

Southwest Nebraska Public Health Department



List of Reportable Diseases in United States

- AIDS
- Anthrax
- Bacillus anthracis
- Botulism
- Clostridium botulinum
- Chancroid
- Haemophilus ducreyi.
- Chlamydia trachomatis
- Cholera - Vibrio cholerae.
- Coccidioidomycosis
- Coccidioides immitis.
- Cryptosporidiosis
- Diphtheria
- California encephalitis virus
- Eastern equine encephalitis
- St. Louis encephalitis
- Western equine encephalitis
- Escherichia coli O157:H7
- Gonorrhea
- Haemophilus influenzae
- Hansen's disease (Leprosy)
- Hantavirus
- Hemolytic uremic syndrome
- Hepatitis A, Hepatitis B
- Hepatitis, C/non-A, non-B
- HIV infection
- Legionellosis
- Lyme disease
- Malaria
- Measles
- Meningococcal disease
- Mumps
- Pertussis
- Poliomyelitis, paralytic
- Psittacosis
- Rabies
- Rocky Mountain spotted fever
- Rubella
- Rubella, congenital syndrome
- Salmonellosis
- Shigellosis
- Group A Streptococcal disease
- Streptococcus pneumoniae,
- Syphilis
- Tetanus
- Toxic shock syndrome
- Trichinosis
- Tuberculosis
- Typhoid fever
- Yellow fever

Disease Surveillance

Physicians, hospitals, and laboratories are required by law to submit reports of communicable diseases and other situations that pose a threat to the health of the public. This information is submitted to Nebraska Health and Human Services Systems (NHHSS) where it is tracked and monitored; follow-up is conducted and then reported to the Centers for Disease Control and Prevention (CDC). Examples of reportable cases include lead poisoning, hepatitis, pertussis (whooping cough), tuberculosis, food-borne illnesses, and many others.

Southwest Nebraska Public Health Department (SWNPHD) participates in this process through the National Electronic Disease Surveillance System (NEDSS). NEDSS is a secure, web-based system developed by the CDC, to improve the public health monitoring of diseases and improve the responses to possible health emergencies.

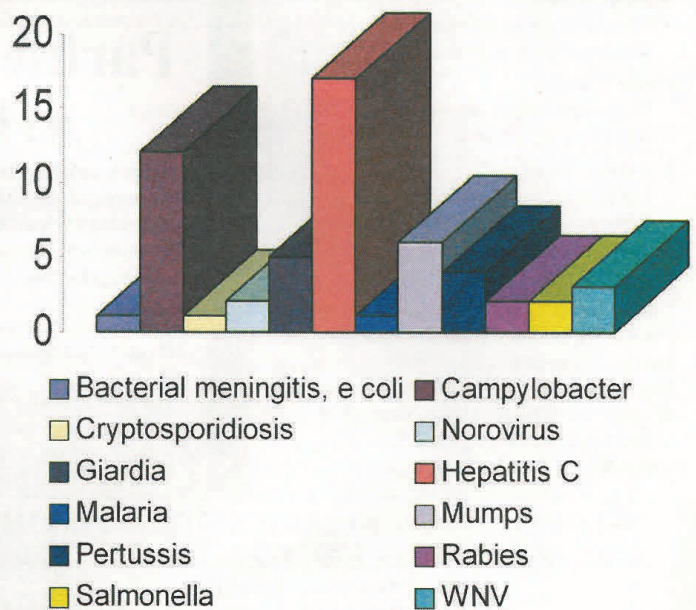
NHHSS enters reportable cases into NEDSS. The health department monitors NEDSS cases in the health district which need follow-up. The surveillance nurse or another employee contacts the patient, physician, laboratory, hospital or other partners in obtaining information pertinent in the case. Educational materials and resources are shared with the partners. The partners work together to ensure that the case is not spread to other persons and

that all parties are properly notified of the case. If the case meets certain criteria, a report is sent through NEDSS to the CDC.

All information obtained in a case is considered confidential. Information may be shared among the partners to ensure

case accuracy. The health department and the state use the information to track outbreaks of disease or other health emergencies. Notification is then given to other health officials in the community if needed, and the public may then be educated on the outbreak.

Communicable Diseases Investigated



Inside

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Our Mission

Southwest Nebraska Public Health Department, in partnership with other entities, is to promote a healthy and secure quality of life for our communities.

Board of Trustees

The governing board for the Southwest Nebraska Public Health Department is composed of one county commissioner and one public-spirited person for each of the eight counties, plus one physician and one dentist.

Currently serving:

Chase County:

Joe Johnston, Commissioner
Lola Jones, Board Vice President,
Hospital Administrator

Dundy County:

Scott Olson, Commissioner
Rita Jones, Hospital Administrator
Douglas Peckham, DDS

Frontier County:

Kevin Owens, Commissioner
Pat Dizmgang, LPN

Furnas County:

Bill Lewis, Commissioner
Roland Morgan, MD, Retired

Hayes County:

George Miller, Commissioner
Marilyn Anderjaska, Board Secretary/
Treasurer

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Scott McDonald, Commissioner
Kathleen Jankovitz, Banker

Perkins County:

Michael Perlinger, Commissioner
Ann Regier, RN, Retired

Red Willow County:

Earl McNutt, Commissioner
Karen Ackermann, RN, Board President
Toby Free, MD

Past Members:

Chase: Richard Hamilton, Jodi Thompson

Dundy: Gary Stamm, Marcia Ernest

Furnas: Clinton Olmsted

Hitchcock: Leila "T" Herzog, Dale Keeney

Perkins: Carol Kraus, Marvin Swan, DDS,
Mary Buss

Red Willow: Chris Nix, DDS



Message From the President Needs Assessments

Earl McNutt - Former Board President & Red Willow County Commissioner

In February 2004, a needs assessment was conducted of 653 residents randomly selected in Chase, Dundy, Frontier, Furnas, Hayes, Hitchcock, Perkins and Red Willow counties. The assessment was performed through a telephone survey. Respondents were 18 years and older, identified through random digit dialing, and selected to ensure demographic representation. A minimum of 50 residents was selected from each county.

Topics explored in the interviews were:

- Putting Health in Perspective
- Health Status
- Services for Special Groups
- Access to Care (Health Insurance and Medical/Dental/Pharmacy Services)
- Access to Other Services
- Sources of Information and Topics of Interest
- What Does a Local Health Department Do?

Results of the Survey:

- Residents value the size of their communities, the caring, friendly people, and the peace and quiet.
- Residents are concerned about water pollution, the water shortage made worse by the current drought, the lack of businesses, and the associated unemployment.
- Residents are concerned about the declining population.
- When asked about community health problems, cancer is most often cited.
- When presented with a list of 10 possible community concerns, drug abuse, alcohol abuse, and water pollution were each selected by more than 60% of the respondents.

The Board of Trustees met in March of 2005 and developed a strategic plan to help meet the needs of the communities. The strategic plan focuses on four areas of concern: cancer, water issues, substance abuse (drug, alcohol and tobacco) and obesity (including nutrition and physical activity). This strategic plan has been developed into various programs which the health district has in place or will be implementing in the future.

Partnering with the Community Arbor Classes

Arbor is an education and training program that is an on-going, full-time experience which offers clients the opportunity to learn about Self-Esteem, Healthy Relationships, Nutrition, Parenting, Family Planning, and Drug & Alcohol Awareness.

Arbor's mission is to provide the opportunity for clients to find meaningful, gainful employment.

The staff addresses the unique needs of individuals who are unemployed or under-employed. They work with job seekers, workers, and employers through the Work Experience Program and On-The-Job Training.

In July 2006, we began partnering with Arbor through a class called "Managing Your Health", which has presented health-related information such as the following:

- General guidelines for seeking emergency care
- Cuts, scrapes, and stitches: caring for wounds
- Newborn through 12 months development, including health concerns
- Preparing for a Pandemic or other emergency
- Finding a medical, dental and/or vision home
- Water conservation and safety issues
- "What is this Bird Flu, anyway?"
- And other topics

The number of clients varies from class to class; anywhere from one to eight may be in attendance as each had his or her own schedule for achieving goals. One may have college classes; another may be preparing a resume and have an interview scheduled; another may have a job that fills the 40 hour "work" week at Arbor.

Southwest Nebraska Public Health Department

Serving the counties of Chase, Dundy, Frontier, Furnas, Hayes, Hitchcock, Red Willow and Perkins



Myra Stoney - Director
Mark R. Graf - Emergency Response Coordinator
Beverly Powers, RN - Public Health Nurse
Jamie Bolen - Health Educator
Julie Neighbors, M.Ed. - Health Educator
Helena T. Janousek - Volunteer Coordinator
Janet Brenning - Bookkeeper

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Hospital Surveillance

Hospital surveillance is a state-wide program that records the progression of influenza (flu) by identifying the locations of outbreaks and tracking the rate it is spreading. When the locations of the outbreaks are known, steps can be taken to contain them.

During the influenza season, Southwest Nebraska Public Health Department works with Chase County Community Hospital in Imperial, Dundy County Hospital in Benkelman, Cambridge Memorial Hospital, Community Hospital of McCook and Perkins County Community Hospital in Grant to report Influenza-like Illnesses (ILI).

ILI is defined as having a fever greater than 100 degrees, plus a cough and/or a sore throat, in the absence of a known cause other than influenza. Each Monday, the hospitals report to the health department the weekly statistics on:

- ❖ Number of patients admitted to the hospital with ILI
- ❖ How many patients are currently in the hospital
- ❖ Percentage of bed occupancy
- ❖ How many patients are on ventilators
- ❖ Evidence of any ILI in the facility
- ❖ Any shortage of personnel due to ILI

The outcomes are forwarded to Nebraska Health and Human Services Systems (NHHSS) via a secured website named Guardian. Approximately two days

later, NHHSS sends a report with the results in a number of graphs. The graphs are distributed back to the hospitals for reference usage.

The big picture shows what kind of flu virus is out there, the toll it takes and what drugs are available to treat it. It also indicates if the flu is the same virus

strain as last year. All this information is shared with healthcare providers to protect the public. This type of surveillance is conducted in order to promote health and prevent disease.

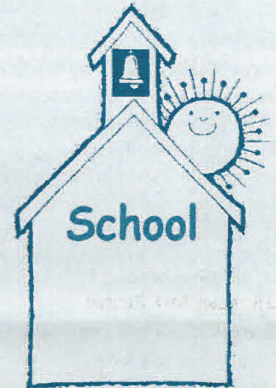
School Surveillance

During the school year, 37 out of 39 schools in the eight county health district participate in school surveillance. This involves approximately 4900 students. On each Wednesday, the schools report the following information:

- ✓ number of students enrolled
- ✓ number of students absent
- ✓ number of illnesses

The illnesses are categorized into one of these classifications:

- ✓ FLI (flu like illness)
- ✓ Rash/Fever
- ✓ GI (stomach)
- ✓ Strep
- ✓ Asthma
- ✓ Other Illnesses.



The Health Department reports this to the state through a secure website. Reports are monitored by the health department and the state to track spikes in absences, which could indicate a disease outbreak.



Health Educator

Substance Abuse/ Environmental Health

Jamie Bolen

My journey with Southwest Nebraska Public Health Department began in August 2006. I moved to McCook from Goodwell, Oklahoma, where I was employed as a Recruiter in the high school and Community Relations Office at Oklahoma Panhandle State University. I received my Bachelor Degrees in History and Social Studies during my six years in Goodwell.

The world of Public Health is very new and exciting to me. Since I began my job here at SWNPHD, I have found that public health encompasses many different areas that require an intense amount of ongoing education and numerous hours of research. Along with the research side, there is the public communication side. My work as a college recruiter has given me a love for working with the public.

At SWNPHD, my primary position is that of a Health Educator, however, overlapping in other public health areas is probable. As a Health Educator at

SWNPHD, my primary task is to educate the public in our eight-county health district about substance abuse and environmental health issues.

Substance Abuse education will encompass many different areas; however, there are three pertinent topics that are in great need of attention in our health district: alcohol abuse, drug abuse, and tobacco abuse. It will be a great challenge to implement programs that will offer the necessary tools to assist people in kicking these troubling habits. Program ideas include: smoking/tobacco cessation classes, alcohol abuse education, and drug abuse education.

Environmental Health will be another area that will include numerous topics. One of the challenges with environmental health will be keeping up with all of the changes and problems that could arise in our health district. Some environmental topics that we are dealing with in our district include: mercury, mold, water quality, lead, etc.

I am looking forward to working with and educating the citizens in the SWNPHD district about the dangers of substance abuse and environmental health issues. This position is sure to be a great challenge, yet, it will also be extremely rewarding to assist and educate others. My mission is to inform and educate the citizens of the Southwest Nebraska Public Health Department to the best of my ability.



Myra Stoney
Director

From the Director . . .

Communities Overall Health Our Number One Priority

This year has been extremely busy for the health department. Pandemic event planning has been a priority for staff members as we educate and encourage individuals, businesses and communities to plan for another potential disaster. With two additional staff members hired in August for Health Education, the department continues to expand and grow to fill the 10 Essential Public Health Services.

Pandemic planning began late in 2005 when Nebraska Health and Human Services contracted with the health departments to provide education and training tools to help prepare schools, businesses, and other entities for an event. Six committees were formed in the health district to assist communities and counties to plan for a pandemic event such as Avian Flu. Education was conducted with local businesses to encourage planning, cross-training and review of personnel policies. Brochures for individual emergency disaster planning have been distributed through out the health district. The staff continues to work with healthcare providers and businesses to develop their plan. Education has been ongoing throughout the year to include presentations, brochures, one-on-one meetings, news releases, advertising and much more. Pandemic planning and education will continue into 2007.

Health Educators for substance abuse and physical fitness/nutrition have expanded the staff to seven full time and one part time employees. Education for the employees will continue to be a large undertaking, as the entire staff has been hired since December 2004. Public health education includes topics such

as bio-terrorism preparedness, surveillance of diseases and outbreaks, pandemic planning, environmental health issues, quality of water issues and respite.

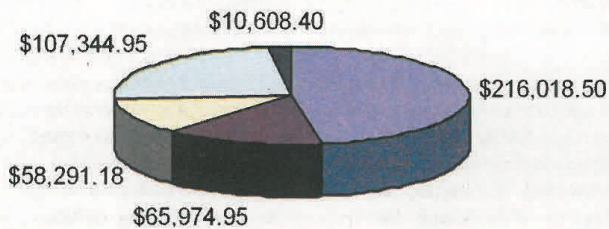
The 10 Essential Services for Public Health continues to be a focal point for strategic planning for the department. Monitoring health status to identify community health problems, the number one Essential Service, has been a major focal point for the department. Seasonal hospital influenza surveillance, school surveillance, recruitment of a sentinel provider to monitor influenza in a healthcare clinic, obtaining certification for two staff members in Applied Epidemiology, as well as daily monitoring of disease and outbreak surveillance, has kept the staff extremely busy. Education and follow- up in each of these areas has been labor intensive through out the public health learning curve.

This year the department will be expanding programs through out the health district. Substance abuse and physical fitness/nutrition have taken the lead for education emphasis for 2007. The health department's schedule of events is listed on the website at www.swhealthdept.com.

The communities' overall health is our number one priority.

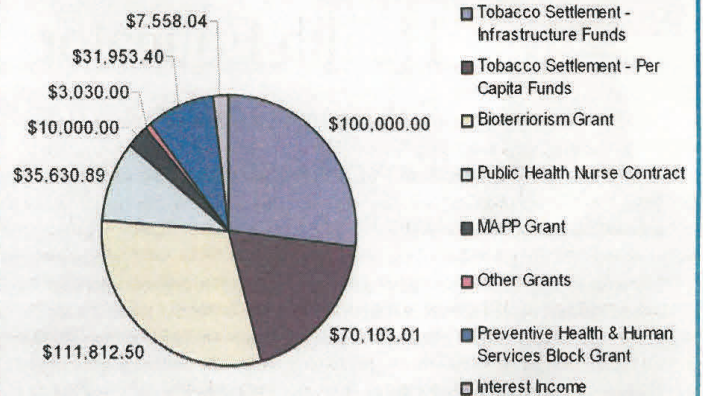
Expenditure by Category

Total Expenditures \$458,237.98



- Payroll & Benefits
- Supplies & Equipment
- Program Administration
- Administrative Expenses
- Vehicle & Mileage Expenses

Revenue by Source



- Tobacco Settlement - Infrastructure Funds
- Tobacco Settlement - Per Capita Funds
- Bioterrorism Grant
- Public Health Nurse Contract
- MAPP Grant
- Other Grants
- Preventive Health & Human Services Block Grant
- Interest Income

2006

February – Began strategic planning process with Nebraska Health & Human Services and Local Health Departments in Nebraska.

March – Participated in TERREX 5.5 exercise

April - Body Walk Health Fair for third graders – collaboration with Red Willow County Health Department

May – Participate in state Pandemic Flu Table Top exercise

June – Began informal meetings for private v testing in eight count health district

KIDS HEALTH

Nebraska Kids Fitness and Nutrition Day (NKFND)

To encourage Nebraska kids to become more physically active in today's technologically imposed environment, the state has designated a special day for all fourth grade school children with the program, "On the Move and Kids Fitness and Nutrition". As these children skip and jump, they will learn new skills to become more physically active while learning to eat healthier.

According to a study by Nebraska Health and Human Services, **one in every three** Nebraska students is either **at risk for becoming overweight or is now overweight**. More specifically, **19 percent of third through fifth graders in South Central Nebraska are now overweight**.

While children become less fit each year, the Southwest Nebraska Public Health Department hopes to reverse this trend with events such as the Nebraska Kids Fitness and Nutrition Day. The

first NKFND in 2004 was a huge success with over 450 fourth grade students involved; the next year over 2,200 students participated. McCook will host the NKFND April 25, 2007 with the Southwest Nebraska Public Health Department in conjunction with McCook Public Schools, Red Willow County Health Department and the McCook YMCA acting as the planning committee for the event which will include most fourth grade children in the eight county district.

This event will provide both physical activity and nutritional sessions for the students. The 12 nutritional stations will deal with basic nutrition and how to make healthy food choices, including snacks. The 15 physical activity stations will include an obstacle course and conditioning exercises, using exercise balls and learning to walk with pedometers.

Many community organizations and businesses are supporting this event, helping area children to become more physically active and nutritionally fit. The Nebraska Beef Council will be providing a healthy lunch.



Body Walk - April 2006



Body Walk - Nutrition Station - April 2006

All Recreate on Fridays (ARF) Movement

The All Recreate on Fridays (ARF) Movement is a physical activity program established for preschool, elementary, and middle school aged kids. The main focus is to get kids moving, using more physical activity throughout the day, as well as making better choices for meals and snacks. Nebraska Health and Human Services System created the ARF Movement to help motivate Nebraska kids, striving to achieve and maintain a healthy weight as well as an active lifestyle. ARF promotes 60+ minutes of physical

activity everyday, while recording that activity on Fridays.

In the highest number ever recorded from a government survey, statistics show one-third of American children, 25 million kids, or 33.6 percent of children and teens ages 2 to 19, are overweight or at risk of becoming so. In Nebraska, one out of every three students are now overweight or considered high risk. For the first time in 100 years, children today have a

shorter life expectancy than their parents!

The schools in SWNPHD may register for the ARF Movement on-line and designate an ARF Site Coordinator, usually the physical education teacher. After registering, the schools receive incentives to encourage their students to be more active as well as providing fun ideas to promote increased physical activity and making healthier eating choices.

The ARF Movement has streamlined the 2006/2007 program into four, seven-week periods. There is a new easy-to-use physical activity tracking system using posters. The coordinator will receive ribbons, medals, and fun incentives for distribution. There are materials for parents, including newsletters and a parent/student contract. School kids are moving more, as well as having fun, while participating in the ARF Movement.

July – Began testing of 500 private wells for Arsenic, Coliform, Nitrates and Uranium; awarded \$11,943 in mini-grants to five applicants

August – Began collaboration with McCook Public Schools on Nebraska Kids Fitness and Nutrition Grant

September – Two staff members trained in Epidemiology; hired Health Educator – Nutrition; hired Health Educator – Substance Abuse

November – Began Blood Pressure Clinics; Coordinated four state pandemic flu table top exercise via video conference

December – Opened second office in Imperial, conducted first flu shot clinic

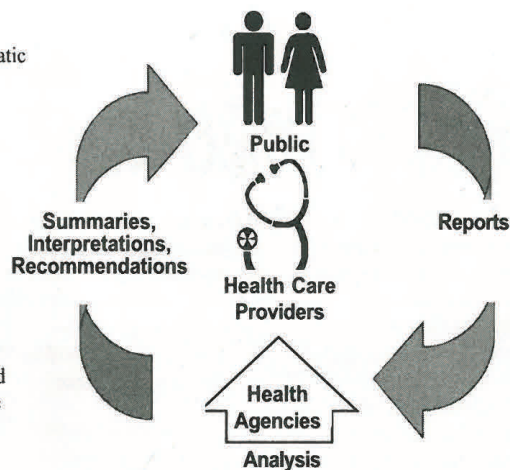
Public Health Surveillance

Public health surveillance is the ongoing systematic collection, analysis, interpretation, and dissemination of healthy data. Public health agencies use surveillance data to **describe and monitor health events** in their jurisdictions, **set priorities**, and to **assist in the planning, implementation, and evaluation of public health interventions and programs**.

Surveillance systems are often considered information loops or cycles involving health care providers, public health agencies, and the public. The cycle begins when cases of disease occur and are reported by health care providers to the public health agencies.

The cycle is not completed until information about these cases is relayed to those responsible for disease prevention and control, and others "who need to know." Because health care providers, health agencies, and the public all have some responsibility for disease prevention and control, they all should be included among those who receive feedback of surveillance information. Depending on the circumstances, others who need to know may include other government agencies, potentially exposed individuals, employers, vaccine manufacturers, private voluntary organizations, legislators on the health subcommittee, and innumerable others.

The concept of public health surveillance has evolved over time and is still confused with other



uses of the term surveillance. The current concept of surveillance as the monitoring of disease occurrence in populations was promoted by Dr. Alexander D Langmuir as a function of the newly created Communicable Disease Center, now the Centers for Disease Control and Prevention. Before that, surveillance had meant the close observation of persons who had been exposed to a communicable disease in order to detect early symptoms and to institute prompt isolation and control measures. To distinguish between these two surveillance activities, we now use public health surveillance to describe monitoring health events in populations, and use the term medical surveillance to describe monitoring potentially exposed individuals to detect early symptoms.

Surveillance systems today take many forms. The oldest and most well-established systems are those that monitor the occurrence of communicable diseases through required reporting by such health care providers as physicians, laboratories, and hospitals. Hospital infection control personnel serve a dual role conducting surveillance in the hospital and reporting cases of notifiable disease to public health authorities. More recently, established surveillance systems monitor a broader variety of health conditions, including injuries, birth defects, chronic diseases, and health behaviors. Many of these newer systems rely on secondary data analysis – that is, analysis of data collected for other purposes. For example, some of these surveillance systems use vital records, health care utilization records such as hospital discharge data, and various national and local surveys that are conducted for other purposes.

1. Thacker SB, Choi K, Brachman PS. The surveillance of infectious diseases. *JAMA* 1983; 249:1181-1185.
2. Langmuir AD. The surveillance of communicable diseases of national importance. *N Engl J Med* 1963;268:182-192.

This article was taken from Principles of Epidemiology Second Edition. US Department of Health and Human Services Public Health Service, Centers for Disease Control and Prevention (CDC) Epidemiology Program Office, Public Health Practice Program Office, Atlanta, GA.

Telehealth Conferencing

Telehealth conferencing has been available through the state for several years. Southwest Nebraska Public Health Department acquired the equipment for Telehealth conferencing about one year ago.

What is Telehealth? Telehealth is an electronic real time synchronous audio-visual contact between a patient and health care practitioner relating to the health care diagnosis or treatment of the patient. The patient is in one location with specialized equipment including a video camera and monitor (a Polycom) and the health care practitioner is at another location with specialized equipment. The practitioner and patient interact as if they were having a face-to-face service.

A Telehealth service is a contact between a patient and a health care practitioner relating to the diagnosis or treatment of such a patient. This event takes place without the aid of a telephone, electronic mail message, nor a facsimile transmission.

SWNPHD provides Telehealth conferencing so practitioners in Lincoln, Omaha, etc., can treat their patients who reside in southwest Nebraska. This is a solution to elevating hardships caused by travel time, expenses (gas, motel, etc.) and loss of work to receive treatment from an out of town provider.

The health department uses the Telehealth network as an efficient way to connect with colleagues across the state without ever leaving the office, resulting in a huge savings of travel, time and money. SWNPHD participates in several meetings each month. Also,

every other board meeting is conducted by using the network. All five hospitals within the health district are equipped with the Telehealth network which allows the board members and commissioners to attend these meetings without leaving their home county.

Recently the health department conducted a four state exercise using the Telehealth network. The McCook office connected with various health departments, health and human service offices, and centers for bio-preparedness located in Kansas, Colorado, and Wyoming to discuss a pandemic flu scenario. This saved one or two days of travel for most people and hundreds of travel miles.

This technology allows the department to perform more effectively, efficiently and allowing more time for other public health responsibilities.

Report on Kids Connection Program

Southwest Nebraska Public Health Department contracts with the Nebraska Department of Health and Human Services System to provide Public Health Nursing program services in the eight county area served by the department.



Bev Powers, a registered nurse, provides the services and tracks all contacts and activities reporting to the program director. She tracks use of the emergency room, compliance with health checks based on the HHSS guidelines, helps people find medical, dental and vision homes/ providers, and tracks failed/ missed medical, dental, and vision appointments.

The goal of the program is to improve the health status of Nebraska's rural citizens by providing a central access for community health nursing consultation for Medicaid eligible, and potentially eligible, individuals and families.

With just one call, the Medicaid eligible and potentially eligible individuals and families can be linked to and learn about responsible use of health care, be encouraged to obtain early and regular preventive care for children and be encouraged to obtain early and adequate prenatal care for pregnant women.

Summary of Follow-ups for the program:

Physician Office Problem Visits - 234	Health Assessments for other needs - 65
Dental Office Problem Visits - 45	Pregnancy Assessments - 2
Vision Office Problem Visits - 11	Asthma Assessment - 1
Emergency Room Visits Level IV - 146	Diabetes Assessment - 1
Emergency Room Visits Misc. - 32	Served Potential Medicaid persons - 19
Found Dental Home 16	Visited Providers (physicians, dentists, and vision) - 78
Newly Eligible/Time for Health Checks - 1035	Case management (extended follow ups) - 29
Presentations/ Outreach Education - 10	Medicaid Clients served - 1625

Communications

The importance of accurate communication is crucial in every emergency situation. Everyone involved must be able to communicate to assure the appropriate message has been received.

Southwest Nebraska Public Health Department (SWNPHD) has been working to improve communications within the health district. In 2003, SWNPHD received grant funding from the Department of Justice to provide radios with a common frequency to all emergency responders. The project is a collaborative effort between the health department and the eight counties. To date, all eight counties have radios and three counties have their towers and repeaters up and running. When the project is finished, law enforcement, fire, and emergency medical personnel will be able to communicate with one another in any disaster situation.

The counties of the SWNPHD have joined the Central Nebraska Region for Interoperability (CNRI) which allows this health department's eight counties to communicate with an additional twelve counties within the CNRI region. This region ranges from the Colorado border to Hastings, Nebraska.

One of the advantages of working as a larger, united region is the opportunity to secure even more compatible communications equipment. SWNPHD is continually working to ensure the safety and well-being of all citizens, and through the collaborative efforts of different agencies using communications, this is being accomplished.



Health Educator *Fitness/Nutrition*

Julie Neighbors, M.Ed.

As a health educator at Southwest Nebraska Public Health Department (SWNPHD), my position is a new, inventive, yet challenging experience for me. Through teaching experiences, I have helped many people start to live a healthier lifestyle. Here at SWNPHD, getting our health district in good cardiovascular, musculoskeletal, and flexible condition will be not only exciting, but challenging.

The move to Southwest Nebraska from South-Central Kansas was not a drastic change for me. However, the move to Dallas, Texas, last year to complete my internship was a huge change and a rewarding experience. My internship was at The Cooper Institute which was founded in 1970 by Dr. Ken Cooper, also known as the "Father of Aerobics".

The Cooper Institute, does research in epidemiology, exercise physiology, behavior change, hypertension, children's health issues, obesity, nutrition, aging and other health issues. The Cooper Institute is one of the most frequently cited references in scientific literature on topics related to physical fitness. Research conducted at the Institute has influenced major national public policy initiatives from the American Heart Association, American College of Sports Medicine, and Centers for Disease Control and Prevention.

I hold a Masters of Education with an emphasis in Exercise Science from Wichita State University. I was a graduate assistant for the Center for Physical Activity and Aging. Also, while getting my Masters degree, I was a Personal Trainer/Fitness Consultant for one of the YMCA branches in Wichita, Kansas.

Projects I am currently involved with are All Recreate on Fridays (ARF), Nebraska Kids Fitness and Nutrition Day (NKFND), our SWNPHD's Employee Wellness program, Health Fairs, Blood Pressure Clinics, and other projects that involve speaking to groups or individuals within our health district.

Future projects for our health district are unending. Being a Health Educator for SWNPHD is a new and exciting position. I enjoy helping people and I will meet these future projects with excitement and enthusiasm as I provide helpful information to our surrounding communities. I am anxious to help others adopt healthier lifestyles.

Respite Care

Q. What is Respite Care?

A. Respite provides short term relief to caregivers of family members with special needs.

Q. Who is a caregiver?

A. A caregiver is anyone who has taken on the day to day care of a person with special needs.

Q. Who can be a Respite provider?

A. A Respite provider may be anyone offering the caregiver some relief from their daily duties.

Q. Who provides the Respite services?

A. Families may choose their own Respite providers and set their own schedules.

Q. Who may qualify for this program?

A. This program is available to families not receiving services from any other government program. Eligibility is determined by family income.

Q. How to find a Respite provider?

A. Call 1-866-RESPITE (737-7483)

Q. How to become a Respite provider?

A. Respite Hotline: 1-800-358-8802, or to: <http://www.hhs.state.ne.us/chd/rspindex.htm>.

Flu Shot Clinic

Tuesday & Thursday
1 - 3 p.m.

or by appointment

(Sliding Fee Scale Available)

Blood Pressure Clinic

Friday
2 - 4 p.m.

or by appointment

322 Norris Avenue, Suite 8, McCook
or call for appointment
308-345-4223 · 888-345-4223

Pandemic Flu Planning

Southwest Nebraska Public Health Department has been working the past year to help area communities, agencies and individuals prepare for a pandemic flu event.

A pandemic flu event is different from the year to year seasonal flu that is generally seen. Pandemic flu has a different virus strand to which our bodies have no immunity. Pandemic flu will affect the body in the same manner as the seasonal flu, with coughing and sneezing, aching muscles, and a general sick feeling. It causes complications of pneumonia and severe respiratory distress. However, it will be more severe and will attack people of all ages. A pandemic flu can attack anytime, not just fall and winter.

Six Pandemic Flu Committees have been established to help prepare our district should an event happen. They are located in Furnas, Red Willow, Frontier, Dundy, Chase, and Perkins counties. Hayes and Hitchcock county residents have been assigned to their nearest bordering county. These committees are composed of members from hospitals, fire and rescue, law enforcement, emergency management, cities, schools, private businesses, and public health. All committees have developed a preparedness plan

designed specifically for their area should the event happen. We will be practicing these plans in 2007.

Southwest Nebraska Public Health Department has been working with individuals to help them prepare. The health department is also assisting schools and businesses with their preparedness plans. If you need help with your plan, either business or personal, please contact us.



Area schools (above) and Community Hospital (left) preparing for Pandemic Flu.



Water Sampling for Contaminates

Southwest Nebraska Public Health Department received a grant from the Environmental Trust to test 500 private wells in the eight counties. The grant money came from the state lottery to fund environmental issues. The funding paid for the laboratory testing of coliform, nitrates, arsenic, and uranium. The health department provided the manpower to collect the samples, advertise the program, and educate the residents.

The program began the end of June by holding public water meetings in each county. The meetings were informative and gave residents the opportunity to voice their concerns. Also, there were representatives from the Natural Resources District available for answering questions. Many people signed up and the collection of samples began that same week.

By the end of November, a total of 498 water samples had been collected and mailed to the state lab for testing. As lab results came back, the results were recorded and a statement mailed to the well owner showing the results and suggestions, if any, to improve their water quality. The Health Department plans on holding public meetings in February to illustrate the results of the testing.

Testing results have varied throughout the district; however, for the most part, the quality of drinking water has been very good. The objective of the testing is to inform residents of the quality of their drinking water from private wells and to provide them the opportunity to make improvements if needed.



Mark R. Graf, catching water sample

Private Water Wells Tested Showing Levels Over Recommended Guidelines

