

Cycle II Capstones

KPHLI Cycle II fellows completed the following capstone projects:

Kansas Local Public Health and Environment Workforce Needs Assessment

Allison Alejos, RN, BSN, and Alice Weingartner, MEd

Abstract: *One of the ten essential public health services is to ensure a competent public and personal health care workforce. In Kansas there has been no recent standardized assessment that identifies the training needs of persons working in public health. Therefore it is unclear how to best utilize already limited resources in developing appropriate training that is both meaningful and beneficial for the public health workforce in Kansas. By working with the Kansas Department of Health and Environment (KDHE) and the Saint Louis University School of Public Health, Heartland Center for Public Health Preparedness (Heartland Center), the needs of the public health workforce in Kansas will be assessed so that appropriate training programs can be developed. The assessment and evaluation of data will assist in making strides towards ensuring that Kansas has a competent public health workforce.*

Public Health Jurisdiction: Issues That Limit Access to Public Health Services for Public Nuisance Abatement Within Incorporated Cities in Kansas

Jon Anderson, BSN, RN, MS

Abstract: *Local health departments (LHDs) in Kansas receive nuisance complaints from the public and other agencies. The capacity to respond to these complaints varies from one health department to another. One of the factors limiting LHD capacity to respond is related to confusion over issues of the jurisdiction of a county agency (the LHD) inside the city limits involved in the complaint. As a consequence, access to public health services, which is a central tenet of the core public health function of “assurance,” is impeded for some complainants. This project examines the issue of public nuisance complaints response by LHDs and offers suggestions for more consistent response to public nuisance complaints across the state.*

Drafting an Educational Tool with Focus on Childhood Physical, Mental, and Social Development for School Readiness

Debbi Baugher, RN, BS

Abstract: *Long before children enter into a kindergarten classroom, preparations must begin to ensure they are healthy and prepared to succeed in school. Ninety percent of brain growth occurs in the first three years of life. Adults are stewards of individual development and social growth for children. The responsibility to guide children in proper development physically, mentally, and socially is that of the adults in their lives. Local citizens and groups must take responsibility to ensure that families have access to needed services that nurture proper development of children. Educational needs of the adults providing services must be addressed to maintain the skills required to serve as mentors and educators. Society places more demands on children to acquire knowledge at younger ages that will prepare them for learning and growth. To survive and prosper, it is imperative that right decisions are made today. Caregivers of children need knowledge to empower them to provide care that nurtures proper growth and maturation.*

A Case Study of Kansas At-Risk Populations for Depression Symptoms Related to Mass Trauma

Barbara Berry, BA, BSN, MA, MS

Abstract: *Terrorist attacks and natural disasters in the United States have created an urgent need for mental health workers to estimate psychological affects for at-risk populations. Various factors determine which populations are at risk, depending on locale and demographics of the area, and health*

care workers should establish which citizens have the greatest need for mental health resources. A case study is presented that compares depression responses for a five-year range to discover if Kansans experienced increased depression symptoms related to the mass trauma and terrorist attacks of the year 2001. The Behavioral Risk Factor Surveillance System (BRFSS) serves as a measure of depression for Kansas's populations. Analysis of Variance (ANOVA) was used to compare depression symptoms reported for the five-year range to see if responses differed significantly for the year 2001. Responses were also analyzed for differences among sub-populations. Probability proved useful in predicting which sub-groups would be most at risk within the population. Findings suggest that the Kansas population was significantly affected by the terrorist events of 2001. ANOVA results support previous research suggesting that populations located far from the event show less distress than populations located closer to the disaster. The results suggest less acute mass trauma reactions to the 2001 terrorist events for Kansas than for populations closer to the terrorist attacks. The Kansas results support other research findings suggesting that ethnic groups have the highest mass-trauma related stress symptoms. The ANOVA method showed significant increase in depression rates for all racial groups, with the highest rates for Black Americans. Probability was used effectively as a method to identify at-risk subpopulations for mass-trauma related depression.

Statewide Needs Assessment: Themes Derived from Public Focus Groups

Amy Chesser, MAC

Abstract: *This project includes the results of six general public focus groups conducted in Kansas. The report addresses Kansas's public's perception and understanding of emergency planning and preparedness. Specifically, qualitative data gathered from the general public focus groups are presented, including their preparedness for a terrorist or all-hazard event. The purpose of this research is to elucidate the public's bioterrorism and emergency preparedness training needs so they can be practically applied toward training and education efforts. Focus group interviews assisted in understanding and assessing changes in the perceptions, knowledge and beliefs of the general public in a midwestern state and the impact the training may produce at the individual, systems and community level. Focus group interviews were conducted with a sample of the general population from both rural and urban communities. Strengths and weaknesses of recruitment techniques, current communication systems and policy changes related to the implementation of a quarantine/isolation were assessed. Lastly, potential solutions to identified problems were discussed and documented. The focus group feedback demonstrated the need for social marketing campaigns, education and training to support innovations through communication among the general public in all communities. Participants communicated an increased awareness of and understanding for training related to crisis and bioterrorism preparedness. This research reflects enhanced understanding of bioterrorism and its implications for the public at large.*

Aid to Local Funding in Kansas: The Case for Performance Measurement

Doug Farmer, MPA

Abstract: *The most effective way to measure the needs, capacities, and successes of the public health system in Kansas is to provide a uniform performance measurement instrument. A cataloging of output measures is not sufficient to maintain the confidence of the public. Data-supported outcomes will provide the evidence needed to maintain this critical confidence and to reassure policy makers that all available funding is being deployed in the most efficient and effective manner. This paper will make the case for interjecting realistic performance measurement into the aid-to-local funding that is passed from or through the Kansas Department of Health and Environment to local health departments (LHDs) and LHD partnerships in support of their efforts to sustain public health throughout the state. The current aid-to-local process and the status of any required performance reporting is also discussed. While there is no one perfect model to use in driving performance standards, a review of the Nation Public Health Performance Standards project is provided as a benchmark.*

Development of Groundwater Training for Public Health Officials

Brian Fisher, BS

Abstract: *Groundwater is a valuable source of drinking water for many people in rural areas and for public water supplies. It supplies at least 50% of the drinking water for our population. The understanding and the nature of groundwater and its contamination are not well understood by the public or health professionals, but they can have major effects. Groundwater and its associated contamination can travel slowly and significant distances over time and impact both private water and public water supply wells. Groundwater contamination above recommended drinking water levels cannot be detected in water by taste and odor alone. The original nature of the contamination can degrade into daughter products that have different levels of health concentration limits over time and the distance traveled. Groundwater can be cleaned by sometimes expensive and innovative technologies; these efforts can take many years. Health professionals need to be aware of groundwater contamination and its impacts to human health for both the short-term and long term exposures. To this end, a groundwater contamination training primer was created to help educate health professionals on this important topic.*

Assessment of Kansas Local Public Health Workers to Determine the Number of Workers by Classification, Longevity in Public Health, Salary Ranges, and MPH Graduates in the Workforce

Ed Garner, MS

Abstract: *This project is an assessment of the local public health workforce by means of a survey to obtain information about the total number of workers at the local level, their longevity in public health and their present position, approximate salary ranges by job classification, and the number of MPH employees at the local level. The survey was originally developed by the Heartland Center for Public Health Preparedness, Saint Louis University, and has been modified to meet the needs of Kansas. The survey will be administered in September 2005 following Lotus Virtual Training of health department administrators. The Heartland Center will analyze the data. Results should be available in January 2006.*

Fit-testing in Gove County

Cheryl Goetz, BSN

Abstract: *Use of Personal Protective Equipment (PPE) is not new to health care workers or others desiring protection from environmental hazards. Use of PPE, especially respiratory protection, has become more important since September 11, 2001, and the subsequent mailing of anthrax-laced powders via the United States Postal System to elected officials and prominent members of the media. It is the intention of this capstone presentation to highlight the importance of properly-fitting respiratory equipment via fit-testing, when and where fit-testing has been used, and the degree of safety associated with fit-testing when done properly. Description of a local project in Gove County, Kansas, will also be described, as well as a plan to sustain regular fit-testing procedures in Gove County.*

Protecting a Woman's Right to Breastfeed in Public Places

Dennis Highberger, JD, and Kathy Walker, RN, BSN

Abstract: *This project pursued the adoption of a Kansas state statute protecting the right to public breastfeeding. Such legislation would not only clarify the rights of individual breastfeeding women, but would also provide a strong state policy statement in support of breastfeeding with the goal of increasing public acceptance of breastfeeding. This case study examines the process of identifying stakeholders, drafting legislation, and moving the bill through both houses of the legislature. Reasons that the statute did not succeed are analyzed and strategies for achieving adoption of a statute in the future are identified.*

Refugee Mentoring Project

Anita Hodge, RN, MA

Abstract: *Due to a limited number of caseworkers, refugees receive only a limited period of time with their caseworker to become established in Kansas. A refugee mentoring program will allow those refugees who have successfully assimilated to “give back” to new refugees coming into the state. Finding out what additional or continual assistance is needed for the first six months of the refugee’s life in Kansas will create a smoother transition. On March 3, 2005, a meeting with eight recent Somali refugees served as a preliminary refugee needs assessment. Further refugee needs assessments were conducted with refugees from Eritrea, Liberia, Somali Bantu men, and a mixed group of English speaking refugees from Sudan, Sierra Leone, and Burma. Regardless of the diversity of those surveyed, the results were the same: needs include employment and transportation; barriers include language, insufficient funds for rent, limited food stamps, lack of funds for school clothing and supplies, and a lack of understanding of the American medical system. The Refugee Mentoring Project is seeking to enhance the ten essential services of public health, of which all ten will be impacted by this project. Needs will be identified, additional community partnerships will be formed to resolve health and community issues, and routine evaluations of the ongoing project will provide education and innovative solutions to the refugees’ resettlement difficulties. Eliminating health disparities and providing access to quality health services is a goal of Healthy People 2010 and a major objective of this project. Identifying the needs of new refugees, building a relationship between the refugee and their community, and collaborating with community partners will help achieve this goal.*

Implementation of a Cardiovascular Health Promotion and Prevention Program in Gray County

Rayna Maddox, RN

Abstract: *Currently, no structured cardiovascular health promotion program exists in Gray County to combat increasing numbers of cardiovascular disease. To address this, the Gray County Health Department developed a program to provide its citizens with education on nutrition and heart healthy cooking, physical activity for adults, stress management, and institutionalizing lifestyle changes. Blood sugar, blood pressure, and cholesterol screenings will be performed initially at six weeks from inception of the program and again at six months.*

Implementing a Model Tuberculosis Screening Program in a Kansas-Based Meat Packing Plant

Janice McCoy, MPH

Abstract: *Tuberculosis (TB) is an infectious and potentially fatal disease that is treatable and in many cases curable if detected and properly treated early. TB is one of the leading infectious causes of death in the world (Centers for Disease Control and Prevention, 2004). TB cases occur in a disproportionate number of ethnic and racial minorities in the United States, accounting for 82% of all reported cases. Non-Hispanic African Americans and Hispanics each account for 28% of reported TB cases in the United States, while only 19% occurred in non-Hispanic Whites (Centers for Disease Control and Prevention, 2004). The Creekstone Farms Meat Packing Plant located in Arkansas City, Kansas, first opened as Prairie Land in 1999. With the opening of the plant, an influx of Hispanic people migrated to the area to supply the new demand for workers in the facility. The majority of these immigrants are foreign-born. Because of this migration of foreign-born individuals, the area has experienced an increased need to test for tuberculosis and treat patients with latent tuberculosis infections. Recently the company nurse contacted KDHE to begin an internal tuberculosis control program. An internal TB screening program would assist in uniform testing of all employees and provide a system in which preventative drug therapy can be administered with an increased level of compliance. However, communication with the local health department is extremely important to ensure proper notification is made to the state and disease investigation protocols are conducted. The focus of this capstone project is to develop a model program*

that will be implemented locally while providing sufficient documentation to enable other communities facing the same circumstances to duplicate this program in their respective communities.

One Community's Health Assessment Project (CHAP): A Continuation

Barbara Mitchell, MSW

Abstract: *The Johnson County Health Department participated in a Community Health Assessment Project (CHAP) beginning in 1996 to collectively and systematically assess the health status and needs of Johnson County. A survey of county residents was taken and the results tabulated. CHAP Ambassadors (people who had an interest in the health of the community) worked together to interpret the data and identify three areas of most concern for the majority of the population. A Steering Committee was appointed from the Ambassador group. The Steering Committee was charged with forming work groups to address the community's concerns and monitor the progress. The Steering Committee met monthly for several years. While the Steering Committee saw much success toward their goals, the group became more of a networking group, with membership dwindling. The chairperson who had been with the process since the beginning left that position and a new chairperson was hired. It was the challenge of the new chairperson to revitalize and re-focus the group. This was accomplished in several ways. Priorities were re-established and a new one added. A change in the way business was being processed was introduced. More outreach was done to include new participants and meetings were held on a bimonthly basis.*

The Implementation of HB 2264: Quarantine and Isolation in Kansas

Judy Moler, JD

Abstract: *Prior to 2005, the Kansas Statutes dealing with isolation and quarantine were antiquated and also ambiguous as to the responsibilities of local health officers. The statutes were unclear also on due process rights afforded those who were to be isolated and quarantined. During the 2005 Legislative Session, at the behest of the Kansas Department of Health and Environment, the Kansas Association of Counties, the Kansas Association of Local Health Departments and others, legislation was passed to clarify the responsibilities of the Secretary of Health and Environment and local health officers to establish procedural requirements in the case of an incident requiring isolation and quarantine (HB 2264).*

Coffey County Community Health Assessment 2005

Susan Mueller, RN

Abstract: *The first Community Health Assessment in Coffey County was done in 1997. This revisit to the assessment process is an opportunity to follow up on previous action items and newly identified issues in 2005. The process will include comparison of state and local statistics from the BRFSS, Healthy People 2010 goals, and 10 Essential Services, among other resources available to the group. The completion of the assessment will identify priority health issues to be addressed by a strengthened wellness committee. The wellness committee is in need of a unifying process to bring all interested parties to the table, so health promotion activities are not fragmented. We will establish a vision for the future of health in Coffey County.*

Evaluation of the Kansas Chautauqua Informatics Project

Julie Oler-Manske, MS

Abstract: *A basic understanding of public health informatics is now a necessity for effective practice in the information age. Local public health agencies need to use information technology tools to perform their public health mission effectively and efficiently, yet they often lack technical assistance and training to develop the skills and knowledge needed to use those tools to their best advantage. In addition, public safety and preparedness often depend on public health professionals' access to information and their ability to use technology to get this information, yet many local workers do not possess the necessary*

technology and skills. Training in public health informatics promotes the development of a public health workforce capable of integrating public health with information technology. The Kansas Chautauqua Informatics Project, offered through the WALD Center, addresses the recognized need for computer training at the local public health level. Known as the “Chautauqua Project”, the project provides computer training on-site for local health departments throughout Kansas.

Improvement Plan for Customer Service

Billie Payne, RN, BSN, Med

Abstract: *A customer service plan for our Health Department in Cloud County was being addressed. This entailed the problem of where the health department is located. This is a continual problem because there are not road signs for 3rd Avenue; nor are there signs at the entrance that would say Cloud County Health Department. I planned and carried out the plan of having trees and bushes removed and having signs made for the health department and also having the street sign installed in front of our department. Other work we considered is what would be within our building. As clients entered the building, the information board that would explain where different agencies were located was in very small letters, so two inch letters were installed so it was more easily read. The receptionist desk was not accessible for clients and was in an enclosed area; therefore the desk was rearranged. As clients came down the hall, the clients were able to see the receptionist as well as the receptionist seeing clients as they approach the desk. A shelf was attached to the area so the clients could do their paper work if they did not want to use the table. Brainstorming and action can improve customer service without much money or time involved. Staff involvement in the entire process is critical, and much more will happen when they are involved.*

A Unified Legislative Voice for the Health of Kansans: “One Voice for Health”

Elaine Schwartz, BBA, LACHA

Abstract: *There is an informal, uncoordinated, non-collaborative approach among health professions and advocates during the legislative process in Kansas. Often the Legislative and Executive Branch of Kansas government receive mixed messages and a lack of knowledge and confusion occurs among public health partners. The Kansas Public Health Association (KPHA) is, by definition, the one entity that clearly represents all health sectors and partners within the state. KPHA would like to launch a combined effort to form a legislative collaboration. In order to present this unified voice, a process needs to be developed to determine who should be involved, meetings should then occur to discuss collaboration, and finally, a plan would be developed to monitor future legislation with the possibility of a paid lobbyist. Groups representing the 10 essential services of public health were and will continue to be invited to participate. They must be interested in the legislative process and in bills that are related to the health of Kansans such as health funding, health statistics, preventive health, health care services, health policy, etc.*

If an alliance is formed from these organizations, to effectively speak as a unified voice for health advocacy at the legislative level, it will enhance essential services, and promote the objective of Healthy Kansas 2010. Forming an alliance to represent health advocates to influence the legislative process in working with the Legislative and Executive branches of Government in Kansas will result in an improved public health system in Kansas.

Creating a Capacity Development Management System in Local Health Departments

Edie Snethen, MS

Abstract: *Current efforts are underway in Kansas to improve public health system capacity with federal bioterrorism funding. Structural characteristics of this system impact these improvement efforts, but are generally not the focus of federal grant guidelines provided with the categorical funding. For Kansas, these structural characteristics are decentralized, fragmented, and hierarchical. The goal of this study is to examine these structural characteristics and identify their implications for providing sustainable enhancements to public health services. This examination was conducted through the perspective of*

Peter Senge's Fifth Discipline and Thomas Friedman's The World is Flat. Current strategies to address structural issues include functional regionalization, the introduction of a performance management system that links improvements to the framework of national public health performance standards rather than categorical grant guidelines, and consideration of aligning business practices and technology. The study concluded that there needs to be a wider awareness of these structural issues and strategies. This awareness is a necessary first step to getting these issues out in the open and on the table for discussion and dialog. Including these structural considerations will help to ensure that public health system improvements are effective and sustainable.

Inspiring Vision, Sharing Power, Enhancing and Supporting a Productive Workforce

Candace Taylor, RN, MS, PhD

Abstract: *Productivity, morale, and satisfaction problems had become disruptive to the state health department's epidemiology section. Some of the issues leading to these problems were identified and include: distracted and disrupted leadership, perceived lack of respect for the staff, and routine tasks that were not reflective of the educational level of the professional staff. Two senior staff members combined efforts to provide a consistent leadership focus, direction, support, and vision, to the advantage of the individual staff members and the section. General focus areas were identified and presented to the staff as potential areas for development of projects. It was left to the staff members whether to participate and what projects to develop. They were enthusiastic and approached this opportunity wholeheartedly. With the support and backing of all the senior staff, products related to the focus areas have been developed: posters and presentations have been accepted at conferences, information pamphlets have been published and disseminated, staff members have been to training or courses, a field investigation course is being developed, documentation and dissemination of results of outbreak investigations are being posted on the website and recorded in the outbreak database, and the website has been updated. The productivity is gratifying to the section as a group and to the individuals involved. Implementation of a strategy in response to a comprehensive assessment can and has been an informative and educational process. When the characteristic behaviors that have been presented in the KPHLI program are implemented with a group that is in need of leadership and eager to grow, many good things can happen.*

Public Health and the Media: Working Together to Deliver Effective Information to the Public

Gloria Vermie, RN, MPH

Abstract: *Each day there is a need to provide the public with timely and accurate information as it relates to health and wellness. In the event of an emerging disease emergency, or a mass care situation, public health response may be limited by the inability to deliver effective mass communications and public information to the residents of the community or jurisdiction involved in the emergency. Today, public health professionals are beginning to fully recognize the important role the media will play in disseminating critical information. Increased efforts to incorporate and include the media and public information officers in public health planning, preparedness protocols, drills and exercises can stimulate a greater understanding of their roles and responsibilities in a public health emergency. Collaborations and sharing experiences with the media professionals can result in increased relationships and assure more effective communications to the public. The Sedgwick County Health Department Metropolitan Medical Response System (MMRS) program was awarded \$25,000 by the Department of Homeland Security to design, develop and deliver an event that resulted in stronger communications partnerships. The result was a Media Workshop and Table Top Exercise (TTX). The initiative completed on February 3, 2005, was groundbreaking. The targeted audience was media professionals. The workshop specifically incorporated curriculum and a tabletop exercise scenario to highlight media involvement in a public health emergency. Public Health professionals from the eight-county South Central Metro Region, first responders, health care workers, law enforcement, military personnel, state agencies, and local elected officials attended the event, which was facilitated by Texas A&M University. A participant group*

survey was completed at the workshop and an electronic participant evaluation was developed and distributed post workshop. The participant evaluation was analyzed. An After Action Report was submitted to the national MMRS office and was approved, and it was then distributed to participants.

The Impact of Regionalization Associated with the Bioterrorism Activities on Kansas' Local Public Health Departments

Ruth Wetta Hall, RN, PhD, MPH, MSN, Mary Beth Herrmann, AD, BS, and Susan Kang, JD

Abstract: *Introduction: To assess the impact of regionalization of Kansas counties associated with emergency preparedness (EP) since 2002 through the eyes of local health departments (LHDs). Methods: Three two-hour focus groups were conducted between May 3 and 24, 2005, with 31 Kansas health department employees involved in EP. Most participants were public health administrators, female, and 40 years or older. Results: Regionalization was perceived as "absolutely necessary" by participants and resulted in improved collaboration and communication among LHDs. The process supported the development of relationships, trust, and mutual respect among LHDs and other governmental agencies. Participants agreed that LHD functioning within the 15 regions has improved the delivery and availability of public health services, increased the efficiency and timeliness of LHDs' operations and enhanced public health's visibility in EP efforts. Moreover, regionalization brought additional resources to LHDs including personnel, knowledge and technical expertise, improved technology and fiscal resources. Dissatisfaction with regionalization was associated with insufficient funding, frustration with changing preparedness guidelines and differences between state expectations and local realities. Participants identified four issues necessary to sustain regions which included: funding, documented benefit from participation, commitment from LHDs and their communities, and engagement of local elected officials about benefits of regionalization. Discussion: The regionalization process has been beneficial for LHDs and has produced tangible and intangible benefits. Barriers to regionalization expansion will need to be addressed for additional collaborative ventures to occur.*