>                 | <b>2</b>                 | <b>1</b>                 |
| Conducts research for new insights and innovative solutions to health problems, informs and educates the public and the community-at-large.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| We actively participate in research programs throughout the region, state, and nationally. The rabies case handled by PPHD last summer was written into research with the algorithm used to identify the level of risk and certainty of the individual's death from rabies. We continually monitor and keep abreast of the latest research and recommendations for evidence-based public health.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                          |                          |                          |                          |
| Implements programs and services otherwise not available, including targeting outreach and cultural barriers.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| We actively implement programs and services with targeted outreach and address cultural barriers. The following are examples of this:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                     |                          |                          |                          |                          |
| <ul style="list-style-type: none"> <li>• We have developed a self-monitored blood pressure program targeting pregnant and new moms and overall, for all populations due to the geographic area and accessing care when blood pressure drastically changes. Individuals are receiving education on what those values mean and when they need to call their provider.</li> <li>• We provided two MMR clinics in Rushville in response to the measles cases in Sheridan County.</li> <li>• We kicked off and are coordinating an Aging Population Coalition targeted at Alzheimer's and dementia resources and support in communities and for caregivers.</li> <li>• We have been working extensively trying to increase the Driver's Ed offerings in the area. In partnering with WNCC, they have offered additional classes in expanded communities, and we connected them with the Highway Safety Office to receive funds that help offset registration expenses as that was an identified barrier from a parent assessment we conducted.</li> <li>• We have increased our highway safety messaging to be more inclusive of the ag community and timing to coincide with planning, harvesting, and other times when increased ag equipment is on the road.</li> </ul> |                                     |                          |                          |                          |                          |
| Assures the Department has a competent public health workforce and evaluates the effectiveness, accessibility, and quality of the public health services.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| We had 100% staff completion in the PHWIns (Public Health Workforce Interest & Needs Survey) and will be updating our workforce development plan to address the identified areas when we receive the report in the coming months. We have multiple staff continually working to increase their professional development through completion of the UNMC MPH program: 1 graduated in May, 1 is currently taking courses, and 1 just applied for the program. Our HR Coordinator, Erin Sorensen, just completed her SHRM-CP and we have 6 Home Visitation Specialists that completed their Certified                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                          |                          |                          |                          |



Lactation Specialist certifications.

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**Overall Rating: Assurance 15/15**

**Board Member's comments:**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 5=Superior                          | 4=Very Good              | 3=Good                   | 2=Satisfactory           | 1=Unsatisfactory         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>PROGRAM DEVELOPMENT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>5</b>                            | <b>4</b>                 | <b>3</b>                 | <b>2</b>                 | <b>1</b>                 |
| Develops programs with a focus on the diversity of the population, keeping public health at the forefront.                                                                                                                                                                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>This is a continuously embedded outreach and response to ensure we are working to impact all the populations we serve. We have all communications translated into Spanish and continuously monitor community demographics for important programmatic development considerations. For example, there's a growing Amish population in Dawes County and we are working with partners that have direct relationships with them. We completed the Dr. Helen Fagan leadership series pushing the growth edge of our Leadership Team too.</p> |                                     |                          |                          |                          |                          |
| Initiates and participates in community-based projects and activities focusing on key public health issues.                                                                                                                                                                                                                                                                                                                                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>We maintain and are continually increasing ongoing partnerships in community-based projects that are relevant to each community we serve.</p>                                                                                                                                                                                                                                                                                                                                                                                          |                                     |                          |                          |                          |                          |
| Works to develop programs in the community that fit community priorities.                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>The Community Health Needs Assessment identifies community priorities for programs that fit. We have a staff member assigned to each hospital to develop and implement their hospital-specific Community Health Improvement Plan. This keeps us abreast of the community context and weaving strategies in that we knowing opportunities are on the horizon.</p>                                                                                                                                                                       |                                     |                          |                          |                          |                          |
| Develops mechanisms to monitor and evaluate programs for their effectiveness and quality.                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>We have a process for performance management with quality improvement embedded in the quarterly meetings. The most recent quality improvement was around rabies vaccinations and the payment process.</p>                                                                                                                                                                                                                                                                                                                              |                                     |                          |                          |                          |                          |

**Overall Rating: Program Development 20/20**

**Board Member's comments:**

|                                                                                                                                                                                                                                                                                                                                                                                                 | 5=Superior                          | 4=Very Good              | 3=Good                   | 2=Satisfactory           | 1=Unsatisfactory         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>FISCAL MANAGEMENT</b>                                                                                                                                                                                                                                                                                                                                                                        | <b>5</b>                            | <b>4</b>                 | <b>3</b>                 | <b>2</b>                 | <b>1</b>                 |
| Involves administrative team in the budget formulation process to best identify resources required to support the community's health needs.                                                                                                                                                                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Our Senior Leadership Team coordinates the overall budget work under the important leadership of Sara Williamson.                                                                                                                                                                                                                                                                               |                                     |                          |                          |                          |                          |
| Reviews reports to assure a balanced budget is maintained and effectively presents budget reports to the Board, others, as needed.                                                                                                                                                                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Each program manager meets monthly with Sara and I to ensure we stay in line with budgets and ongoing needs as they arise. The Board Finance committee reviews the finances in detail with Sara and I with overall review by the board at regular meetings.                                                                                                                                     |                                     |                          |                          |                          |                          |
| Remains cognizant of Auditor's annual findings and observations and recommends appropriate adjustments.                                                                                                                                                                                                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| We remain astute and responsive to any audit findings or recommendations with the independent audit conducted annually. Desk audits are conducted on a number of funding sources throughout the year at the request of the funding entity and we have not had any findings.                                                                                                                     |                                     |                          |                          |                          |                          |
| Identifies community assets and available resources and collaborates with grant writer and staff to pursue grant opportunities.                                                                                                                                                                                                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| We continue to pivot and remain open as funding changes have occurred but have leveraged new funding streams to include the Sherwood Foundation and with key partners like UNMC for new grant-funded opportunities like Centering Pregnancy that align with the important work we are implementing of Healthy Families to increase a continuum of Maternal Child Health resources and services. |                                     |                          |                          |                          |                          |

**Overall Rating: Fiscal Management 20/20**

**Board Member's comments:**

Jessica has worked hard to navigate the fiscal challenges facing PPHD.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 5=Superior                          | 4=Very Good              | 3=Good                   | 2=Satisfactory           | 1=Unsatisfactory         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>RELATIONSHIP WITH BOARD AND STAFF</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                     |                          |                          |                          |                          |
| Keeps board informed of organization activities, progress, and concerns.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I'm very proud of the fact that we have a full board, including the dentist position filled, and board members that have previously served terms and are willing to return! All staff have a role in the development of the board report that is compiled and shared with all board members to keep them abreast. We regularly offer a staff member to present on their important work at the Board of Health meetings.                                                                                                                                         |                                     |                          |                          |                          |                          |
| Provides sound recommendations and facilitates the decision-making process for the board.                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| We do our best to gather as much data, facts, and information prior to board meetings to be ready for a variety of important perspectives and input from the board of health.                                                                                                                                                                                                                                                                                                                                                                                   |                                     |                          |                          |                          |                          |
| Maintains open communication and is receptive to board member's ideas and suggestions.                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I've worked to keep the board abreast of major decisions that impact our operations like the executive order on federal funding rescission, the clawback of federal funds, and state-appropriated funding reductions. As board members share areas they are passionate about, we are able to leverage funding, partnerships, and opportunities to implement those ideas too.                                                                                                                                                                                    |                                     |                          |                          |                          |                          |
| Supervises and directs work of staff and defines duties and responsibilities.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I currently supervise 10 staff encompassing each of the leadership team members, Office Manager, and 2 nurses with Paulette's resignation. Beginning July 1, 2025, we are transitioning oversight and I will be overseeing 2 senior leadership, 1 leadership, HR Coordination, and Office Manager. Tabi Prochazka will be transitioning to the Assistant Health Director and will be overseeing 3 leadership team members, immunization staff, and 2 positions she has currently been overseeing. We maintain up-to-date job descriptions and update as needed. |                                     |                          |                          |                          |                          |
| Encourages staff development and maintains open communication.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| This is central to my leadership. We meet virtually every Monday morning and quarterly in-person with all staff. Leadership meets weekly for 1 hour and monthly for roughly 4 hours. I have monthly 1:1s with the staff I directly oversee and biweekly with Senior Leadership. Internal teams meet on a regular basis and people are able to quickly connect through Zoom or Teams with any questions or support they need.                                                                                                                                    |                                     |                          |                          |                          |                          |
| Implements and develops standard assessment of employee's performance.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| We conduct annual performance appraisals for every staff member and each new staff member has a 90 day performance evaluation too. The process has been more streamlined through our new HR platform BambooHR.                                                                                                                                                                                                                                                                                                                                                  |                                     |                          |                          |                          |                          |

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Delegates effectively and plans well in advance for a successful and cohesive operation.



We are a strengths-based environment and work to delegate and grow staff as important tasks and functions arise through planning and communicating effectively.

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**Overall Rating: Relationship with Board and Staff 35/35**

**Board Member's comments:**

.

5=Superior    4=Very Good    3=Good    2=Satisfactory    1=Unsatisfactory

### COMMUNITY AND PUBLIC RELATIONS

|                                                                                                                     | 5                                   | 4                        | 3                        | 2                        | 1                        |
|---------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Develops working relationship with local, state and federal agencies, and community organizations to effect change. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Relationships are key to our public health work. We maintain coordination and involvement in innumerable local, regional, and statewide coalitions, workgroups, and community groups working to effect change. I have worked diligently cultivating relationships and communication streams with our state senators and federal representatives.

|                                                                     |                                     |                          |                          |                          |                          |
|---------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Keeps appropriate people informed on progress or issues of concern. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|---------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

We work hard to ensure people are kept informed of issues or concerns. We do this internally through our organized structures. Externally, information is disseminated through committees, workgroups, and coalitions. We regularly issue news releases, electronic newsletters, and the annual report.

|                                                                                                                                                  |                                     |                          |                          |                          |                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Ability to work with a variety of groups and organizations in the Community; including County Commissioners, City Council, Trustees, and others. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

We work with nearly every sector in multiple facets throughout the communities we serve. Our Board of Health is representative of County Commissioners, and we work with counties and cities through the Active Living initiatives, radon, West Nile Virus, Purple Air monitors, and other Environmental Health initiatives.

|                                                                                                                                  |                                     |                          |                          |                          |                          |
|----------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Participates in organizational related activities, including after hour events, and others, for the benefit of the organization. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|----------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

We are continually assessing community events and what public health initiatives are key to disseminating and in which communities. We work hard to ensure equitable representation geographically at communities and distribution among staff as well.

|                                                                                                                                                              |                                     |                          |                          |                          |                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Utilizes leadership, team building, negotiation, and conflict resolution skills, to build community partnerships with all constituents within the community. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

I cannot say enough how grateful I am to work in the Panhandle. The Panhandle has an underlining agreement of collaboration and incredible working relationships. This is seen throughout our organization and in a multitude of community sectors. As situations arise, we work to quickly respond and mitigate any issues of concern. Staff are continually reminded that nothing is ever worth the risk of losing a partner or relationship.

|                                                                                 |                                     |                          |                          |                          |                          |
|---------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Promotes and represents the organization in a positive and professional manner. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|---------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

It is a guiding principle of my leadership and values that I maintain high levels of professionalism, humility, and servant leadership.

**Overall Rating: Community and Public Relations 30/30**

**Board Member's comments:**

Progress update on goals for performance period Jan-June 2025:

|                                                                                                                                                                                                                                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>Goal 1:</b> Click or tap here to enter text.</p> <ul style="list-style-type: none"> <li>a. Click or tap here to enter text.</li> <li>b. Click or tap here to enter text.</li> <li>c. Click or tap here to enter text.</li> </ul> |
| <p><b>Goal 2:</b> Click or tap here to enter text.</p> <ul style="list-style-type: none"> <li>a. Click or tap here to enter text.</li> <li>b. Click or tap here to enter text.</li> <li>c. Click or tap here to enter text.</li> </ul> |
| <p><b>Goal 3:</b> Click or tap here to enter text.</p> <ul style="list-style-type: none"> <li>a. Click or tap here to enter text.</li> <li>b. Click or tap here to enter text.</li> <li>c. Click or tap here to enter text.</li> </ul> |

Goals for upcoming performance period July 2025 – June 2026:

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>Goal 1: Remain nimble and innovative with our current funds and opportunities to leverage additional funds.</b></p> <ul style="list-style-type: none"> <li>d. Continue fostering important relationships with state senators and state and local partners to diversify funding.</li> <li>e. Maintain strategic capacity for funding directions and positioning for key opportunities.</li> <li>f. Keep informed of federal and state budgets, how they will impact PPHD, and keep our Leadership Team aware of any potential staffing or project changes as needed.</li> </ul> |
| <p><b>Goal 2: Implement the career ladder process.</b></p> <ul style="list-style-type: none"> <li>d. Review the staff survey and leadership team focus group findings from the UNMC Applied Practice Experience (APEX) students to guide the important next steps.</li> <li>e. Facilitated process with the leadership team to develop consensus and direction.</li> <li>f. Implementation of the findings.</li> <li>g. Evaluation of the process and findings.</li> </ul>                                                                                                           |
| <p><b>Goal 3: Grow the Maternal Child Health programmatic focus.</b></p> <ul style="list-style-type: none"> <li>d. Maintain budgetary and staff capacity for MCH growth opportunities.</li> <li>e. Assess hospital interest and begin the implementation of the Centering Pregnancy Program.</li> <li>f. Seek additional MCH opportunities that align with public health and existing or new initiatives.</li> </ul>                                                                                                                                                                 |
| <p><b>Goal 4: Champion immunizations as a critical public health strategy.</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <ul style="list-style-type: none"> <li>a. Maintain strong, evidence-based communications on immunizations.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <ul style="list-style-type: none"> <li>b. Increase staff opportunities for sharing education, best practices among the Panhandle Immunization Coalition, partners, and communities regarding immunizations.</li> </ul>                                                                                                                                                                                                                                                                                                                                                               |
| <ul style="list-style-type: none"> <li>c. Ensure continuity of onsite and external offerings.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |

**Overall Performance Rating: 210/210**



**Board Member's Overall Performance Comments:** No additional comments.

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**Board Signature**

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**Director Signature**

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**Title and Date**

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**Title and Date**



**2024 ANNUAL REPORT**  
**OF THE**  
**2024-2026**  
**NEBRASKA PANHANDLE**  
**COMMUNITY HEALTH**  
**IMPROVEMENT PLAN**

*live, learn, work, and play*



*For a Healthier Panhandle*

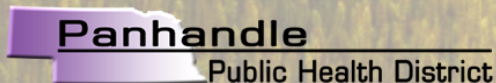


**Published by**  
Panhandle Public Health District

**Created in collaboration with**  
The Nebraska Panhandle  
Panhandle Partnership  
Box Butte General Hospital  
Chadron Community Hospital  
Gordon Memorial Hospital  
Kimball Health Services  
Morrill County Community Hospital  
Regional West Garden County  
Regional West Medical Center  
Sidney Regional Medical Center  
Nebraska Department of Health and Human Services  
Rural Nebraska Healthcare Network

**For more information**  
[www.pphd.ne.gov](http://www.pphd.ne.gov)

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## Introduction

Every three years, we come together in the Panhandle to complete a Community Health Needs Assessment and Community Health Improvement Plan. During 2023, people across the region worked collaboratively to review data, share concerns and strengths of our communities, and identify priority areas that we can work on to improve the health status of all people living in the Panhandle. Mobilizing for Action through Planning and Partnerships (MAPP) was the planning process. The ultimate goal of MAPP is optimal community health – a community where residents are healthy, safe, and have a high quality of life.

There are six key phases, including four assessments, in the MAPP process:

1. Organize for success/Partnership development
2. Visioning
3. Four MAPP assessments
  - a. Community Themes and Strengths Assessment (CTSA)
  - b. Local Public Health System Assessment
  - c. Forces of Change Assessment
  - d. Community Health Status Assessment
4. Identify Strategic Issues
5. Formulate Goals and Strategies
6. Take Action (plan, implement, and evaluate)

Panhandle Public Health District partnered with hospitals, health systems, and social service partners to complete the assessment. The public was encouraged to participate throughout the process through surveys, focus groups, and participatory planning processes.

## Priority Areas

Using the information from all four assessments, the following priority areas were identified:

1. Access to Mental Health Services
2. Affordable Housing
3. Cultural Awareness and Support
4. Childcare
5. Community Education



Background data for each priority area can be found in the Panhandle Community Health Assessment, available on at <https://dashboards.mysidewalk.com/pphdcommunityhealthdashboard>

## Objectives & Strategies

Objectives and strategies were selected by taking the following into consideration:

- Urgency of the problem
- Availability of resources
- Community readiness
- Data-support

The original activities and strategies are in the 2024-2026 CHIP document at [www.pphd.ne.gov](http://www.pphd.ne.gov). Revisions to the objectives and strategies are throughout this annual report, in each section, and in the appendices.

## Activities

Specific activities for the strategies in each priority area are reviewed in each section.

## Goal Setting

The goals in this cycle of the community health improvement work are based on programmatic outcomes. These outcomes help us to measure how much we are doing. A three-year time frame is difficult for showing large systems change year to year so the data will be analyzed in each Community Health Assessment. Data is updated as it becomes available on the dashboard.

## Revisions

Revisions to the CHIP consider the feasibility and effectiveness of the strategies and/or changing priorities, resources, or community assets. Revisions will be noted throughout the document.

Revisions may be based on:

- Achieved activities,
- Implemented strategies,
- Changing health status indicators,
- Newly developing or identified health issues, and
- Changing level of resources.

## Tracking progress

Throughout the document you will notice tables representing the progress made on each of the objectives in the CHIP.

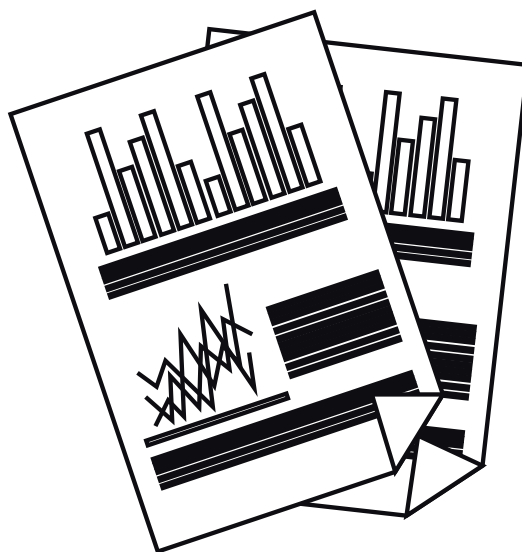
- Red dot= no progress
- Yellow dot= some progress
- Green dot = accomplished



An explanation of each dot is included in the table next to the dots.

## Data Collection

Data is collected as it becomes available and is used to update the CHA dashboard. You can find the dashboard under data and statistics on the PPHD website. In this document, you will learn more about the actions taken to improve the community's health over the past year.



## CHIP Priority Area Work Groups

The work groups for Behavioral Health and cultural awareness and support meet as project opportunities arise.

The workgroup for Early Childhood Care & Education is comprised of the Systems of Care Birth-Eight work group that functions through the Panhandle Partnership. This work group meets once per quarter in person, with an option to call in, and is made up of representatives from various early childhood care and education agencies across the Panhandle, such as Sixpence, Early Head Start, ESU 13, Healthy Families, and more. A representative from Panhandle Public Health District attends these meetings.

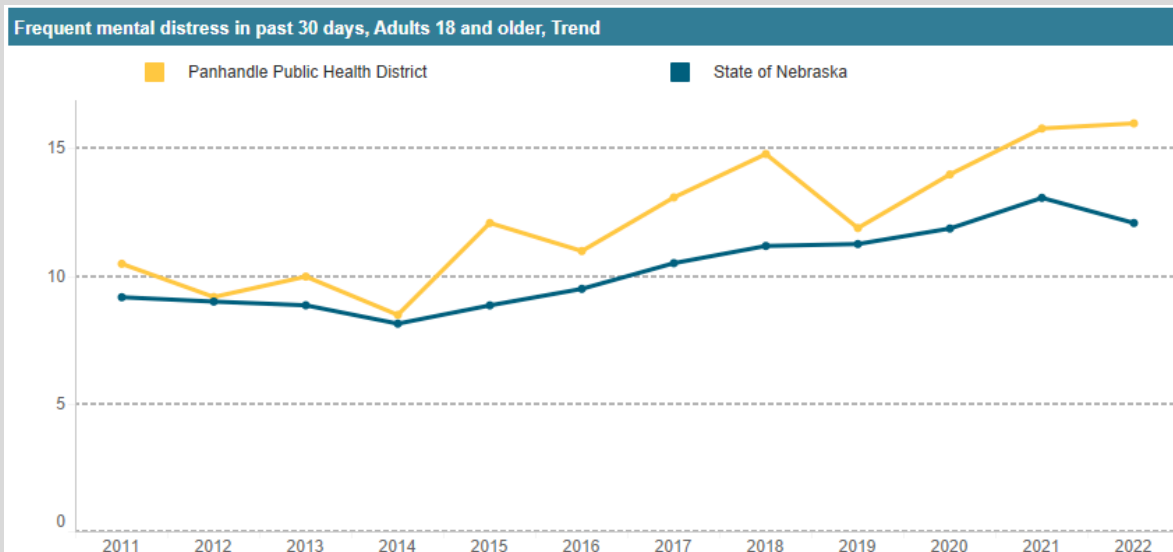
The workgroup for Housing and Homelessness is comprised of the Continuum of Care work group, which is organized by a coalition of non-profits that support rehousing efforts in the Panhandle. Participating non-profits include United Way, CAPWN, Region 1 Behavioral Health, Cirrus House, and others.





## Priority Area 1: Access to Mental Health Care

### Snapshot



The rate of frequent mental distress has been increasing in the panhandle since 2011 and the region has had consistently higher rates than the state between 2011 and 2022. The CHA outlines additional mental health data in more detail. Mental health has been identified as an important factor in the community well-being for the last three cycles. The severity has increased since the pandemic hit. Access to mental health allows people to seek treatment for their conditions without worry of cost or long wait times which increase the likelihood someone will let their condition go untreated.



## Priority Area 1: Behavioral Health

# Our Journey to Increase Access to Mental Health Care in the Panhandle

## Regional Mental Health Planning

In April 2024, a group of around 50 partners met to discuss mental health priorities in the Panhandle with DHHS representatives. In August 2024, a subset of that group convened again to determine strategic priorities. From this meeting, three priorities were determined:

- Develop a Crisis Stabilization Center
- Improve retention and recruitment of mental health professionals
- Increase diversity of mental health services in the Panhandle

During a follow-up meeting, several collaborative partners decided to work together to bring crisis stabilization to the region. A letter of support was also drafted in preparation of moving forward with the crisis stabilization efforts.

## Local Mental Health improvement Spotlights!

- Three area hospitals trained staff in QPR or mental health first aid
- Box Butte General Hospital sends credible minds information home with patients in their discharge packets
- Two hospitals have been partnering with their local schools to increase referrals to mental health resources and same-day services for youth
- Three hospitals increased their collaboration with local partners to improve mental health referral processes

## Situation Table wins Model Practice at NACCHO!

The situation table has been operating since August 2022. This project is a weekly meeting between service providers. Each week service providers can bring an individual or family who has acutely elevated risk factors. These individuals or families are then connected to services within 1-2 weeks. The table has seen over 100 situations and over 75% of the situations brought to the table have been connected to services. Box Butte General Hospital, an early partner in the table, has even started meeting directly with the partners they most often referred patients to. This increases the efficiency of service delivery ensuring that people's needs are met as efficiently and with as much dignity as possible. The Model Practice Award recognizes the Situation Table on the national stage for its innovative, outstanding, and significant work. In the past year the table has also seen an increase the average number of partners on the call each month.

## Priority Area 1: Behavioral Health

## Credible Minds

Credible Mind is a free online tool chest with resources that are evidence-based on a wide-range of mental health topics. All of the hospital partners agreed to help distribute flyers to physician rooms to increase exposure to the tool.

In 2024

- There was 531% increase in unique users
- There was 23% increase in registered users
- There was 414% increase in the number of sessions

Most of the growth happened after the hospitals shared the tool.

## Increasing Capacity

Another way we have increased capacity over the past year was to provide training to service providers focused on improving their skills working with people suffering from a mental crisis.

In 2024






- 8 Schools hosted a Hope Squad (peer support for young people struggling with their mental health)
- 17 QPR trainings were offered
  - 161 people were trained
- 48 people were trained in Mental Health First Aid
- 8 people were trained in Wellness Recovery Action Plans

## Addiction Recovery Symposium

In April of 2024, the Panhandle Prevention Coalition brought in guest speaker David Stoecker to talk about overcoming addiction and how to support people overcoming addiction. The event brought together service providers, including mental health professionals, to hear the personal story and evidence-based advice from someone who lived through it.

There were 35 people in attendance. 100% felt the quality of the program was good. Participants reflected that hearing about substance use from the perspective of someone who had gone through it was the most valuable part of the experience for them. 89% of participants were excited to tell their colleagues about the event in the future.

# Priority Area 1: Behavioral Health

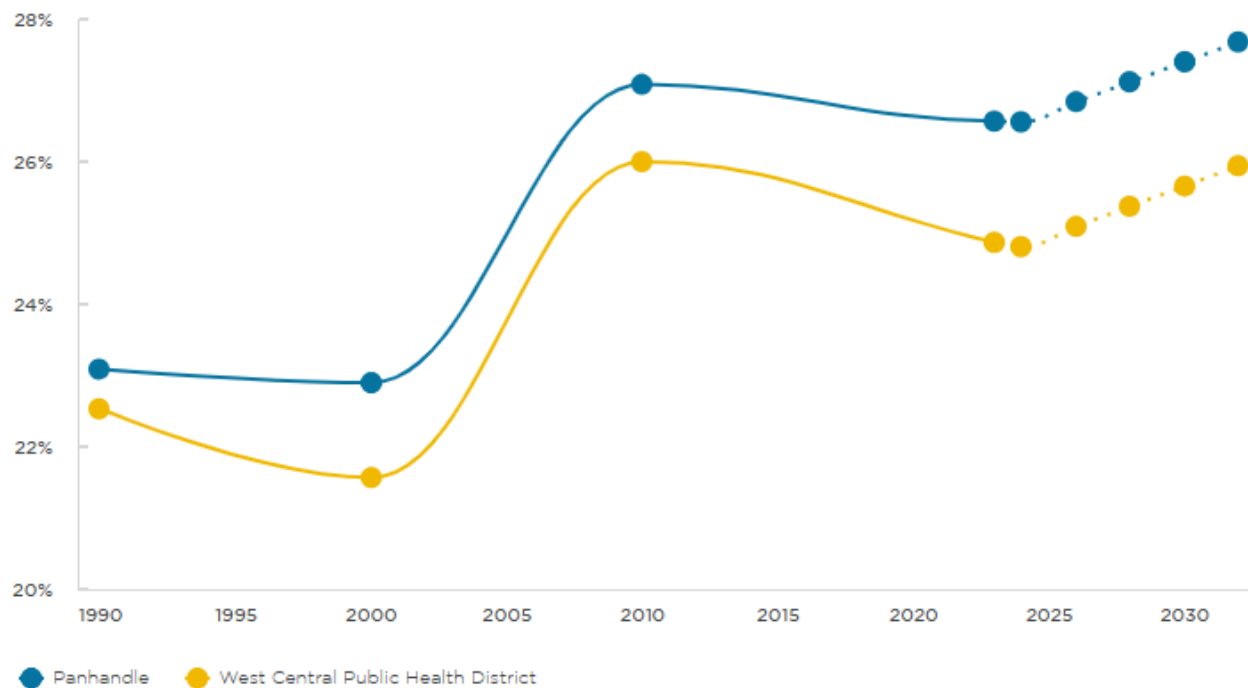
| Objective                                                                                                    | Indicator                                                                         | Status                                                                               | Explanation of status                                                                                                                   |
|--------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| Develop an incentive program for rural mental health providers                                               | Increase mental health providers in region                                        |    | During the regional collaborative meeting this was found to be a lower priority than crisis stabilization, so not much has happened yet |
| Collaborate to retain mental health providers                                                                | Increase mental health providers in region                                        |    | During the regional collaborative meeting, this was found to be a lower priority than crisis stabilization so not much has happened yet |
| Grow programs to support young people who want to go into mental health                                      | Programs are developed to support young people in pursuing a mental health career |  | During the regional collaborative meeting, this was found to be a lower priority than crisis stabilization so not much has happened yet |
| Pursue funding to grow and develop regional mental and behavioral health resources                           | Pursue funding to grow and develop regional behavioral health resources           |  | During the regional collaborative meeting, a sub-group was formed to begin developing the grant application                             |
| Provide technical assistance to each community working to improve the capacity of their mental health system | Increase the number of mental health programs in the region                       |  | Several hospitals have increased collaboration efforts to expand the capacity of mental health in their communities                     |

## Priority Area 1: Behavioral Health

## Priority Area 2: Housing & Homelessness

### Snapshot

**Median Selected Costs as a Percentage of Income**



Sources: US Census Bureau; US Census Bureau ACS 5-year

*This dataset represents the median selected monthly ownership costs as a percentage of household income.*

Housing in the Panhandle is a persistent challenge that is becoming more difficult due to rising construction costs and aging infrastructure. The availability of affordable housing is often cited as a major reason why there is a workforce shortage in the Panhandle. Inflation during the COVID-19 pandemic has inflated this challenge further. One-third of area workers are classified as low-wage workers. All of these factors contribute to the affordability of housing in the Panhandle. The widely recognized marker for measuring the affordability of housing is to calculate the percentage of household income spent on housing. Costs exceeding 30% of the household income are considered excessive, and the household is considered to be housing-burdened. The median home ownership costs are 26% of the household income on average in the Panhandle.

# Our Journey to Increase Access to Housing in the Panhandle

## Panhandle Coalition for Housing and Homelessness

The coalition for housing and homelessness meets monthly to discuss opportunities for partnership, advocacy, and to share information. During the summer of 2024, a homeless encampment formed outside of Lakota Lutheran Center following the use of the space as a cooling shelter. The coalition shared responsibility to send a service provider each week to meet with people on site. CAPWN and Cirrus House were successful in rehoming most of the individuals interested in moving into transitional or more permanent housing.



## Land Banks in the Panhandle!

Land Bank is an economic development tool that allows a diverse group of interested citizens who have the backing of their community to acquire properties and then the group prepares the property to be sold to a developer. They may stabilize a roof or demolish a building or deal with weed pressure to make the property more easily developable. Communities who have adopted the tool of Landbank:

- Kimball
- Gering
- Bayard
- Bridgeport

Hospitals are helping to advocate in communities that don't have Land Bank to encourage their communities to participate.

## Priority Area 2: Housing and Homelessness



## Lead Remediation Work and Redevelopment

Panhandle Public Health District was awarded a HUD grant in April of 2024. This grant is a capacity building grant which has the potential to lead to a larger renovation grant. This grant will allow PPHD to train contractors to be lead remediation certified and will develop internal capacity to support a larger lead remediation contract. Lead poisoning can lead to negative behavioral health outcomes, brain and nervous system challenges, and developmental challenges. In 2024, PPHD;





- Inspected 15 homes for lead hazards
- Provided 16 educational communications



## Radon

Radon is the second leading cause of Lung cancer in the United States. Radon is naturally occurring and half of radon tests in Nebraska are above the action level of 4.0 pCi/L. All Panhandle residents have access to free test kits. In our efforts to improve quality housing stock in the Panhandle, PPHD advertises radon kits each year in our annual report. In 2024, the radon advertisement was available in Spanish. 228 kits were distributed.

## Priority Area 2: Housing and Homelessness

| Objective                                                                                          | Indicator                                                                     | Status                                                                               | Explanation of status                                                                                                                                                                                                                                             |
|----------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Partner with community economic development groups to advocate for diverse housing stock           | Increase adoption of zoning that supports diverse housing stock               |    | This has not been a priority for the economic group, the main priority has been construction of new units                                                                                                                                                         |
| Partner with communities to improve opportunities for redevelopment                                | Communities participate in a landbank                                         |    | The Northern Panhandle communities have met with professionals to explore this opportunity. Their hospital will be approaching city council. The Southern Panhandle communities have formed two landbanks. One for Morrill County and one for Kimball and Gering. |
| Work with communities to develop policies to support the growth and development of ethical rentals | The number of quality and affordable rentals increases                        |  | There are several bills under consideration in the legislature in 2025 that may impact rental quality and affordability. These bills were discussed in the housing workgroup and in the economic development workgroup.                                           |
| Support safe housing environments *                                                                | Increase the number of homes participating in radon and lead testing programs |  | HUD funding was secured in 2024, this will allow us to test more homes who don't fit into other programs                                                                                                                                                          |

## Priority Area 2: Housing and Homelessness

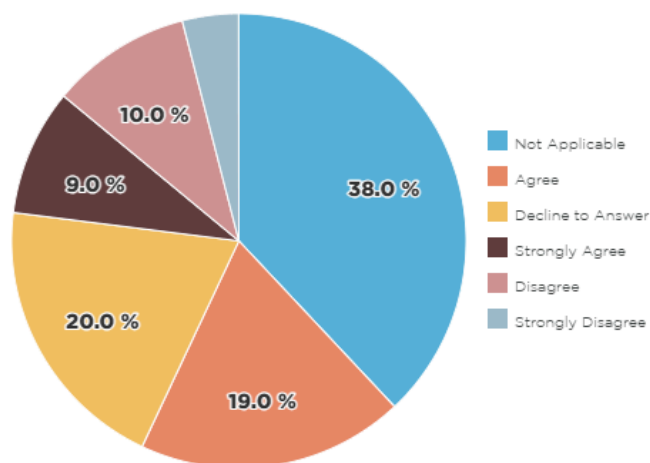




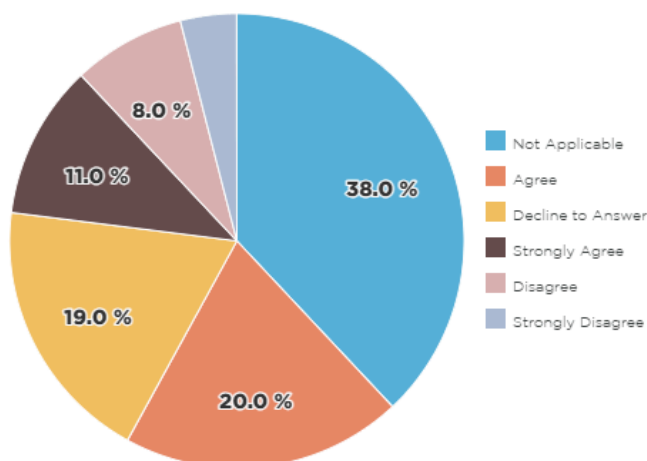
## Priority Area 3: Early Childhood Care & Education

### Snapshot

I have access to affordable childcare.



I have access to quality child care.



During the first five years of a child's life, their brains are rapidly developing. Having quality early childcare environments ensures that children are given the best opportunity to build the skills they will need to carry them through life.

Childcare has shown up on the last three community health improvement plans. There is a critical gap in childcare, 19% of community members felt they did not have access to quality and affordable childcare services. The most common challenges employers in the area have in retaining and attracting employees are the housing shortage and lack of childcare options. The hospitals are the largest employers in many of the region's communities and childcare has been a key challenge in improving their capacity to serve the region's healthcare needs. Childcare is a priority among the economic development plans in the region for these reasons.

## Priority Area 3: Early Childhood Care & Education

# Our Journey to Increase Access to Childcare in the Panhandle

## Hospitals Expanding Opportunities for Childcare

Several panhandle hospitals have developed childcare programs for their staff to increase access in their community. Their facilities are all “Step up to Quality” facilities, which means they are participating in a rating program that helps families choose quality childcare in the Panhandle. By participating in the rating system, they are showing their commitment to quality childcare.

- Morrill County Community Hospital has a childcare facility that can serve 30 children
- Box Butte General Hospital has a childcare facility that can serve up to 40 children
  - They have achieved a rating of Step 2
- Gordon Memorial Hospital has a childcare facility that can serve up to 45 children and is open for general community members as long as capacity allows

## Expanding Communities for Kids in Western Nebraska




Communities for Kids is a coalition building project that helps communities organize around childcare challenges to enact change. Currently the following communities are participants:

- Gering
- Garden County
- Cheyenne County
- Panhandle Region
- Bayard
- Kimball County
- Box Butte County
- Bridgeport
- Morrill

## Systems of Care 0-8

The systems of care 0-8 team is a workgroup supported by the Panhandle Partnership. The workgroup serves as a connecting point among childcare partners and those who support childcare workers. Several members of the group were trained as childcare advocates by First Five Nebraska so they could approach our legislature to advocate for childcare access. The group meets quarterly. In 2024, the group supported a pilot project from the state to coordinate the support systems for childcare facilities in a more consistent way. Participants gave feedback in a focus group and then had the data shared back with them during the last meeting of the year.

## Priority Area 3: Early Childhood Care & Education

| Objective                                                                                                                    | Indicator                                                                                              | Status                                                                               | Explanation of status                                                                                                                                                                                          |
|------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Provide technical support to each community working to improve capacity or quality of their childcare programs in the region | Increase the number of thriving childcare programs in the region                                       |    | Gordon Memorial and Morrill County Community Hospitals both opened childcare facilities                                                                                                                        |
| Identify childcare stakeholders and champions to include in collaborative efforts                                            | Multi-sectoral partnerships meet regularly and are able to take collective action to support childcare |    | Two communities joined communities for kids, economic development partners have been participating in the Gering Communities for Kids                                                                          |
| Build understanding and skills among partnerships about advocacy around childcare                                            | More childcare facilities can take vouchers, expanding access to quality care                          |  | Several members of the systems of care 0-8 were trained in First Five advocacy work and have been providing updates on the status of different policies related to childcare that the group should be aware of |

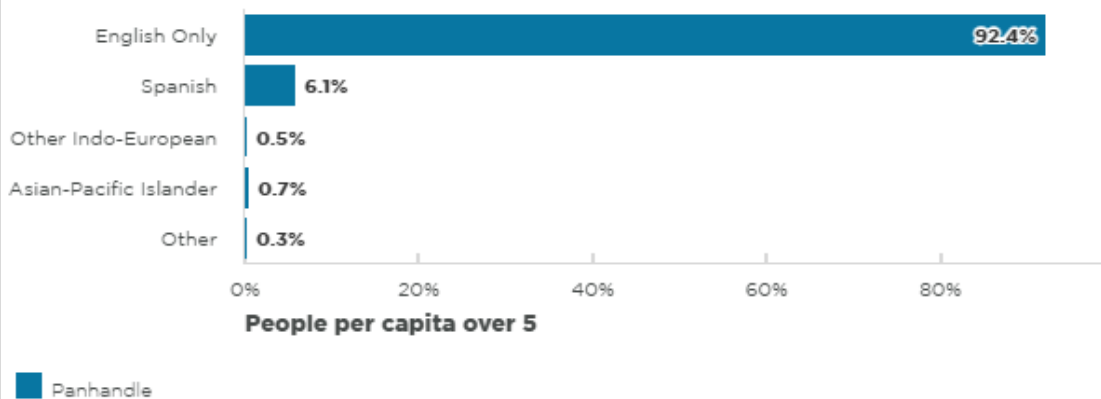


## Priority Area 3: Early Childhood Care & Education

## Priority Area 4: Improve Cultural Awareness and Support

### Snapshot

#### Language Spoken at Home



Sources: US Census Bureau ACS 5-year 2019-2023

Health disparities are the differences in health outcomes based on factors not directly related to the health outcome itself. For example, the Hispanic and Native populations in the Panhandle have higher rates of diabetes than the White population, there is a disparity in diabetes outcomes based on race. Disparities can also occur on a geographical basis. In the panhandle we experience higher rates of cancer than the statewide average.

Health disparities can be caused by a number of factors including access to care, health literacy, environmental exposures, chronic stress, and income levels. One of the factors commonly brought up during the

## Increasing Access to In-person Interpretation in the Panhandle

Through the Office of Health Disparities, we were able to fund four community members to receive medical interpreter training. With this training, they will have the qualifications to become certified interpreters after taking a test. Increasing the capacity within our community to serve the residents with stronger interpretation resources is a major aspect of increasing access.

### *Local examples*

Box Butte General Hospital has an interpretation system, but in order to maximize its usage, they have shared it with staff and have added sign language interpretation.






Chadron Community Hospital went through coaching with Dr. Fagan for a year to gain insights into better service provision for diverse communities.

Gordon Memorial Hospital has been working to ensure all critical documents have been translated.

Morrill County and Sidney Regional have been collaborating to create a welcome packet for new employees from other countries.



## Priority Area 4: Cultural Awareness and Support

| Objective                                                                                                | Indicator                                                                                         | Status                                                                               | Explanation of status                                                                                                |
|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|
| Develop a training to educate and advocate for the benefits of in-person interpretation                  | Increase the number of community members who have access to in-person interpretation              |    | This has not started                                                                                                 |
| Grow access to deaf interpreters                                                                         | Increase the number of in-person deaf interpreters in the region                                  |    | Box Butte General Hospital has investigated this possibility and has gotten a virtual deaf interpreter               |
| Provide technical support for hospitals working to improve their offerings in multiple languages         | Increase the approval rating among non-English speaking patients                                  |   | We offered opportunities to discuss language access during several meetings and we finished coaching with Dr. Fagan. |
| Create a bank of training opportunities for employers looking to create more equitable work environments | Increase the number of workplaces that engage in training to make their workplaces more equitable |  | Megan presented training to 5 worksites in 2024.                                                                     |
| Collaborate across workgroups to align strategies for creating welcoming communities                     | Increase the number of people who feel like they belong                                           |  | This has not started                                                                                                 |

## Priority Area 4: Cultural Awareness and Support

## Priority Area 5: Community Education and Awareness

This priority is the supportive component to the rest of the priorities. The focus in this area was to create infrastructure that would support the work happening in the other priority areas. At the community level, this priority area encouraged partner hospitals to explore areas of their services or community services that weren't widely known in the community. This priority helps to build capacity for the work we all need to do together to improve the community's health.

### Technical Assistance

Each hospital has an assigned TA from PPHD who meets with them twice yearly to support their work in their local community health improvement plans. The TAs help collect data that filters into this report. TAs are also available to connect hospitals with other community partner agencies who can support community health improvement.

### Local Projects to Increase Community Awareness of Health Information and Resources

Box Butte General did this by updating their website to be more user-friendly.




Chadron Community Hospital did this by requesting additional staff to participate in the Panhandle Situation Table, sharing mental health information on social media and the radio, and discussing mental health legislation.

Kimball Health Services did this by sharing Credible Minds information in their newsletter, as well as a list of resources available at the nurse's station. They also wanted to increase community awareness of the importance of health screenings by improving doctor/patient communication about screenings.

Gordon Memorial Health did this by hosting community awareness months for suicide prevention and other topics.

Morrill County Community Health did this by hosting a QPR training, adding credible minds to their website, and by sharing resources with staff.

Sidney Regional Medical Center did this by sharing community theme months (heart health month, colon cancer awareness, etc.) and by having their community navigator attend other community meetings to facilitate collaboration.

| Objective                                                                                                             | Indicator                                                                                                                                                                | Status                                                                               | Explanation of status                                                                                                                                                         |
|-----------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Create policy advocacy guidelines for the regional collaborative                                                      | The regional collaborative will advocate for at least one large issue connected to the community health improvement plan each year                                       |    | Policy updates have been a part of each work group and we are developing ways for us to share information.                                                                    |
| Develop communities of practice around specific strategies shared by area hospitals                                   | The hospitals will gain confidence and skills to carry out the strategies outlined in their Community Health Improvement Plans                                           |    | Technical assistance for each hospital has been offered, TA's meet with hospitals twice per year to provide resources and make connections with other agencies as appropriate |
| Share findings of the CHIP and CHA with other community entities going through strategic planning to ensure alignment | The regional collaborative will review CHIP workplan against community strategic plans yearly to ensure continued alignment and identify opportunities for collaboration |  | This has not happened yet                                                                                                                                                     |

## Priority Area 5: Community Education and Awareness



