Kudos to You

I would like to thank Deandra “De” Troutman (District Receptionist) for always being friendly and helpful related to scheduling company cars. Her smile and helpful attitude goes a long way, after a long day.

-Suzanne Craig

Thank you Joe Powers and David Hunter for working and fixing our printer. Thank you Gentlemen.

-Suzanne Craig

Kudos to Cathy Brooks (Daviess County Health Center) for hand delivering a birth certificate paper to an elderly lady who stopped in District Office for help. She was unable to get around without assistance so it was greatly appreciated. -Shanni Jones

Kudos to Nancy Walker and Sheila Horn for bringing several new members to the Daviess County Diabetes Coalition (DCDC). New “lifeblood” to any organization is crucial and hard to come by. Well Done Nancy & Sheila!

-Carman Allison

Community Health Assessments

Why is the Green River District Health Department spending valuable resources on conducting Community Health Assessments (CHA)? CHA’s provide information for decision making in program planning and implementation, budgeting, policy formation, and evaluation. It helps us measure how well we are meeting the Ten Essential Public Health Services and the three core functions of public health (see chart below).

In addition, a CHA helps establish a community health improvement plan. The community health improvement plan (CHIP) takes the data derived from the CHA to identify priority issues, develop strategies for action and provides a method by which we can measure health improvement.

As the Green River District moves toward Public Health Accreditation, a CHA and the CHIP are required prerequisites to applying for accreditation. Our partnership with the KY and Appalachia Public Health Training Center (University of Kentucky College of Public Health) has helped us be well on our way to fulfilling these requirements for accreditation. During January 2012, GRDHD conducted 9 Community Health Forums throughout the 7 counties of the Green River District. In addition, an online survey was available for those who did not have the opportunity to attend a forum. The purpose of the forums and the survey was to give all citizens of the community an opportunity to voice their opinion on the health status of their community. The information collected will be summarized and distributed in a format to help us begin the next step in developing the CHIP.

If you have questions about the process or have an interest to learn more, please do not hesitate to contact one of the Senior Management team.

-Debbie
National Nutrition Month® is a nutrition education and information campaign sponsored annually by the Academy of Nutrition and Dietetics, formerly the American Dietetic Association. The theme for this year is "Get Your Plate in Shape."

USDA's new MyPlate food guidance system is comprised of the new MyPlate symbol and other materials to help Americans make healthy food choices and to be active every day. The ChooseMyPlate.gov website has the following information to help you learn more about the MyPlate icon:

- Sample menus and recipes
- SuperTracker and other tools
- Tips for increasing physical activity
- "10 Tips Series" education handouts for consumers & professionals—some topics include:
  - Be a healthy role model for children
  - Eat seafood twice a week
  - Eating better on a budget
  - And many more!
- Log on to learn more

Try the following tips from the Academy of Nutrition and Dietetics to “Get Your Plate in Shape:”

Make half your plate fruits and vegetables.
Make at least half your grains whole.
Switch to fat-free or low-fat milk.
Vary your protein choices.
Cut back on sodium and empty calories from solid fats and added sugars.
Enjoy your food but eat less.
Be physically active your way.

Check out www.eatright.org to learn more about these tips plus you can access more yummy recipes!

- Tricia Foster, RD, LD

West Texas Chipotle Chicken Salad Wrap
- Lori A. Miller, RD, LD

| 1/2 cup reduced-fat mayonnaise
| 1/4 cup light sour cream
| 2 Tablespoons fresh lime juice
| 1 jalapeño pepper, seeded and minced
| 1/2 tsp. diced chipotle pepper
| 1/4 tsp. salt, optional
| 3 cups cooked chicken, cut in 3/4” cubes
| 1 cup chopped tomato
| 1 avocado, peeled and chopped
| 3 Tablespoons chopped fresh cilantro
| 6 flour tortillas

Nutrition Facts per Serving:
- Calories: 480
- Fat: 20 g
- Saturated Fat: 4 g
- Protein: 28 g
- Sodium: 820 mg
- Carbohydrates: 48 g
- Fiber: 4 g

This trendy southwestern style of chicken is a snap made with supermarket rotisserie chicken. Make this the day before serving and let the flavors meld. Wrap in tortillas or serve on a bed of lettuce. Makes 6 Servings - Serving Size 1 Wrap

1. Combine the mayonnaise, sour cream, lime juice, jalapeño, chipotle peppers and salt in a large mixing bowl.
2. Place the chicken, tomato, avocado, and cilantro in a bowl with the mayonnaise mixture and toss lightly to coat.
3. Top each of the 6 tortillas evenly with the chicken mixture. Roll.

Tips: This filling can serve as a cold entrée, a wrap sandwich filling or tasty pasta salad (add 2 cups cooked orzo and increase the seasonings to taste). The chipotle, a dried roasted jalapeño pepper, is also available in powdered form.

Recipe provided courtesy of John Wiley & Sons, From American Diabetic Association Cooking Healthy Across America by American Dietetic Association and Food and Culinary Professionals, A Dietetic Practice Group of ADA ©2005, John Wiley & Sons.
Get Movin’ Update

The GRDHD employees in the Get Movin’ challenge are still going strong in their journey to get moving. The GRDHD Team 1, led by Nancy Walker, have logged over 2,000 minutes each week so far. Many of their team members are runners and log over 300 minutes per week. Members have set their own personal challenges such as walking at least 5 days a week or trying to log more minutes than the previous week. One team member is trying to set a good example for their family by exercising and is getting the whole family involved in activities.

The Calorie Crunchers, led by Sarah Davis, are improving each week with hopes of reaching the main goal of 30 minutes a day average for the whole team. The finance girls have started walking as a group after work. After feeling the muscle strain that comes with going from couch potatoes to work out divas, they have even started an informal afternoon yoga class, here at the district building, to help with stretching it out. Some of the members included their spouse in their goals to ‘Get Movin’ with Zumba being at the core. Others have chosen stationary machines and walk with their favorite book on a treadmill or race to their favorite TV show on an elliptical. Several team members get plenty of exercise with the help of their children and most have accompanied their workouts with a healthy eating plan in mind even if not always in practice.

For a look at the current team standings or for more information visit www.getmovin2012.com!

Submitted in part by Nancy Walker, Sarah Davis and Shanni Jones

TEC Survey Results

The Technology Evaluation Committee would like to thank those of you who participated in the TEC Survey a few months ago; we had good participation. The results were very enlightening and have helped bring attention to several issues. As you may be aware, we are replacing all the intake computers at each Health Center. The survey showed a primary frustration of a large percentage of users was having an older, slower computer. The HANDS program received laptops for the Home Visitation staff which has made their program much more efficient in regards to using an all-electronic charting system and in utilizing Skype for communication between staff and supervisors in that program.

Some issues with mail attachments for some staff using GRDHD webmail were also discovered and as a result, we are gradually switching everyone over to Outlook. The survey also suggested the Ticketing System the I.S. Department put into place has been good for communication and in getting your technical issues resolved. As we look toward moving to Electronic Medical Records and other changes in the very near future, we want to encourage everyone to share their thoughts and ideas with committee members and to please participate in future surveys to make your opinions known. Thanks!

Current TEC members are: Candi Kamuf, Veronica Stallings, Cathy Kirby, David Hunter, Tina Flener, Tara Clem, Bonnie Barr, Lisa Paul, Shannon Bartimus, Carrie Conia, Laura Brown, Angel Thompson and Debbie Fillman.

Submitted by David Hunter
“Where do I begin?” is often the first question asked when trying to conduct quality improvement (QI) measures. Constructing a flow chart can help illustrate the current process to identify problem areas and opportunities for improvement. In addition to its usefulness in addressing QI issues, flow charts promote understanding of “the big picture” and can help with training, communication and the logical flow of actions to complete a process.

There are many ways to create a flow chart, but all you really need to do is accurately depict the unaltered current process. From there, you can analyze the diagram for possible changes, implement improvements and review/repeat the process as necessary.

**Constructing a flow chart as part of the Quality Improvement Process**

1. Write down the main steps of your process from start to finish.
2. Insert details to clearly define each step – answering who, what, when, where, why and how can help.
3. Review the chart for completeness and identify problem areas (waste).
4. Brainstorm ideas to address problem areas.
5. Select and implement changes to improve problem areas.
6. Monitor the process. Keep the good, eliminate or improve the bad.
7. Repeat and adjust as necessary.

-Carrie Conia
We recently served a family with two young children. The father in the home is father to one child but not the other. The parents are both ex-military and suffer from mental health issues due their service. Dad works and mom has been unable to find work for the past three months. The youngest child is over two years of age and the parents wanted to potty train him, but didn’t know how. As mom tells the story, her son was in the process of being potty trained when dad spanked him for wetting his pants. Since the spanking the child refused further attempts at training.

The home visitor took lots of information on potty training and spent time going over the materials with the parents. The home visitor explained that the child had just turned two when parents had first tried toilet training, so it was early for training, but now that time had passed, success would be more likely now that he is almost 2 ½ years old. Home visitor helped the family set a day to start and reviewed the process as well as the importance of praising the child for his efforts.

The home visitor arrived one afternoon to many smiles. The family had begun toilet training 5 days before and the child was doing very well with few accidents. They had even transitioned from Pullups to underwear. The home visitor praised everyone’s efforts. There was an accident that day during the visit, but the parents remained calm and cleaned up the child and reminded him that he needed to go on the toilet.

The initial assessment for this family for parental capabilities was a score under baseline. Currently they have reached baseline and are beginning to score above baseline. This is important because the assessment measures the increase in knowledge and application of skills by the parents.

This family has begun to learn how to budget their money in addition to learning about parenting. The children are learning information needed for success in school while the parents are learning the importance of consistency, setting firm limits and praise.

- Linda Wahl

ASTHMA AWARENESS COLLABORATION

GRDHD is collaborating with the Purchase District Health Department in promoting asthma awareness. Tulsa University will be conducting school environment assessments at selected schools in each district. Webster, Union, and Henderson will be our counties involved in this project. On March 15 the researchers from Tulsa will be conducting a one and one-half hour public information session detailing results of their appraisals of the selected schools in each county. This meeting will be held in the morning at the Henderson Extension Office Expo Center. Later in the fall the researchers will offer a 1-day training which will be held in Paducah, for more in-depth regional indoor air quality and asthma management workshop for the whole western region. This will be for community stakeholders and school personnel as well.

- Don Crask
STOP!

Have you signed in or out of the building? As everyone should know by now, the sign in/out log book is crucial for the safety of our staff and the safety of the responders who may be needed to help us in the event of an emergency or disaster.

With the concepts of LEAN THINKING, several individuals within the seven county area, have come up with a NEW plan for how we will all handle the sign in/out log books.

Starting April 1st (no fooling 😊) we will have issued to each health center and/or program, new sign in/out logs that will last for one quarter – or three months. This book will be sent from Shanni Jones in the district office. We have explored ways to make sure these new log books get to you in a timely manner, so approximately two weeks before the book expires (no more sign in/out pages left) there will be a reminder to let Shanni know – within two working days – of any corrections needed.

By the following week, the books will go out of the district - either being delivered by person or via snail mail. As always, there will be space provided for any additional staff that may need to use that book, but we are incorporating an important information sheet at the end of each book. This will be a comprehensive master list of essential public health staff. This one sheet will now replace two previous documents. This information sheet will also provide the county Emergency Management Directors and will be updated as new sign in/out books are created.

While ALL STAFF IN GRDHD IS IMPORTANT; key leadership has been identified in each county to include the nursing supervisor, principal clerk and environmental staff while also listing key leadership within the district offices for a coordinated response in certain events. Program call-down trees or rosters should work in conjunction with this comprehensive master list. This information is to be kept confidential as customary in our policies.

These new sign in/out log books will be kept by each health center and/or program for one year. When we get more into this LEAN THINKING process, as a new log books arrives at your health center and/or program, you will simply be able to throw away the oldest book – keeping only a year in your coffers. PRIOR to throwing away the oldest book, you would need to remove and shred the last sheet with important contact information. There is no need to send any expired sign in/out sheets or books to HR. All will be kept in their respective areas until time to throw away.

Also included on the reminder (placed approximately two weeks prior to the completion of the sign in/out log) is a place for you to add comments, suggestions or ideas. All of you can help the LEAN THINKING efforts placed on this process.

As always, should you have questions, please contact Shanni Jones or Angela Woosley.

Thanks and Keep Smiling! - Angela Woosley

Electronic Timesheets are Coming!!

Soon all staff at GRDHD will be submitting timesheets electronically and some departments already are. Staff will be provided a “master” copy of a timesheet to copy and use. All timesheets will be created and maintained in an Excel type spreadsheet and forwarded to your supervisor via email. Staff will always keep an electronic copy of their timesheet until after you receive your paycheck. Any corrections necessary will be made by the employee on their saved copy and then forwarded to their supervisor as a corrected copy.

Timesheets are due in Human Resources by Noon on Monday of payroll week.

As each department or group is brought on board to electronic timesheets, you will be notified and given a list of guidelines to use for assistance. - Rebecca Baird
In 2011, the American Diabetes Association encouraged Americans to “Join the Million Challenge” and more than 600,000 people took the Diabetes Risk Test. On March 27, 2012, the Association will aim to top that number, inspiring people to take the all-new Diabetes Risk Test, as well as to share the test with everyone they care about—friends, family members and colleagues. With each person that takes the test and knows their risk, the Association is that much closer to stopping diabetes.

American Diabetes Association Alert Day®, which is held every fourth Tuesday in March, is a one-day, “wake-up call” asking the American public to take the Diabetes Risk Test to find out if they are at risk for developing type 2 diabetes.

The new Diabetes Risk Test asks users to answer simple questions about weight, age, family history and other potential risks for prediabetes or type 2 diabetes. Preventative tips are provided for everyone who takes the test, including encouraging those at high risk to talk with their health care provider.

**Diabetes by the Numbers**

Diabetes is a serious disease that strikes nearly 26 million children and adults in the United States, and a quarter of them—7 million—do not even know they have it. An additional 79 million, or one in three American adults, have prediabetes, which puts them at high risk for developing type 2 diabetes. Recent estimates project that as many as one in three American adults will have diabetes in 2050 unless we take the steps to Stop Diabetes®.

**Are You at Risk?**

Everyone should be aware of the risk factors for type 2 diabetes. People who are overweight, under active (living a sedentary lifestyle) and over the age of 45 should consider themselves at risk for the disease. African Americans, Hispanics/Latinos, Native Americans, Asian Americans, Pacific Islanders and people who have a family history of the disease also are at an increased risk for type 2 diabetes.

Unfortunately, diagnosis often comes 7 to 10 years after the onset of the disease, after disabling and even deadly complications have had time to develop. Therefore, early diagnosis is critical to successful treatment and delaying or preventing some of its complications such as heart disease, blindness, kidney disease, stroke, amputation and death.

The American Diabetes Association has made a strong commitment to primary prevention of type 2 diabetes by increasing awareness of prediabetes and actively engaging individuals in preventative behaviors like weight loss, physical activity and healthful eating. Alert Day is a singular moment in time in which we can raise awareness and prompt action among the general public—particularly those at risk.

**Take Charge of Your Health**

Studies have shown that type 2 diabetes can often be prevented or delayed by losing just 7% of body weight (such as 15 pounds if you weigh 200) through regular physical activity (30 minutes a day, five days a week) and healthy eating. By understanding your risk, you can take the necessary steps to help prevent the onset of type 2 diabetes.

You can be part of the movement to Stop Diabetes® and get your free Diabetes Risk Test (English or Spanish) by visiting the Association on Facebook, stopdiabetes.com or by calling 1-800-DIABETES (1-800-342-2383).

Although Alert Day is a one-day event, the Diabetes Risk Test is available year-round.

Diabetes is an epidemic in our region—with 400,000 Kentuckians having diabetes, and a million more at risk for developing Type 2 diabetes.
Are you at risk for Type 2 Diabetes?

Diabetes Risk Test

1. How old are you?
   - Less than 40 years (0 points)
   - 40—49 years (1 point)
   - 50—59 years (2 points)
   - 60 years or older (3 points)

2. Are you a man or a woman?
   - Man (1 point)
   - Woman (0 points)

3. If you are a woman, have you ever been diagnosed with gestational diabetes?
   - Yes (1 point)
   - No (0 points)

4. Do you have a mother, father, sister, or brother with diabetes?
   - Yes (1 point)
   - No (0 points)

5. Have you ever been diagnosed with high blood pressure?
   - Yes (1 point)
   - No (0 points)

6. Are you physically active?
   - Yes (0 points)
   - No (1 point)

7. What is your weight status? (see chart at right)

If you scored 5 or higher:
You are at increased risk for having type 2 diabetes. However, only your doctor can tell for sure if you do have type 2 diabetes or prediabetes (a condition that precedes type 2 diabetes in which blood glucose levels are higher than normal). Talk to your doctor to see if additional testing is needed.

Type 2 diabetes is more common in African Americans, Hispanics/Latinos, American Indians, and Asian Americans and Pacific Islanders.

For more information, visit us at www.diabetes.org or call 1-800-DIABETES

Visit us on Facebook
Facebook.com/AmericanDiabetesAssociation

Lower Your Risk
The good news is that you can manage your risk for type 2 diabetes. Small steps make a big difference and can help you live a longer, healthier life.

If you are at high risk, your first step is to see your doctor to see if additional testing is needed.

Visit diabetes.org or call 1-800-DIABETES for information, tips on getting started, and ideas for simple, small steps you can take to help lower your risk.
Stop TB in My Lifetime

“Stop TB in My Life Time” is this year’s theme for World TB Day on Saturday, March 24th. I find it amazing the number of individuals who I speak with that believe TB disease is only found in other countries, but not in the United States.

The fact is a total of 11,182 TB cases were reported in the U.S. in 2010 and 90 of those were in Kentucky. According to CDC data, sixty percent of the reported TB cases in 2010 occurred in the foreign born; which is eleven times higher than in U.S. born individuals. Although TB disease is curable, there were 547 deaths reported in 2009 which decrease slightly from the 2008 data where 590 deaths were reported.

At present, TB experts are being vigilant as new challenges with this disease unfold. Multi-drug and Extreme drug resistant TB is on the rise globally and nationally. Data from the Center of Disease shows that a U.S. born citizen with multi-drug resistant TB(MDR) remain at 0.7% since 1998, unfortunately in the foreign born individual the rate increased from 25.3% in 1993 to 82% in 2010.

From the data mentioned, one can see that TB is not eradicated in our nation. Ongoing education, screening and testing are vital in stopping TB disease in our lifetime. Please make it your business to know the basics about TB disease, the signs/symptoms that occur and the treatment that is essential. For more information about TB disease and the treatment to cure, visit the CDC website at http://www.cdc.gov/tb/ or notify me by phone (270-686-7747) or email Connie.Nalley@grdhd.org

- Connie Nalley, RN, Nurse Administrator/TB Coordinator

For Your Information

What is TB?
Tuberculosis (TB) is a disease caused by germs that are spread from person to person through the air. TB usually affects the lungs, but it can also affect other parts of the body, such as the brain, the kidneys, or the spine. A person with TB can die if they do not get treatment.

How is TB Spread?
TB germs are put into the air when a person with TB disease of the lungs or throat coughs, sneezes, speaks, or sings. These germs can stay in the air for several hours, depending on the environment. Persons who breathe in the air containing these TB germs can become infected; this is called latent TB infection.

Information from www.cdc.gov

Congratulations to Curtis Brooks from Ohio County Environmental.

Curtis was chosen from a random drawing of correct responses to the contest question in the last issue of the Green River Gazette.

Question:
When is National Child Abuse Prevention Month?
Answer: April

See Page 11 of this issue for your chance to win a Subway gift card!!
Policies & Procedures

CDP Portal – Viewing Employee Pay Check Stubs
✦ You must change your CDP Portal password every 30 days.
✦ If you forget your password, use the “forgot password” button on the CDP Portal login screen, you will need to know the answer to your secret question(s). Your current password will be emailed to you.
✦ If you are locked out and receive “Contact system administrator” message – contact the Local Health Department Help Desk at 1-502-564-7213 option 5 to have your password reset. If you have any other problems using CDP Portal for accessing your pay stub, please notify Kim True at 502-564-7213 option 5 or through email at: kيم.true@ky.gov

Ikon Copiers: All Ikon copiers are under service contract. If your copier needs service or you need special assistance with your copier, please contact Ikon directly at 1-888-456-6457. You will need the machine ID number (listed on a gray Ikon sticker on the front of each copier along with the phone number for service).

Company Vehicle Reminders: All company vehicle documentation must be submitted to the district office through De Troutman.

✦ Completed Mileage Logs - scan and email to receptionist@grdh.org at the end of each month. All vehicles need a separate log sheet for each month. Please remember to start a new sheet on the first working day of the month and turn in any previous monthly logs.
✦ Vehicle Services documentation, receipts and invoices – scan and email to receptionist@grdh.org promptly when services are performed.
✦ Vehicle Inspection forms - scan and email to receptionist@grdh.org

I.S.: If you have information stored on the Common Drive that is outdated, has no value to general staff or would be more appropriately housed on a different shared drive, please move it as soon as convenient. There have also been instances recently of inappropriate material being left on the public drive. If you use a form on the Common drive, make sure you copy it to your desktop before you fill it out. If you fill the form out while it’s opened on the Common drive, be sure to choose “save as” so your information won’t be left on the form. If you have questions about how to save files correctly or have need of a shared departmental drive, you can call anyone in I.S.

H.R.: Electronic Time Sheets are coming. See page 6 for details.
**New Employees**

Welcome to the GRDHD Team!

- **Jessica Berry**
  Local Health Nurse II
  Daviess County Home Health

- **Amy Contratto**
  Local Health Nurse II
  Daviess County Schools

- **Jasmine Jenkin**
  Local Health Nurse II
  School Health

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**Focus On Employees**

My family and I would like to express how thankful we are for the support shown during the death of my dad Rev. Wavie I. Sinnett. All the cards, the visitation and food that was brought for our family was greatly appreciated during this most difficult time. -**Mary Sinnett** and Family

Our sympathies to **Melanie Domerese** on the death of her grandmother.

Congratulations to **Tiffany Nalley**, School Health Nurse Supervisor, on the birth of her daughter Kierstin Bayne Nalley. She was born on December 12th.

Congratulations to **Robyn Guynn** on their birth of her grandson Rayden Lee Renfro. Rayden was born on January 24th weighing in at 7 lbs 14 oz. and was 21 1/2” inches long.

Congratulations to **Haley Fulkerson, RD** and her husband on the adoption of their new son, Elijah Thomas. Eli was born on January 1st weighing 9 lbs 2 oz. and was 22” long. Also, congrats to **Susan Fulkerson, RN** on her first grandson!

Congratulations to **Becca Logan** (Environmental Health Program Manager in Union) & her husband Ryan on the birth of their son Ryan Douglas Logan Jr. Ryan Jr. was born on October 19, 2011 weighing 8 lbs 4 oz.

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**Saying Goodbye . . .**

- Tammy Ricks, Henderson County Home Health
- Tina Postlewaite, Daviess County Health Center
- Vickie Bush, Daviess County Health Center

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**For Your Information**

If you missed the CDP Users Meeting in January, copies of the handouts are available on the common drive in a folder called “CDP Users Meeting.”

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You could win a Subway Gift Card!

CONTEST question:
When are timesheets due in Human Resources?
(hint: it’s in this newsletter!)

Send your answer to any member of the newsletter committee. Winners will be selected by random drawing to receive a Subway gift card.
**TECH TIPS**

**Chain Letters:** Everyone gets a mail message every now and then they didn't want or shouldn't have received. Junk mail and spam can come from many different sources covering many topics. In Outlook there is a feature called the "Junk-mail" folder that you can utilize. If you Right-Click on an e-mail that you do not want, go to Junk-mail on the list and look at the options. Listed there, you can block the sender and have it automatically move those files to the junk email folder. The next time you get an email from that source, it will automatically go to the Junk mail folder.

**Spam:** Any message that asks you to send out or forward emails to multiple other users is considered a chain letter. Though many people enjoy receiving a chain letter from time to time, the majority do not. Chain letters take up a lot of resources when everyone is sending 20 emails and those 20 send 20, the amount of bandwidth taken up grows exponentially. Chain letters from coworkers can often make you feel obligated to open them and if that letter went out to 20 people, a lot of time can be spent on non-work related email. If you receive a chain letter, please forward it to your home email address and keep in mind, creating or forwarding chain letters via email is against GRDHD policy.

**Don’t Forget to Watch…**

Each week, representatives from GRDHD HANDS and Community Education programs join Fox 7 News to spotlight information about our programs and general issues of public health, wellness, and prevention.

Tune in on Tuesdays at 7:40 a.m. and Thursdays at 7:20 a.m. Did you miss a broadcast? Visit the “Media Archives” on our website [www.healthdepartment.org](http://www.healthdepartment.org).

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The Green River Gazette is published bimonthly. For questions, comments, suggestions or submissions, please contact a member of the committee.

Carrie Conia ● Don Crask ● Angela Woosley ● Brea Rich
Shanni Jones ● Angel Thompson ● Linda Wahl

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**March 2012**

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**April 2012**

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