Kudos to You!

Thank you to the First Steps Program for doing such an awesome job in helping the kids transition smoothly to the EPSDT program. They ALL do such a great job of connecting children (and their parents) to other needed services and programs. - Angela Onstott

Many thanks to Daviess County Health Center staff, Cindy Fulkerson and Mary Sinnett. Thank you for your quick and professional response to a records request. - Terri Myatt

Daviess County Clinic would like to extend a big thank you to Henderson County and Deanna Adams for helping us in the lab when we were short staffed. It is greatly appreciated. - Ashley Holderby

Like, Comment, Share: The Health Department on Social Media?

According to the Pew Research Center, 65% of all adults in the United States have one or more social media accounts. For the younger age groups, 18-29, over 90% of individuals use social media. Across all age groups, the rate has been increasing drastically over the last ten years, making social media an increasingly important platform for information sharing.

Green River District Health Department is staying on the cutting edge by having a presence on not just one, but three different social media sites. Our Facebook page and profile, Twitter account, and YouTube channel are important for sharing information on local events and programs, health facts, and education. While state and local health department social media accounts are never high in popularity, they play a key role in influencing opinion and awareness. Our Facebook page has over 700 likes or rather 3.3 likes per every 1,000 residents in our district. That matches the national average for local health departments based on a 2013 study, and doesn’t account for the 400 friends we have on our Facebook profile.

Over the past few months, we have been successful in increasing the amount of materials we share on these sites. Our new average for weekly total reach via our Facebook page is over 1,000. Our Twitter account each month is having thousands of tweet impressions and one to two hundred profile visits. In May, we broke over ten thousand tweet impressions in a single month.

Our public information team is not satisfied with our existing success, and is striving to develop new campaigns on our sites and increase the visibility and interaction within our district. We don’t want to just meet the national average, but surpass it. One of these new campaigns will be a video series highlighting different programs and services of our department. The first video was shared on social media in May, demonstrating how our environmentalists conduct health inspections for festivals and fairs in our region. Our first in house video has already outperformed our existing media on YouTube.

To spread awareness of our social media accounts, we encourage our staff to follow, like, and friend our accounts on all three sites, and to invite your friends to do the same. By increasing the number of residents who see our posts and videos, we will be able to positively influence the health of our community. Members of the Public Information team include Jessica Austin, Abby Beerman, Clay Horton, David Hunter, Candi Kamuf, Anita Owens, Abby Young and Merritt Bates-Thomas who serves as our Public Information Officer.

Additionally, if you would like to share your program, an event, or general awareness about a health issue, please e-mail me to have it included in our social media outreach.

- Abby Beerman

“Green River District Health Department”

@GRDHD

Green River District Health Department Administrative Office
DAVIESS COUNTY: Daviess County is starting to have more issues with no-shows even those that schedule an appointment that morning and fail to keep it for the afternoon. The clinic is seeing more refugees that are arriving to the U.S. The International Center does not currently have a medical case manager which is making it more difficult to get the refugees care. Refugees are confused on who to go to for care. There are also cultural differences related to health care. Many of these refugees are coming from camps where they are not necessarily focusing on preventive services, etc. Daviess has added an option on the phone for Burmese so that they can choose the right option. Online WIC is going well.

DISTRICT OFFICE: The District Office welcomes Brooke Fogle as the Regional Health Council Network Coordinator. Brooke will be working with the local county health coalitions to coordinate health and wellness promotion efforts aligned with the Community Health Improvement Plan.

Working with the District Epidemiologists this summer has been an intern from the University of Southern Indiana, Addie Bryant. The internship has involved assisting with this summer's special projects as well as working on educational materials related to preventing the spread of Zika virus. Addie is Henderson County resident and will have completed her requirements for a degree in public health when her internship concludes on July 22nd.

HANCOCK COUNTY: Hancock County also noted that they are having similar no-show issues. The health center is getting quotes for sidewalk repairs.

HENDERSON COUNTY: Staff reported that they are glad all their staff are back to work. Clinic has been going well.

MCLEAN COUNTY: The clinic is getting ready for the Blitz this month. They will be doing Kindergarten and 6th grade physicals. Simplex has installed a new fire panel to repair the old one that was alarming inappropriately. The clinic also had their air conditioner fixed.

OHIO COUNTY: Staff reported that the WIC audit went all. Trees in the back of the clinic will be trimmed soon. Weather has prevented the parking lot repairs and as soon as weather allows we will schedule to fix, seal and stripe the lot.

UNION COUNTY: The clinic is waiting for the new air and heat unit to be installed.

WEBSTER COUNTY: Clinic is working on the back to school bash for kindergarten and 6th grade physicals. A WIC audit is scheduled for July. A Women’s Health audit was completed in May.

ZIKA Awareness Training

The Region 3 Healthcare Preparedness Coalition in conjunction with the GRDHD Infection Control Network met Wednesday, May 25 2016 at the Wendell Foster Center in Owensboro KY.

Glenn Skiles (University of KY Entomology Laboratory), Doug Thoroughman (PhD, MS CDC Career Epidemiology, Field Officer KDPH), and Clay Horton (RS, MPH, Environmental Health Director GRDHD), all presented to provide ZIKA Awareness Training. This training provided Zika virus disease resources and an overview of public health and healthcare system considerations and implications that are applicable to professionals in those systems, emergency management stakeholders, and other audiences.

-Submitted by Jeff Rascoe
The Green River District Health Department was excited to partner with the International Center of Owensboro in the recognition of World Refugee Day. Each year, the United Nations (UN) and other civic groups around the world recognize World Refugee Day. This year’s event and festivities were held at Owensboro Christian Church on Saturday, June 25th. The main purpose was to increase public awareness to the many refugees who have been displaced from their homeland due to conflicts in their countries.

Participants in the free event enjoyed cultural food, children’s activities and games. Handmade clothing and tote bags were available for sale. The event was filled with celebrating shared values and family time. Other community partners, such as Audubon Area Community Services, Health First, and OPD were offering informational booths. Children had the opportunity to visit the Exploration Station Bus courtesy of Daviess County Schools.

Green River District Health Department provided educational information on dental care and breast cancer screenings. Educational materials were also translated in Burmese that helped reach about 75 participants visiting our booth. A special thanks goes to Susan G. Komen for helping provide translated educational material, on breast cancer awareness, for this event. GRDHD’s success in this outreach effort was due to our translators, Gennie and Dawt.

**Pink County Grant**

**Myth:** Finding a lump in your breast means you have breast cancer.  
**The Truth:** Only a small percentage of breast lumps turn out to be cancer.  
**But,** if you discover a persistent lump in your breast or notice any changes in breast tissue, it should never be ignored. It is very important that you see a physician for a clinical breast exam.

Information from National Breast Cancer Foundation, Inc. www.nationalbreastcancer.org
Kentucky overdose fatalities increased in 2015. Overdose deaths of Kentucky residents numbered 1,248 as tabulated in May 2016, compared to 1,071 overdose deaths counted in the 2014 report.

What does this data tell us about Green River District? “This data concerns us all” states Daviess County Coroner, Jeff Jones. “Typically the trend is for this area is to be about two to three years behind what’s happening in the larger cities. We all know that the best time to prepare for the storm is before it hits, not during the rain and severe weather.” In 2014 Daviess County has had three deaths* directly attributable to heroin overdose. “Any unnecessary death should be alarming to the public” continues Jones as he discusses the death rate related to overdoses.

Reports from coroners (through autopsies and toxicology screens on the deceased) show overdose deaths attributed to the use of heroin were involved in approximately 28 percent of deaths in 2015.

“As I read the latest report on overdose deaths in Kentucky, I am heartbroken for the Commonwealth,” said Gov. Matt Bevin. “More than three families a day are shattered by this epidemic of untimely death. This is unacceptable and will be vigorously addressed with every resource at our disposal.”

Heroin – known by the nicknames such as Black Tar, Big H, Dog, Horse, and Puppy Chow, is a highly addictive drug derived from morphine, which is obtained from the opium poppy. Heroin can be injected, smoked in a water pipe, inhaled as smoke through a straw, or snorted as powder through the nose.

A growing number of young people who began abusing expensive prescription drugs are switching to heroin, which is cheaper and easier to buy. The reason may come down to basic economics: illegally obtained prescription pain killers have become more expensive and harder to get, while the price and difficulty in obtaining heroin have decreased. An 80 mg OxyContin pill runs between $60 to $100 dollars on the street. Heroin costs about $9 a dose. Even among heavy heroin abusers, a day’s worth of the drug is cheaper than a couple of hits of OxyContin.

One method of prevention being considered by GRDHD is a Needle Exchange Program (NEP). The NEP is a public health program that reduces the spread of communicable diseases by exchanging sterile syringes and needles for contaminated syringes and needles along with proper disposal of the contaminated syringes and needles. A NEP will also provide access to other health services such as drug treatment, education, counseling, enrollment in health coverage, etc. Legislation enacted in 2015 allowed for Public Health Departments to operate such a program.

Research has proven that with a successful NEP the spread of Hepatitis C and HIV infection from shared needles is curtailed, plus the addicts are 5x more likely to enter into treatment than those who had never used an exchange program. It is important to note KY ranks #1 for Acute Hepatitis C in the US which is not a ranking to make the Commonwealth proud.

“The decision has not yet been made as to which county in the Green River District would be the first for a needle exchange program. Input from partners within the county such as the mental health providers, law enforcement, the faith based community, Matthew 25, and others would be an important part of the decision in initiating a Needle Exchange Program. Each County Public Health Taxing District Board of Health and the District Board of Health has begun discussions regarding the possibility of starting a program within our district,” comments Debbie Fillman, PH Director. “Every county with the exception of Ohio County (who had concerns related to funding, not over the actual NEP concept) has given us permission to move forward and begin planning during this next fiscal year.”

A Needle Exchange Program is often misunderstood as a program to enable Injection Drug Users; rather than a proactive response to prevent spread of infectious disease and protection of the public and law enforcement from accidental needle sticks, explains Fillman as she tries to educate on why NEPs are seen as controversial.

The steps needed to begin a Needle Exchange Program include:

- approval by the Green River District Board of Health of a Policy on Needle Exchange;
- approval by the Fiscal Court;
- approval by the City Commission;
- Public and partner education and awareness programs are important components of a successful NEP.
The data tells us there is a problem and it’s at our back door. Public Health promotes prevention. With education, proper planning and consideration of funding, a NEP may be something on the horizon to help prevent overdose deaths from continuing to rise.

<table>
<thead>
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<th>Overdose Deaths*</th>
<th>2012</th>
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<th>2014</th>
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<tr>
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<td>14</td>
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<td>11</td>
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<tr>
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</tr>
<tr>
<td>Webster</td>
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<td>&lt;5</td>
<td>&lt;5</td>
</tr>
</tbody>
</table>

*Office of Drug Control Policy, Overdose Fatality Report

I have worked at the Health Department as a nurse for a little over 2 years. Telling you I am nurse might not be as revealing as you think because nurses have various roles at the Health Department so let me give you a few more clues:

I was born & raised in Louisville but I grew up in a house that only watched UK games & still bleed blue. I attended LTI & UK. I have been married for almost 31 years & have one son & a very sweet daughter-in-law. I also have 2 babies: one is a miniature golden doodle who is a momma’s girl and the cutest, sweetest dog on the planet. My other baby is also a full- size golden doodle – also the cutest, sweetest dog on the planet! One of my favorite childhood memories is wading in our creek with my sisters & riding our tractor.

In my free time, I love spending time with friends & family. I love older music, especially Motown, 70’s & 80’s music. I also enjoy working crossword puzzles & watching old comedies, especially The Andy Griffith Show. I do not like to cook, nor am I very good at it. I love all the local restaurants & like to try new places. I have been known to try a “weird” food every now and then, including Alligator meat.

The person I most admire is my mom. She has had several major health issues that started when she was only 38 years old. She has dealt with & continues to deal with it with grace, faith and strength, never complaining.

People would be surprised to learn that even though I am terrified of heights, I have bungee jumped and though not a very good swimmer, I have gone white water rafting on a several occasions. One of the white water excursions was on the same river where Deliverance was filmed after a huge storm had passed the morning of our trip.

On my bucket list: To visit all 50 states.

My favorite quote from Lou Holtz: “Do right. Do your best. Treat others as you want to be treated.’

Who Am I?  (See page 9 for the answer)
How the WIC Program Supports Breastfeeding

In 1997 the WIC program implemented the “Loving Support Makes Breastfeeding Work” campaign to improve breastfeeding rates and provide information about breastfeeding to all WIC participants.

In 2003-2004, the National WIC program created the Peer Counseling Program and KY State WIC launched the “Shape the Future Breastfeed” promotion.

The Peer Counseling Program employees women of the community that have successfully breastfed their own children and can provide counseling and support to WIC participants that are breastfeeding or planning to breastfeed.

In 2009 the WIC program performed a complete overhaul of the food packages to more appropriately meet the Institute of Medicine’s recommendations and the Dietary Guidelines for Americans. Also at this time the Breastfeeding mother’s food package was increased to encourage exclusive breastfeeding among WIC participants.

In 2011 the Surgeon General put forth a call to action regarding the importance of breastfeeding for mother and child. Since this time the KY WIC program has worked tirelessly to increase funding, promotion, and action towards increasing breastfeeding rates.

The GRDHD plays a vital role in the overall attempt to increase breastfeeding rates across the state. WIC staff in each of the seven counties we serve are crucial to improving the health of each person that comes into the clinic. Keep up the good work!

For any WIC staff that sees breastfeeding patients and/or issues breast pumps there are several Train videos available to increase your knowledge. An updated Breast Pump Policies and Procedures training video is now available on Train ID# 1061244. WIC Breastfeeding Basics on Train ID# 1062363. Using Loving Support to Grow and Glow in WIC Train ID# 1026852.

Western KY Breastfeeding Coalition Annual Conference
The WKBC annual conference will be held in Bowling Green at the Medical Center/WKU Health Sciences Complex on August 5th from 7:45 AM to 4:15 PM. Guest Speaker Melissa Cole, BS, IBCLC, RLC will discuss current issues in lactation. For more info email jamie.baker@grdhd.org

GRDHD to host the next WKBC meeting
Meeting will be on September 14th at the District office in the Bedford Walker room from 11 AM to 2 PM. Food will be provided and speaker TBA.
Lend You a HAND?

Most parents would probably agree that on any given day they could use an extra pair of hands.

Every day in the Green River District, there are staff helping new parents, or families with multiple children, through the HANDS program. Kentucky’s Health Access Nurturing Development Services, HANDS, supports families as they build healthy, safe environments for the optimal growth and development of children.

HANDS is a home visiting program for pregnant moms-to-be and new parents that supports all areas of a baby’s development. From pregnancy to the “terrific”-twos, HANDS is there to answer all the questions parents have during the different stages of their baby’s growth.

When a family joins the HANDS program, a Family Support Worker, or FSW is assigned to the home to meet weekly with expecting or new parents. The FSW is an experienced partner that helps families be the best parents they can be. In the comfort of their homes, family learn through fun activities how to have a healthy pregnancy, bond with their child, provide a safe environment and boost their child’s development. Stress management and community resources are also provided to the family as needed.

Goals and milestones are set with each family unique to the needs of the baby and their development. Families learn healthy eating habits, bedtime routines and how to baby-proof. In a typical week, a FSW might help a new mom learn about PURPLE crying, how to encourage tummy time, and using everyday items to boost language and brain development. Who knew some duct tape, a tube sock, and a plastic coffee can could help a baby learn?!

HANDS currently sees around 460 families in the Green River district with over 9,082 home visits last fiscal year. Families who participate in HANDS experience:

46% less-Low Birth Weight
26% less- prematurity
74% less- Infant Mortality
47% less- substantiated Child abuse and Neglect

HANDS believes that all families have strengths and want the best for their child. If you know someone who would benefit from joining HANDS, refer them to their local health department today! - Heather Blair

Why Do We Have Home Visiting?

Home visiting has been proven many times through evaluations and research to have a positive impact on families with children.

It is an effective strategy in reducing or preventing child abuse and neglect, increasing numbers of children who are fully immunized and receive well child check-ups. Home visitation provides parents with knowledge on growth and development, age-appropriate activities to stimulate brain development.

Home visitation screens children for developmental delays and refers the families to appropriate care such as First Steps or EPSDT. Early detection of delays and the provision of services helps children be ready for school.

Recent studies have indicated that toxic stress and adverse childhood experiences have consequences lasting far into adulthood. When a child is experiencing stress the brain is bathed with cortisol which inhibits learning and retention of what is being taught. Everyone experiences stress including children, but the daily unrelenting stress in some children’s lives can actually alter how the brain develops.

A child with altered brain development, living in constant stress will have significant challenges in school. This has a negative effect on the child cognitively and emotionally. Negative behaviors can develop to cope with the daily challenges. As the child becomes a teen, there is a higher risk of suicide, dropping out of school, truancy, becoming a teen parent. This continues into adulthood.

Children who grew up in toxic stress and have more than 3 adverse childhood experiences are now at a much greater risk of depression, hypertension, heart disease, morbid obesity. This contributes to higher healthcare costs, higher premiums for us. Taking care of our youngsters may seem expensive now, but it is an effective way of reducing costs farther down the road. The CDC calls the adverse childhood experiences a public health issues.

Home visiting has been proven to be an effective strategy in overcoming some of the negative effects as well as preventing them from occurring in the first place.

-Linda Wahl
Staff members from Union County Health Center participated in a 5K Superhero walk/run for local charity UCWEECAN (Child Abuse Prevention) on June 4th. The group dressed as the Green River District Ninja Turtles!

Pictured L to R: Misty Wolfe (Non-employee), Erica Schmied, Toni Pierson, Donna Matheny, & Ethan Martin.

May 12, 2016—First Steps staff meeting. In celebration of being fully staffed we participated in some team building activities. Pictured on front row is Mary Fuqua and Cathy Bland. Back row, left to right, is Mitzi Helton, Shelley Poole, Kim Jones, Jaime Forsythe, Sara Wilson and Stephanie Clark.

In addition, we received our annual district determination letter from the State Lead Agency that monitors the implementation of Individuals with Disabilities Improvement Act (IDEA) requirements by local Early Intervention programs. We scored in "meets requirements", which is the highest level of achievement. The information used to make determinations is the district performance data for each indicator in the Annual Performance Report/State Performance Plan.

The district determination letter was received on 6/2/16 and it was for the fiscal year of July 1, 2014 through July 30, 2015.

Pictured above: Several staff members participated in the “Bridging the Gap” Training.

Pop Quiz!
We all know Kentucky summer’s can be brutal! The hot, humid days bring with them the need for proper sunscreen use. How well do you know your sunscreen?

Q: How long is a bottle of sunscreen effective? Choose one: One year, 3 years, or 6 months

Please send your best guess to any Gazette committee member. Everyone gets a chance to win! The correct answer will be revealed in the next issue of the Gazette! **Winner will be chosen from a random drawing of ALL responses. Prize courtesy of the Gazette Committee. Deadline to submit is close of business on Wednesday 7/27/16.
Policies and Procedures

**Updates & News**

- **01.04.06 Workplace Safety and Security Procedure** – The procedure was updated to reflect changes in the storage of Safety Data Sheets (SDS).

- **01.04.07 Drug Free Workplace Procedure** – This is a new procedure that outlines drug testing guidelines at GRDHD while assuring compliance with the Drug-Free Workplace Act requirements found in the Administrative Reference.

- **02.03 Leave Provisions Procedure** - This was updated under the FMLA section to clarify that after an absence of three days HR must be notified.

- **04.07 Agency-Owned Equipment and Supply Issuance Procedure** - This procedure was revised to clarify the process for retrieving agency issued equipment from staff upon their employment termination with GRDHD and also provides guidance when equipment is issued to anyone outside the agency.

- **04.07.01 Agency-Owned Equipment Return Checklist** – This form was revised from an “issuance” form to a “retrieval” form for agency issued equipment.

- **08.04 Quality Assurance for Medical Charts Procedure** – This is a new procedure that provides guidelines for auditing medical charts in accordance with the Administrative Reference.

The following were reviewed:

- 01.04.04 Conflict of Interest and Ethics Procedure
- 01.04.04.01 WIC Conflict of Interest Disclosure Form
- 01.04.04.02 WIC Conflict of Interest Tracking Form
- 01.04.05 Recording Devices in the Workplace Procedure
- 02.01 Pay Procedure
- 02.01.01 Payroll/Reimbursement Direct Deposit Form
- 02.02 Employee Benefits Procedure
- 02.04 Tuition Assistance Policy
- 02.04.01 Tuition Assistance Procedure
- 02.04.02 Request for Tuition Assistance Form
- 02.04.03 Tuition Assistance Agreement and Authorization for Repayment Form

Visit the official documents drive or our website for a complete listing of our Policies and Procedures.

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**GAZETTE CONTEST**

**FOLLOW UP**

Congratulations to Sarah Rice at Daviess County Health Center for correctly answering the question in the last issue of the Gazette. The phone number to the National Cancer Institute is 1-800-4-CANCER or 1-800-422-6237. If you have cancer related questions give them a call today.

See page 8 for your chance to win this month.

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**Saying Goodbye . . .**

Jeanette Curtis, Daviess County Health Center
Rosie McMichael, District Office
Jillian Nall, Webster County HANDS
Mason Pennington, District Office

I am Lisa Stanley from Daviess County Health Center!