

## **Change Master Projects Class of 2001**

### **Critical Access Hospitals: Public Health as a Player in the Planning Process**

***Prepared by:*** Julie McKee and Bob Calhoun

***Mentor:*** Julie Sebastian, ARNP, PhD, FAAN

The federal requirements for transition of a rural hospital to become a Critical Access Hospital includes one of community assessment to match community needs and opportunities with those of the local hospital.

This project team has developed a flow chart based tool that not only satisfies that requirement, but will give the assessment results value in the shifts of the hospital and the community that it impacts.

This tool is a 'quick and dirty' exercise to that the local public health leader can implement with limited time and attention resources. It strives to show results that will improve the community while not impeding the transition process for the hospital.

It is an opportunity for the local health department to become or continue in their role of assessment, policy development and assurance. It is an exercise in leadership for the person assuming the facilitator role in this process.

### **Expanded HANDS Program for Every Shelby County Family**

***Prepared by:*** Christy Johnson, RN, BSN and Bonita Bobo, RN, IBCLC

***Mentor:*** Marcia Stanhope, R.N., D.S.N., F.A.A.N

The success of the HANDS program to reach families in need has great potential. The implementation by Kentucky's Cabinet for Health Services and the Cabinet for Families and Children of the Healthy Families America model home visitation program has given the state a great start to improve the lives of our children in Shelby County. The need for this program to be expanded to all families is imperative. The burden lies in the financial aspect of the program. We know the program has great potential for success with our first time families. Our need is to find the funding available for all Shelby County families.

This should be our greatest focus, so we may be able to give everyone the same opportunity. It would be a crime to have a high quality program in our community and no way to offer it to everyone.

Our next step would be to research available grant funding. Completion at that time would consist of proposing the expansion plan to try and secure funding. The HANDS program is already in progress in Shelby County, the expansion to all families would complete the wonderful plan already in place.

## **Fluoride Varnish: A Protective Start to Kentucky Dental Care**

*Prepared by:* Sara Dunlap, Eva Ellis, CPM, Elizabeth Farley, Janice Greer, Charles Ross and James Rousey  
*Mentor:* Jim Cecil, III, DMD, MPH

According to Healthy Kentuckians 2010: Prevention Initiative, Spring 2000, "Oral disease is a major health problem for Kentuckians. Much of this problem can be prevented through water fluoridation, dental sealants, routine dental care, and education." The project is to establish oral health programs as adjunct functions of WIC staff within local health departments across Kentucky. The purpose of applying a fluoride varnish to WIC kids is to reduce the incidence of Baby Bottle Tooth Decay (BBTD) or Early Childhood Caries (ECC). The application is safe and cheap. It is efficient since it takes about two minutes to apply by appropriately trained health department personnel. The varnish promotes remineralization thus reversing progress of caries in primary teeth. Of potential greater benefit is the development of perceptions among both children and their parents that proper oral hygiene is important to good health. The development of good habits, coupled with routine dental care could well lead to reduced levels of adult caries and edentualism.

The KPHLI group have concluded that given proper education, that a lifetime of correct habits that include proper brushing and flossing, periodic screening and treatment for caries, reduced reliance on sugary drinks, and routine dental appointments can be achieved in Kentucky through a group of incremental efforts that might begin with the application of fluoride varnish

## **Hispanic/Latino Outreach Project With an Emphasis on: Breast & Cervical Cancer & Cardiovascular Health**

***Prepared by:* Linda Grace Piker, MS, RD, LD, Patty Sewell, MPA, and Laura Harrod, MA**

***Mentor:* John Poundstone, MD**

Ongoing requests from local health departments and their community partners raised the issue of need for reaching the Hispanic/Latino population with health education messages and problems with accessibility and availability of services. The latest figures indicate Lexington's official Hispanic/Latino population has increased by 235 percent in the last decade, to more than 8,500.

The overall focus of the project was the 10 Essential Public Health Services. The Close consideration was given to the essential, which states, "Enforce laws and regulations that protect health and ensure safety." It was determined that the assurance of meeting the needs of all populations, particularly those underserved, does, in fact, fall under the scope of meeting the policies of the KWCSF and the Department for Public Health.

Appropriate objectives from the breast and cervical cancer outreach work-plan were incorporated into the Department for Public Health continuation application for CDC funding for the National Breast and Cervical Screening Early Detection Project, funded through the Kentucky Women's Cancer Screening Project (KWCSF). As a result Fayette County is planning monthly breast and cervical cancer screening outreach to the Hispanic/Latino community. The education of the scholars participating in the project in networking with the Hispanic/Latino-Latino population and their partners was invaluable, and will continue in the future.

We recommend that public health classes educating professionals in the Spanish language (to include cultural sensitivity) be made available through the State Department for Public Health, to be made available to all local health departments and their partners. These classes are being offered by other agencies for their staff such as the University of Kentucky, local law enforcement, hospitals, etc.

Through experiences gained during this project, it is clear that local health department service forms meant to be completed by clients should be appropriately translated (not only interpreted by an individual on-site with the client, but the forms should be available in the Spanish language).

As noted in the conclusion above, translation services and other legal issues must be addressed by both state and local health departments.

## **Implementation of a Public Health Class in a County High School System**

***Prepared by: Angela Woosley, RN, BSN, George Moore II and Charles Gorton, M.B.A.***

***Mentor: Marcia Stanhope, R.N., D.S.N., F.A.A.N***

The impetus that allowed this innovative educational opportunity to come to fruition was the money from the Robert Wood Johnson Foundation. If this pilot project is considered successful, then future funding would allow for greater opportunities to improve the curriculum.

Should the grant allow for continuance, then subsequent students would be able to build upon service projects that would continue to benefit the health of the community. Each student is to provide their post-secondary education plans to help determine if project objectives were satisfied.

This program was developed exclusively for McLean County High School. The health educational team selected feature speakers and field trip experiences from the surrounding areas. However, by design, a similar high school class could be developed and adapted by any interested community.

It should be noted that the eclectic range of students selected for this pilot class, provided unique challenges for all planners and coordinators.

The assigned high school professor diligently kept up with all relevant educational material and course syllabus, which required patience and organization. Full cooperation of the school board was essential due to the wide range of activities. The two directors (grant writer(s) assigned from each health and education) and a cadre of high school students recently visited Washington D.C. to present and represent this pilot project. With this recognition of innovation, this allowed yet another fieldtrip experience for the students. Being in the Nation's Capitol offered students the insight in the heart of politics and public domain.

Service projects developed by the high school students have proven to be unique in approach and will allow for growth opportunities to effect community health. Environmentalist careers appear to be an area of specific interest. This would be a logical assumption in that McLean County agricultural opportunities available to its citizenry. However, at the time of this change master project the high school public health class continues. Expected graduation is June 2001.

## **Implementing A Performance Measures System in Kentucky's Local Health Departments**

**Prepared by: Deborah Acker, Mary Ann Blanton, David Burton, Jan Chamness, Lorie Chesnut, Stephen Combs and Judy Nielsen**

**Mentors: David Gale, Ph.D. and F. Douglas Scutchfield, MD**

There is a wave of change surrounding public health. As funding sources change, as the activities to achieve the goals and mission of public health change, and as the demand for accountability increases, the need for change at the local level becomes increasingly important. Implementation of this Change Masters Project, Performance Measures, would provide the opportunity to address the changes in public health that we continue to see. We have a wonderful opportunity to benefit from change, not only within the local health department, but also within local communities. This Change Master Project, Performance Measures, is a beginning for public health in Kentucky. It is a beginning that would allow local health departments to participate in directing these changes. Although the goal of our Change Master Project is the development of a framework for the implementation of a Performance Measures System our overriding goal is the implementation of a Performance Measures System in Kentucky.

The current method used to evaluate and rank the 120 local health departments in Kentucky is somewhat flawed. It is understood that there is a need to rate or rank the performance of local health departments, however, the current method is to rank against each other using a data collection system that is subject to a great deal of human interpretation and error. This is a less than optimal approach; but it is currently the only one that is available. This may be of no great concern for those who rate at the top; but it is a real concern for those who don't. At times it even pits local health departments against each other and this should concern us all. This system does not provide a truly objective method to determine the real value of each local health department within its local public health system. It has been said, "see one of Kentucky's local health departments and you have seen just that--one health department". While this uniqueness may enable each local health department to better serve the local community, it does create difficulties in assessing the overall standard of performance at the local health department level in Kentucky. Performance measures are the key to maintaining uniqueness and at the same time developing continuous quality improvements.

## **Promotion of Family Planning Services Including Folic Acid Consumption**

***Prepared by:* Lynn Hulseley, BA, Gina Reid, RN, Joyce Robl, MS, CGC and Carol Speck, RHIT**

***Mentor:* David Dunn, M.P.H., Sc.D.**

Family planning/preconception counseling are and have always been critical issues, not just to our community, but to every community. Women need to be targeted early in order to plan for pregnancies. In addition to reducing the number of unintended pregnancies, planning pregnancies will have a positive affect on many health issues relating to both babies and women.

This plan is designed to address many facets of life, from several different perspectives. Partnering with other agencies is the only way this plan can be effective. It has been proven that long-term, lasting changes in behavior come from persistence by those who are working to promote the change. Education alone is not effective. The following plan is intended to be ongoing work for the health department and its partners. We must seek out people in our community who are willing to work together to address the issues of planned pregnancies, increase awareness of available services, raise awareness about the importance of taking folic acid prior to pregnancy, and increase the number of women taking folic acid, thereby decreasing neural tube defects.

This project is written with Barren River District Health Department as the implementation site. SAPO teams, that work to attack health problems from a community standpoint, will be instrumental in our district's implementation of this plan. These teams are not critical to this plan's implementation. Health Departments without community health improvement teams can use all or parts of this plan.

## **Is Telemedicine a Viable Public Health Intervention**

***Prepared by:* Lynn Owens, James Robert Ratliff, Jr. and Timothy W. Stump**

***Mentor:* Paul McKinney, MD**

Telemedicine had its inception in the 1960's when medical care was provided over the telephone by physicians or when physicians advised and consulted with one another via the telephone. Today the technological capabilities are far advanced from that in the 1960's but the idea remains the same—to deliver appropriate medical care when the provider is in a physically remote location from the patient. A review of the literature indicates that telemedicine and telehealth projects are proliferating across the US as well as on the international scene. A number of federal government agencies including the Veterans Administration, Department of Defense, National Aeronautics and Space Administration (NASA), Department of Justice, Department of Agriculture, and the Department of Health and Human Services use telemedicine on a fairly routine basis.

