

Cycle VII Capstones

KPHLI Cycle VII scholars completed the following capstone projects:

Wesley Medical Center Leadership Institute

Gina M. Berg, PhD, University of Kansas School of Medicine-Wichita

Abstract: Background: *Clinical leaders are often promoted to management positions without education other than their clinical training. Clinical teams in leadership positions need additional leadership and management skills training in order to increase effectiveness in healthcare processes. Wesley Leadership Institute (WLI) was developed to meet the training needs of rising clinical leaders. The goal is to provide leaders with guided experiential learning opportunities to develop leadership skills. WLI's vision is to develop clinical learning teams developed from serving existing departments and include allied health and administrative staff so the collaborative learning teams will understand the entire scope of the organization. The development of this in-house training program for physician leadership contributes to the fulfillment of The Joint Commission.*

Mandating Influenza Vaccinations for Kansas Healthcare Workers:

An Introduction to the Kansas Legislature

Raymond Cattaneo, MD, Priority Care Pediatrics, LLC

Abstract: *Whereas influenza is a known deadly infectious disease; and that healthy adults, especially healthcare workers, can infect those most at risk, including the elderly and hospitalized or otherwise ill patients; and that there is an effective, safe vaccine to prevent influenza, this project pursued adoption of a state statute mandating that all healthcare workers in the state of Kansas obtain yearly influenza vaccination. Unfortunately, due to certain obstacles, the legislation was not introduced into the Kansas Legislature this year.*

Local Needs Assessment:

One Health Curriculum for Middle and High School Students

Kimathi Choma, DVM, Kansas State University

Abstract: *This project includes preparation for a needs assessment survey of two middle schools and two high schools in the Kansas City, Kansas, area. The report addresses Kansas school age children's knowledge and understanding of One Health concepts. Its main focus is the data that needs to be collected via student surveys to assess their knowledge of One Health content. This research is needed to reveal the student's level of understanding of One Health concepts, which will then be used to develop an appropriate One Health curriculum. The survey will be conducted on middle school and high school students from two different Kansas City area schools of different socioeconomic status. Their knowledge of One Health content related to human, animal and environmental health and methods of preventing infectious diseases will be assessed. Finally, the students will be asked what they know about the One Health concept. The survey will determine the need for a One Health curriculum at the middle and high school level to help students gain knowledge about public health-related issues. The Healthy People 2010 focus areas addressed include Educational and Community-Based Programs and Health Communication.*

Community Health Assessment: Kansas Readiness

Greg Crawford, BA, Kansas Department of Health and Environment

Abstract: *State and local health agencies in Kansas are preparing for accreditation. Health assessment is one of the core functions on which accreditation will be based. In Kansas, community health assessment has largely taken a back seat to the country's bioterrorism response. The Kansas Department of Health and Environment produces a variety of data products one of which, the Annual Summary of Vital Statistics, is frequently consulted in assessment activities. Based on a focus group involving local health departments, a number of gaps need to be filled as leaders prepare to resume health assessment efforts. A focus group of Kansas Department of Health and Environment leaders and a survey of Annual Summary users reaffirmed the importance of the annual report and identified potential improvements. Interest in conducting health assessment is growing; however, local health agencies will need assistance on the process and in acquiring the needed data.*

Bloodborne Pathogens for Public Health and Safety Personnel

Patricia Dowlin, BSN, Mitchell County Health Department

Shannon Gabel, BS, Kansas Department of Health and Environment

Abstract: *This project pursued the development of a bloodborne pathogen online training course for public health and safety personnel. Minimal training is available to provide personnel in these fields with a program that caters to their unique needs in a fashion that is easily understood. To aid in fulfilling this need the authors have developed a program that addresses the bloodborne pathogen hazards public service personnel may encounter. Public health and safety personnel put their safety on the line daily, aiding others who may carry or have potentially infectious diseases. Bloodborne pathogen diseases have no particular face, meaning individuals may show no signs or symptoms of having them. Therefore, you must respond to them knowing they could be harboring an infectious agent that could harm not only you but your families as well. In such situations, personnel must be able to respond in the safest manner possible, protecting themselves from potential exposure. The more information given to professionals who have the probability of coming in contact with communicable diseases, the better they will be able to protect themselves and in turn protect their families and loved ones. Participants in this online course will have an increased awareness and understanding of bloodborne pathogens and how to minimize the risk of exposure. One of the Healthy People 2010 focus areas addressed is the need for Occupational Safety and Health, which we feel includes bloodborne pathogen training. Furthermore, one of the leading health indicators of the nation's 10 most pressing health issues are injury and violence affecting the lives of the public health sector and health and safety professionals, which goes hand in hand with our course objectives.*

Health Information Exchange in the State of Kansas: Planning for the Future of HIE

Aaron Dunkel, BA, MPA, Kansas Department of Health and Environment

Abstract: *This project followed the planning of the Kansas Health Information Exchange (KHIE), accelerated by the Office of the National Coordinator's (ONC) State Health Information Exchange Cooperative Agreement Program. The KHIE will allow for an unprecedented access to longitudinal information that will benefit public health in surveillance, help in the*

identification and diagnosis of health problems in communities, provide information that will inform and educate regarding health issues, and facilitate the evaluation of population-based health services in a manner heretofore impossible. This project tracks the process of identifying stakeholders, facilitating changing federal guidance regarding the development of the KHIE, navigation of ever-changing environments at the state and local level related to health information organization (HIO) development in the state, and the continuing process of consensus building around planning and implementation of HIE at both the state and federal level. This includes both lessons learned and evaluations of shifting priorities through the project.

Development of KDHE Laboratory Process and Procedure Course on KS-TRAIN

Thor Elliot, AAS, MLT, Kansas Department of Health and Environment

Abstract: *This KPHLI capstone project will create a TB nurse lab training course that can be accessed via KS-TRAIN by county health departments, clinics, hospitals, and doctors handling a TB case. The course will be broken down into three segments: pre-analytical, analytical and post-analytical. At the completion of each segment, a test will be given to confirm successful completion or to re-direct to specified areas for reviewing and retesting. The TB program for the state of Kansas has already made plans to utilize this course as a mandatory section of their TB nurse training curriculum. This project addresses the public health need for up-to-date training material easily accessible to small and remote Kansas counties. This project also addresses the public health need for an active quality assurance program that will improve the patient care for our state.*

Evaluation of Child Care Health Consultation in Kansas

Rebecca Gillam, LMSW, University of Kansas

Abstract: *This paper describes the results of a year-long evaluation of Child Care Health Consultation (CCHC) in Kansas. CCHC is a strategy to improve the quality of child care by providing trained nurses with specific expertise to support child care providers. In Kansas, CCHC was implemented in 2009-2010 by a group of thirteen public health nurses who chose to participate in a voluntary CCHC project. The evaluation was designed to determine the factors that motivated voluntary participation in the project, the methods for implementation of CCHC, the barriers to implementation of CCHC in a voluntary system, and the lessons that can be learned moving forward with CCHC in Kansas. Evaluation included one focus group and three online surveys that captured information on the implementation of CCHC over the year following completion of the training. Results indicate that participants had both personal and professional motivations for participating; that sustainability of voluntary implementation over the year after training was challenging; that time, resources, and perceived lack of need for CCHC services were barriers to implementation; and that there are questions that should be addressed by early childhood leadership about the role of CCHC within the state's early childhood system before moving forward with any future implementation of CCHC in Kansas.*

A Documentation Model for Contact Investigations in Tuberculosis Control Programs for Local Health Departments

Preston Goering, BA, MA, Sedgwick County Health Department

Abstract: *This project developed forms to assist in the guidance and documentation of a contact investigation in active tuberculosis disease cases. Such documentation would not only*

guide the process but provide a basis for tracking the progress, assuring thoroughness and completion, and evaluating contact investigations. The forms are based on an analysis of the Centers for Disease Control and Prevention's "Guidelines for the Investigation of Contacts of Persons with Infectious Tuberculosis" of 2005 and the TB module in the Kansas Electronic Disease Surveillance System (TB-PAM). The forms were further developed through use in several confirmed and suspect TB cases and actual contact investigations. Further analysis, revisions, and refinements are required by those who are trained and experienced in contact investigations and through continued use during investigations.

Chronic Disease Self-Management Program

Sharolyn F. Jackson, BS, MS, K-State Research and Extension, Northeast Area

Christine McPheter, BSEd, K-State Research and Extension, Meade County Extension Office

Abstract: *The Chronic Disease Self-Management Program (CDSMP) was developed at Stanford University Patient Education Research Center. In 2008, the Kansas Department of Health and Environment (KDHE) and K-State Research and Extension (KSRE) created a partnership to build the foundation to embed the Kansas Optimizing Health Program (KOHP). KOHP is an evidence-based intervention for improving and managing chronic health conditions, and it serves as the vehicle for delivering the CDSMP in Kansas. The CDSMP has been shown to provide participant benefits, including fewer days in the hospital, decreased functional limitations, less health distress, fewer outpatient and ER visits, and less fatigue. While Christine and Sharolyn have vast experience in delivering educational programs in communities, the delivery of this program is quite different. Stanford requires that all participant workshops be taught by co-leaders, and the process or way the CDSMP is taught is as important as its content. Educational programming provided by KSRE is prevention-based, and their experience is in prevention of chronic disease. The CDSMP targets individuals who have chronic disease. The learning opportunities for Christine and Sharolyn have focused on understanding the concept of self-efficacy and the strategies to enhance self-efficacy, facilitating group learning and managing conflict that might arise, assist participants with making action plans, and leading discussion around individual problem solving without displaying personal judgment from leaders or participants.*

Addressing Kansas Children's Health Issues through a Health in All Policies Approach

Tatiana Lin, JD, MA, Kansas Health Institute

Abstract: *The United States spends more on healthcare than any country in the world (\$2.3 trillion in 2008), but falls behind on most measures of health status. Rapidly rising health care costs in recent decades have prompted the search for new approaches that would lead to better health outcomes. However, decreasing health care costs and achieving better health outcomes is a complex issue that requires a systematic, multi-faceted approach. Historically, health issues were seen as a "business" of the health sector. Although a great deal of progress has been achieved by the health sector, the increasing complexity of issues (obesity epidemic, high rates of asthma and dental caries) challenges the existing system and its chance to succeed. The call for action resulted in a new concept, "Health in All Policies," first developed by the World Health Organization and initially referred to as "intersectoral action for health." The core of this concept is the belief that the improved health of population can be achieved "when sectors work in partnership" and "when health is everyone's business." Although this concept is relatively*

new in the United States, it has been rapidly gaining attention and support from prominent national health organizations such as the Centers for Disease Control and Prevention (CDC) and the National Network of the Public Health Institutes (NNPHI). This capstone project will focus on the “Health in All Policies Approach” as an essential model for addressing Kansas children’s health issues. Specifically, the project will use the issue of children’s oral health as an example of how the health in all policies approach can be implemented.

Sexually Transmitted Diseases in Sedgwick County Demographics of Patients Treated in Via Christi Regional Medical Center Emergency Rooms Wichita, Kansas: A Retrospective Study

Pamela Martin, ARNP, MBA, Sedgwick County Health Department

Abstract: *In 2005, the Sedgwick County Health Department (SCHD) Medical Officer, Dr. Doren Fredrickson, worked with a group of University of Kansas School of Medicine-Wichita (KUSM-W) residents and staff to complete a project focused on 2005 local statistics regarding hospital emergency room (ER) admissions. They noted that a high number of Sedgwick County residents used ERs for diagnosis and treatment of sexually transmitted diseases (STDs). Through a chart review of Via Christi Regional Medical Center (VCRMC) ER cases, they also noted that the majority of clients were uninsured. In comparing ER cost and SCHD cost per client for STD screening, the team discovered opportunities to reduce ER admissions by promoting greater use of SCHD for these services. The purpose of the research project is to determine whether Sedgwick County residents have reduced their use of local hospital ERs for diagnoses and treatment of STDs since the initial study was conducted in 2005 by KUSM-W residents. Four years of emergency room data, Kansas Department of Health and Environment reports, and health promotion activities that promote increased awareness of STD screening services at the SCHD were reviewed.*

Charlie’s House: Home Safety for Parents and Caregivers

Katie Schatte, BSE, Johnson County Health Department

Abstract: *Unintentional injuries are the number one cause of death in Kansas children 1-14 years of age. Charlie’s House, a non-profit 501(c)3 organization, was founded in 2007 to educate parents and caregivers on the prevention of unintentional injury in and around the home. This organization’s plan is to build a safety demonstration house called Charlie’s House, which will show different safety devices that parents and caregivers can use/install in their own homes. This capstone project will capture baseline community data that will drive community education programs and assist in the development and design of Charlie’s House.*

Top Down and Bottom Up: Connection Gap Assessment

Jane Shirley, RN, BSN, MSE, Kansas Department of Health and Environment

Becky Tuttle, BS, MA, Sedgwick County Health Department

Abstract: *This project involved using a survey tool and conducting interviews to assess gaps that may exist in Kansas for the dissemination and sharing of health information resources, including educational materials, data, grants and professional development opportunities. In addition, efforts were made to assess gaps that may exist for locating and accessing those same resources. Surveys were conducted via an online instrument, and a group of targeted individuals were recruited for completing more in-depth telephone or in-person interviews. The overall purpose of this project was to establish the need and value to users for a statewide resource*

bank, web-based portal, or other tool that could provide improved access and dissemination of resources. The survey instrument was developed and tested by the authors using a common online survey tool. Recruitment for participants was conducted through public health and educational listserves. Data collection goals included 1) reaching a broad and diverse professional population, 2) gathering responses from a relevant audience, and 3) defining gaps that may exist regarding locating, accessing, or sharing identified resources and materials. Survey results indicated a widespread need for and interest in improved access to available statewide resources, as well as the need for improved communication routes for dissemination of information and awareness of opportunities..

Smoking Ban Legislation Effect on Acute Myocardial Infarction (AMI) Rates in Kansas: A Preliminary Exploratory Analysis

Victoria Wangia, PhD, University of Kansas Medical Center

Abstract: *This capstone project sought to identify Kansas locations with smoking ban legislation in effect for at least 3 years, determine if preliminary trends could be observed to suggest that adoption of smoking ban legislation may have had an impact on Kansas AMI rates, and provide a foundation for further research. Results show no significant association between implemented legislation and AMI rates; however, as further data becomes available, other studies should examine this effect over a longer period and in more locations. Future studies should also take into consideration the protected populations exposed to secondhand smoke as a result of commuting and exposure in exempt locations.*