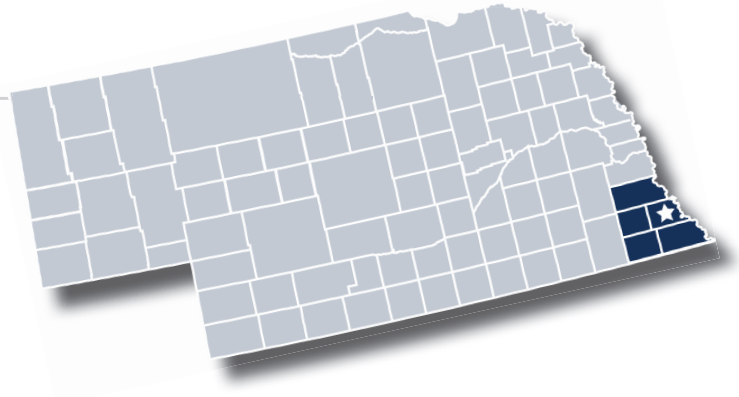


# Southeast District Health Department

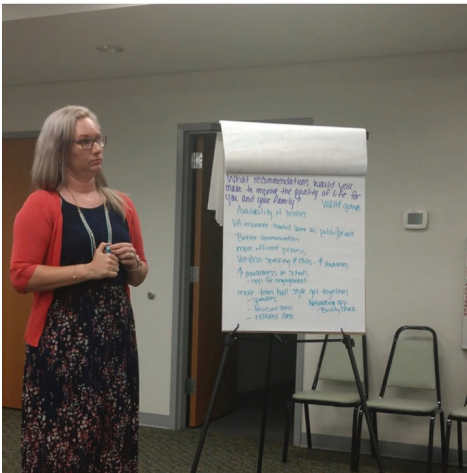
Serving Johnson, Nemaha, Otoe, Pawnee, and Richardson Counties



## Spotlight: Addressing Veteran Needs

Senator Julie Slama  
Yesterday at 8:23 PM · 🌐

Honored to join Amanda Drier and the Southeast District Health Department for Veteran's Town Halls across District 1. Tonight's stop was a very productive discussion in Nebraska City. Thank you to all veterans for your service!



Identifying and addressing the unmet needs of one priority population, the Southeast District Health Department's (SEDHD) VetSET program is collaborating with all five County Veteran Service Officers (VSO) to host veteran town hall meetings in each county.

The SEDHD jurisdiction has an estimated population of 38,000 people. Of that population, approximately 10% are veterans. The purpose of the veteran town halls has been to collect first-hand information from veterans living within the area about the quality of life, needs, and recommendations for related action planning in their communities.

As of August 2019, four out of five county town hall meetings have been completed, with 31 veterans participating. Participants have shared their stories and provided input on what is working (or not working), who or where they go to for help, and how connected they feel to their community. Overall, the response has been consistent in all counties: health care access is a major issue and veterans have a strong desire to feel connected to other veterans and to the community.

**Identifying and addressing the unmet needs of one priority population, SEDHD's VetSET program is collaborating with all five County Veteran Service Officers to host veteran town hall meetings to each county.**

Once all town hall meetings have been completed, SEDHD will create a summary report that will be used to inform a workgroup comprised of veterans, VSOs, and key community stakeholders. The workgroup will be tasked with creating an action plan that will direct veteran-supportive activities, programming, and networking opportunities to improve the quality of life for veterans and

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their families in the district. SEDHD will take the lead in developing the action plan and collaborating with local organizations to implement strategies across the district to support the health and wellbeing of veterans and their families.

This report includes examples of efforts of Southeast District Health Department to make the “Good Life” a healthy one in their jurisdiction. The following examples reflect work supported through multiple sources of funding, including monies from the Nebraska Health Care Funding Act (HCFA).

Local health departments act as communities’ Chief Health Strategists by assuring that the health and wellbeing of Nebraskans are protected and improved. Local health departments do this by working in each of the **Three Core Function Areas of Public Health**:



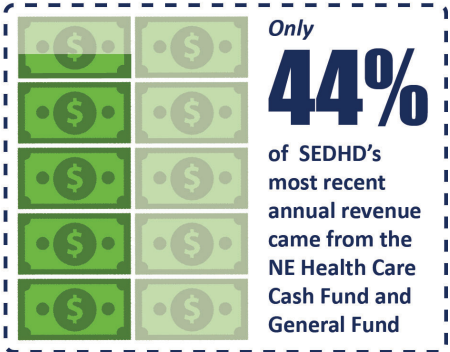
**Assessment:** Collect and analyze information about health problems in Nebraska communities.



**Policy Development:** Work with partners to apply data, educate the public, and develop programs and policies—all to address and prevent illness, disease and disability.



**Assurance:** Promote effective coordination and use of community resources to protect the health and wellbeing of Nebraskans.



## Community Health Assessment (CHA) Community Health Improvement Plan (CHIP)

Every 3-6 years, Nebraska’s local health departments (LHDs) engage local partners (including hospitals, clinics, schools, law enforcement, military and veteran organizations, economic development agencies, businesses, foundations, other community organizations, and individual community members) to identify key, local health needs and issues through systematic, comprehensive data collection and analysis. This process is known as the Community Health Assessment (CHA). LHDs take the lead in coordinating this complicated process, synthesizing the outcome data, and prioritizing identified issues. The resulting formal assessment is used to create a community-wide plan aimed at strategically improving health – the Community Health Improvement Plan (CHIP).

With CHIPs in place, LHDs take a lead driving the work toward meeting CHIP goals and monitoring progress. Much of this work is done collaboratively through partnerships and workgroups that include the diverse sectors mentioned above.

The CHA/CHIP process ensures that local communities are able to work together toward a Good, Healthy Life for all Nebraskans.

### CURRENT CHIP PRIORITIES:



Behavioral and Mental Health



Preventative Care and Screenings



Social Determinants of Health

## ACCESS TO AND LINKAGE TO CLINICAL CARE

***Access to and Linkage to Clinical Care*** includes (but is not limited to) coordination of services between medical providers and providers of health-related social needs, oral health/dental services, and behavioral/mental health.



The Southeast District Health Department (SEDHD) participates in several access-to-care activities within the district. The department's Health Hub program screens for breast, cervical, and other cancers and navigates higher-risk clients to the appropriate health care provider. The Brighter Smiles program provides dental care for adolescents who might otherwise lack preventative care and face barriers in accessing oral health care. Additionally, SEDHD community health workers (CHWs) navigate and link community members to health care—scheduling routine preventative screenings with their primary care physician.

## CHRONIC DISEASE CONTROL AND PREVENTION

***Chronic Disease Control and Prevention includes*** (but is not limited to) asthma, cancer, cardiovascular disease, diabetes, obesity, tobacco control, and worksite wellness.



SEDHD collects and monitors chronic disease-related data from primary and secondary sources. These data are included in the department's Community Health Assessment (CHA), which provides a deeper understanding of the community's health and informs the Community Health Improvement Plan (CHIP). SEDHD conducts health screenings for community members at health fairs and engages businesses and worksites in sustainable wellness activities (including: health screenings, evidence-based wellness programs, and policy changes). SEDHD staff provides education related to diabetes and blood pressure monitoring, and healthy eating and weight status. SEDHD also assists with breast, cervical, and colon cancer screenings. SEDHD is currently working with local health care partners to refer community members to primary care providers to prevent and improve management of chronic diseases.

## COMMUNICABLE DISEASE CONTROL AND PREVENTION

***Communicable Disease Control and Prevention*** includes (but is not limited to) communicable disease epidemiology (disease outbreak management/response), tuberculosis (TB), immunizations, sexually transmitted infections, and surveillance (tracking and following up on reports and provider/school reports).



SEDHD's disease surveillance and public health emergency preparedness programs collect and analyze data to monitor disease incidence across the district's five-county region. Data are shared with various community partners (schools, health care, etc.) to inform on disease incidence trends and to educate on best practices related to infectious disease prevention. SEDHD provides immunizations for children and adults to prevent vaccine-preventable diseases and links community members to other health care services when applicable.

## ENVIRONMENTAL HEALTH

*Environmental Health* includes (but is not limited to) radon, lead, emergency response, hazardous substances and sites, and Complete Streets initiatives.



SEDHD's radon program provides families with kits to test their homes, provides public education, and assists families in identifying risks and mitigation strategies. Like the radon program, the department's lead program also provides education and assists families in reducing childhood lead exposure. SEDHD's emergency preparedness programs assess to identify gaps in planning for emergencies; plan and implement exercises to coordinate and practice emergency efforts; align policies and procedures to promote cooperative response across the region; and provide a platform for collaboration between response agencies, emergency management, public health, and health care organizations to advance emergency preparedness across the district.

## INJURY PREVENTION

*Injury Prevention includes* (but is not limited to) motor vehicle injuries, occupational injuries, senior fall prevention, substance abuse, car seat safety, binge drinking, and distracted driving.



SEDHD conducts car seat checks and installations as a part of the department's Safe Kids Coalition. SEDHD's Growing Great Kids program performs home safety visits and provides childproofing supplies to families. The Southeast District Prevention Partnership, spearheaded by SEDHD, provides evidence-based substance use prevention and intervention curriculum to schools within the district.

## MATERNAL AND CHILD HEALTH

*Maternal and Child Health* includes (but is not limited to) Women, Infant, and Children (WIC), family planning, newborn screening, evidence-based home visitation, Early Preventative Screening, Diagnosis, and Treatment (EPSDT).



SEDHD's Growing Great Kids program collects developmental screenings data by way of the Behavioral Risk Factor Surveillance System (BRFSS) and other sources and disseminates this information to inform the community on maternal, child, and family health-related issues across the district. For children and families who present with a developmental delay, SEDHD refers to the Early Development Network. SEDHD supports family planning efforts through implementation of curriculum for family planning in schools and provides referrals to primary care.

***Additional public health activities that Southeast District Health Department performs to assure that the health and wellbeing of Nebraskans are protected and improved.***

The Southeast District Prevention Partnerships, a prevention coalition led by SEDHD, spent the last fiscal year building the infrastructure for a five-county, multi-sector prevention coalition focusing on reducing youth substance use and risky behavior, suicide prevention, and the promotion of mental health awareness. The primary goal of this past year has been to develop a strategic plan and build coalition capacity within the district.

The coalition has successfully engaged multiple sectors of the community in regular coalition meetings. Sectors that are actively engaged include: schools, hospitals, community-based organizations, local businesses, behavioral health, and (most recently) youth. There are approximately 90 members of the coalition, of which more than 25% are consistently present and active within the coalition work.

Activities of the coalition have been well-received and have grown over the past year. Examples include: providing Wellness Recovery Action Plan (WRAP) groups for a youth group, enrolling four middle/high schools and one state college in the 3rd Millennium Classrooms curriculum, providing Second Step (a social-emotional learning program) materials to seven school districts (pre-K to grade 8), engaging six middle/high schools in implementing Hope Squads (a peer-to-peer suicide prevention program), and creating a monthly, themed, community-wide prevention campaign toolkit to disseminate through the schools and within the community. The prevention campaign toolkit is set up to be used by schools and anyone in the community. The toolkit contains posters, flyers, social media/website graphics, and newsletter/text content. It is categorized by month and audience; each month is reflective of national health observances (i.e. May is Mental Health Awareness Month) with the content for schools targeting youth/students, whereas the content for the community targets parents/adults. Schools and community partners will receive print copies of posters and flyers, along with electronic copies so that posters/flyers can be reprinted if needed.

