

# DEPARTMENT REPORT

## NOVEMBER, 2013

### DIRECTOR'S OFFICE

- The Health Director, Division Managers and Board of Health members Stark, Lester, and Petersen attended the Site Visit and Tour of the Capital Humane Society's Pieloch Adoption Center on November 20<sup>th</sup>. Bob Downey and staff provided a tour of the facility and an overview of the services they provide.
- The Health Director continues to meet with community health leaders regarding expansion of services in the community.
- The Health Director attended the Tabitha Foundation Board of Directors Retreat and monthly meeting.
- The Health Director met with the Mayor's Office and other City officials to preview the recommendations for the Solid Waste Management Plan 2040. The Solid Waste Management Plan Advisory Committee developed the document to provide guidance for solid waste issues for the next 30 years.
- The Health Director attended a site visit of the Many Nations Counseling Center. The Center receives funding from the Community Health Endowment. The Health Director serves on the Community Health Endowment Board of Trustees and the Funding Committee.
- The Health Director and EPH Supervisors met with NDEQ Director Mike Linder and his senior managers to discuss/review program information.
- The Health Director and key staff met with Lincoln Fire and Rescue management staff on issues of interest to both Departments.
- Employee of the Month – Barbara Martinez – Community Health Services

### ANIMAL CONTROL

Animal Control Stats

	<b>Sep- Oct 11</b>	<b>Sep- Oct 12</b>	<b>Sep- Oct 13</b>
<b>Pet Licenses Sold</b>	8423	10005	9956
<b>Cases Dispatched</b>	4198	3897	4275
<b>Investigation</b>	4523	4199	4618

<b>Animals Impounded</b>			
<b>Dogs</b>	303	294	284
<b>Cats</b>	331	240	273
<b>Court Citations Issued</b>			
	32	78	74
<b>Warnings/Defects Issued</b>			
	2202	1916	2976
<b>Bite Cases Reported</b>			
	86	86	67
<b>Attack Cases Reported</b>			
	7	11	8
<b>Dogs Declared (PPD, DD,V)</b>			
	18	17	17
<b>Animal Neglect Investigations</b>			
	89	97	83
<b>Injured Animal Rescue</b>			
	143	145	152
<b>Wildlife Removal</b>			
	94	97	70
<b>Dead Animal Pickup</b>			
	497	430	373
<b>Lost and Found Reports</b>			
	479	471	1407
<b>Phone Calls</b>			
	8567	9602	8018
<b>Average Response Time (in mins)</b>			
	20	30	22

- Staff continue to update and work on the Animal Control Emergency Preparedness Plan.
- Six staff are completing the Incident Command System online training required by the National Incident Management System (NIMS). Eight staff have completed all the online requirements. Most of the additional work at this time is focused on assessing capacity (both internal and external) regarding possible roles and responsibilities Animal Control would need to assume in the event of a disaster or emergency. Eventually the Health Department Animal Control Plan will compliment the Lancaster County Emergency Operations Plan and serve as a resource to all incident command operations.
- The Animal Control Advisory Committee met on November 19<sup>th</sup>. Sgt. Brian Agnew is the new representative from the Lincoln Police Department. The Committee heard a short presentation on the Lincoln Animal Ambassadors spay neuter program. They were also updated on the Emergency Preparedness activities and the Animal Control Ordinances that the Lincoln City Council recently adopted. There was some discussion the two dog park runs in Lincoln, one east of 70<sup>th</sup> street across from Holmes Lake and another at Oak Lake.
- Staff are in the process of filling two positions. One is for an Animal Control Officer I and another is for a full time dispatcher. Interviews for the officer should start in December and interviews for the dispatcher should be completed in January.
- Officers are following up with owners of potentially dangerous and dangerous dogs to assure compliance with the responsibilities and duties of owning a potentially dangerous or dangerous dog.

- A positive trend continues regarding the number of dogs and cats being impounded at the Capital Humane Society. This trend can be attributed to different circumstances; however the increased trend on pet licensing has helped. Officers are able to get licensed pet back to their owners before they end up in the shelter.
- Animal Control staff and staff from the Capital Humane Society continue to meet twice monthly. These meetings have proved productive and help keep lines of communication open. The Animal Control Division has located an Animal Control officer at the Capital Humane Society. The officer is based out of the Park Street Shelter; receives and goes out on dispatched calls and assists customers that come into the shelter that may be there because Animal Control has had previous contact with them or their pet.

## **COMMUNITY HEALTH SERVICES**

### **HEALTH INSURANCE MARKETPLACE**

- The overall goal of the Community Health Services Division is to connect vulnerable people to a source of health care. Although vulnerability can have several meanings, being poor and uninsured is one of the main barriers to accessing health care. One-quarter (25%) of uninsured adults in the United States go without needed health care each year due to cost<sup>1</sup>. Studies have shown that the uninsured, compared to those with insurance (private or public health insurance);
  - (a) are less likely to receive preventive care, recommended screenings, and health care for major health conditions and chronic disease<sup>2,3,4,5</sup>,
  - (b) are at higher risk for preventable hospitalizations and for missed diagnoses of serious health conditions<sup>6</sup>, and
  - (c) have significantly higher mortality rates<sup>2, 7</sup>.
- This month, thirty (30) CHS staff and volunteers began training to enroll the uninsured in the Health Insurance Marketplace. LLCHD is a Certified Application Counselor Designated Organization (CDO) under contract with the Centers for Medicare and Medicaid Services (CMS). Staff and volunteers will become Certified Application Counselors (CACs). CAC training includes protection of personally identifiable information, Nebraska Medicaid eligibility and application training, and federal, on-line training in the Health Insurance Marketplace through CMS. Total training time is approximately 8 hours.
- Working with community safety-net partners, staff and volunteers will assist the poor and uninsured to apply for health insurance through the Health Insurance Marketplace, Nebraska Medicaid, General Assistance, the People's Health Center, and Health 360/Lancaster County Medical Society. Denial of assistance is sometimes a prerequisite for assistance in another safety net program.

- 1 KCMU analysis of 2013 NHIS, Kaiser Family Foundation, “Key Facts about the Uninsured Population.”
- 2 Wilper et al., 2009, “Health Insurance and Mortality in US Adults.” American Journal of Public Health, 99 (12) 2289-2295.
- 3 Collins et al., 2011, “Help on the Horizon: How the Recession Has Left Millions of Workers Without Health Insurance, and How Health Reform Will Bring Relief.” The Commonwealth Fund. Available at <http://www.commonwealthfund.org/Surveys/2011/Mar/2010-Biennial-Health-Insurance-Survey.aspx>
- 4 J. Hadley, 2007, “Insurance Coverage, Medical Care Use, and Short-Term Health Changes Following an Unintentional Injury or the Onset of a Chronic Condition.” JAMA 297(10):1073-84.
- 5 S. Rhodes et al., 2012. “Cancer Screening – United States, 2010.” Centers for Disease Control and Prevention. Available at: <http://www.cdc.gov/mmwr/pdf/wk/mm6103.pdf>.
- 6 Institute of Medicine, 2002. “Health Insurance is a Family Matter”. Washington, DC.
- 7 Institute of Medicine, 2009. “America’s Uninsured Crisis: Consequences for Health and Health Care.” Washington, DC: National Academies Press, pages 60-63.

## **DENTAL HEALTH & NUTRITION**

### **WIC and the Government Shutdown**

- WIC services continued without interruption at the Lincoln-Lancaster County Health Department WIC Program and in Nebraska. The only change was that participants who might normally be issued two months of (bi-monthly) vouchers were only given one month of vouchers. That changed occurred for about 2 weeks in October. Those participants are scheduled to come back during the month of November. Typically about 1600 participants are given bi-monthly vouchers at the LLCHD WIC Program each month.

### **Dental Health**

- The month of October has been one of the dental clinic’s most productive months, with 639 patients being provided 1046 patient visits. Of the total clients seen, 58% were children and 56% were enrolled in Medicaid. Of the total clients seen, 69 clients were provided 127 patient visits during Thursday evening clinic, with 97% children and 64% enrolled in Medicaid.
- The 58% of children seen in the dental clinic during October compares to 52.9% of children seen in the dental clinic during FY 13 and to our overall goal of increasing the percentage of children seen to 55% as a performance measure for assuring access to dental homes for our most vulnerable populations.

- Community outreach activities included site visits by staff to Hamlow, Rousseau and Elliott Elementary schools for school based dental screenings. The school based dental screenings targets those children that have not reported dental visits in the past 12 months. Upon completion of screenings, children are provided referral information for accessing dental homes in our community.

## **ENVIRONMENTAL PUBLIC HEALTH**

### **Water Quality Private Water Wells**

#### **Goals (Purpose)**

- Protect human health by preventing waterborne illness through protecting groundwater from contamination and sampling/testing water from wells.

#### **Water Quality Indicator**

- Ensure all private wells used for potable water are tested annually for bacterial and Nitrate contamination and well owners/users are notified of the results within 7 days.

#### **Strategies/Methods (What we do)**

- educate well owners on protecting groundwater from contamination
- investigate suspected waterborne illnesses
- issue permits
- conduct annual inspections and take water samples from potable wells within the city limits
- conduct inspections and take water samples from new or repaired wells within the 3-mile limit
- assure proper decommissioning of wells
- take enforcement actions

#### **Funding/Source (1)**

User Fees; City General Fund/County General Fund (63/37 split)

	With Supervisory & Clerical Support Costs	<b>Direct Field Costs w/o Supervisory or Clerical Support Costs</b>
<b>User Fees</b>	\$69,286 (69% )	<b>\$69,286 (92%)</b>
<b>City General Fund</b>	\$20,658 (20%)	<b>\$3,961 ( 5%)</b>
<b>County General Fund</b>	\$11,407 (11%)	<b>\$2,326 ( 3%)</b>

<b>Total Direct Costs</b>	\$100,121	<b>\$75,573</b>
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**Water Well Data:**

	<b>FY10</b>	<b>FY11</b>	<b>FY12</b>	<b>FY13</b>
<b>Permits Issued</b>	196	550	550	604*
<b>Inspections</b>	564	747	532	790
<b>Water Samples</b>	733	1074	918	841
<b>% + Coliform</b>	15%	15%	11%	68 wells;16%
<b>% + E. coli</b>	2%	1%	1%	10 wells;2%
<b>% &gt;= 10 ppm Nitrate</b>	4%	6%	3%	22 wells;6%

\* 534 annual/renewal water well permits were issued in the City; 65 permits were issued for newly drilled wells within the city or 3-mile limit; and 5 repair permits were issued. (BPRA001 data from 11/22/13)

**Comparison**

- In FY13, 16% of water wells were found to have coliform bacteria, indicating contamination issues, 2% had E. coli, indicating fecal contamination, and 6% had Nitrate levels which posed a known public health risk (>10mg/L). These data are consistent with past years, but somewhat on the high side. Contamination can be affected by weather conditions; heavy rainfall/runoff tends to increase contamination levels; drought conditions may result in less contamination.

**Description**

- Local ordinance requires all domestic wells (drinking water, irrigation, etc.) within the city and all newly drilled wells within the 3-mile limit to hold a permit. In FY13, the permit fee for a newly drilled well was \$195 and the annual permit fee for a well in the City limits was \$110. Over 50% of the wells in the City are used for drinking water, and the majority of the rest are used for irrigation. All domestic wells in the City that are used for drinking water are inspected and tested for bacteria and Nitrate contamination annually. Each of the newly drilled potable water wells within the 3 mile limit were inspected and sampled for bacteria and Nitrate. Water is one of the most common carriers of disease causing organisms and chemicals which present health risks. When properties with private wells are annexed into the city, the owners are allowed by right to retain their water well and not connect to the Lincoln Water System. Annexations increase the number of people required to obtain a city well permit.

**Partnerships & Efficiencies**

- Health works closely with DHHS and LPSNRD on groundwater issues. Health works closely with Planning on newly annexed areas to assure that people know how the well ordinance applies. A geographically referenced database has been created and Accela

## HEALTH DATA & EVALUATION

- So far there is very little flu showing up locally and only a few regions or states in the country that have had enough cases to indicate to the CDC that they have local or regional spread of flu in their area. I'm sure you receive Tim Timmons' weekly update on local flu and RSV activity in addition to a state and national summary. (If you don't please let us know.) However, if you wish to know more about the national flu situation or activity in another state, you may find it interesting to go to <http://www.cdc.gov/flu/weekly/> and find out additional information about circulating strains, regional and state rates around the country, antiviral resistance, etc.

Fortunately, it appears that this year's flu vaccines are a good match for the flu types that are showing up in the country so if you've been vaccinated you should have a good chance of protection. If you haven't been vaccinated there is no better time than the present since it will take two weeks to develop immunity and during the holidays your chances of being exposed increase a great deal due to the many family and social interactions.

- Perhaps you've noticed men who have grown a moustache or beard in November. Television hosts, doctors, professionals and blue-collar workers have been spotted with facial hair this month. A local appliance store has even been offering prizes for the best moustache. So what is the reason for No-Shave November (or "Movember") efforts?

It's kind of a fun way to focus attention on men's health issues. The mission is to "change the face of men's health." So, when someone asks about his facial hair a man is supposed to indicate that the growth is to bring awareness to men's health issues, especially cancers when many people lose their hair during treatment, and also to raise money for research into diseases and conditions affecting men.

Some men wearing facial hair focus only on male-specific issues, such as prostate cancer (1,216 NE cases in 2010; 6,424 from 2006-10) or testicular cancer. Other no-shave backers include colorectal cancer rates and screening. (The American Cancer Society would appreciate a donation of the money saved from not shaving for the month). The real issue is cancer in general. Cancer is a disease affecting both genders and it has been the leading cause of death in Lancaster County since 1999, and the state since 2009. However, many people do not realize that men have a higher incidence of virtually every major non-gender specific cancers except thyroid cancer and the lifetime risk of cancer is one in two (50%) for males versus one in three for females. For example the table below shows 2006 to 2010 Nebraska cancer cases and rates by gender:

Cancer Site	Male Number	Male—Age Adjusted Rate	Female Number	Female—Age Adjusted Rate
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All Sites	23,176	526.2	22,006	420.9
Lung & Bronchus	3,239	74.7	2,737	51.2
Colon & Rectum	2,519	57.7	2,485	44.4
Urinary Bladder	1,481	35.0	483	8.6
Non-Hodgkin Lymphoma	1,020	23.5	943	17.6
Leukemia	752	17.3	587	10.9
Kidney & Renal Pelvis	988	21.9	640	12.4

And that's just the start of the discussion about disease rates, conditions and health behaviors where men compare unfavorably with women: heart disease rate and onset age, COPD, fruit and vegetable consumption, smoking, binge drinking, obesity, unintentional injuries, preventive screenings. These differences reflect enough disparities to make men's health a relevant topic of discussion.

## **HEALTH PROMOTION & OUTREACH**

### **Early Development Network**

- Two EDN Services Coordinators have completed training to become certified trainers in Routines Based Interview/Assessment (RBI). Over the next year, these two services coordinators will train EDN services coordinators and Lincoln Public Schools staff on the Routines Based Interview. This approach uses a family's daily routine to incorporate the outcomes on which they would like to focus for their family and their child with special needs. The results of the assessment are recorded in the child's IFSP (Individualized Family Service Plan) or IEP (Individualized Education Plan). Every family has some type of a daily routine making it easier for a family to explain their goals and needs based on their daily lives in their natural environment. The RBI is typically done in conjunction with the IFSP. Either the primary provider from LPS or the services coordinator can lead the RBI with the family. The following paragraph further describes Routines Based Interviews/Assessment.
- According to research, "routines based assessment in the child's natural environment sets the stage for family guided, developmentally appropriate intervention. Routines based assessment accommodates the preferences of the family by encouraging them to identify the routines and activities most appropriate for and preferred by the child. Multiple

domains (motor, communication, social, cognitive, self-help) can be addressed in a single routine or activity providing opportunities for collaboration on assessment and later, intervention among team members. Most importantly family members and caregivers can participate with the child in the assessment simply by demonstrating their routines, interactions, and everyday learning opportunities.”

## **Injury Prevention**

- Staff conducted a Fire Safe Landlord Training for 17 landlords representing 409 living units. In addition to the fire prevention information for landlords to share with their tenants, each landlord receives five smoke detectors. City departments that collaborate to bring this training to landlords include LLCHD, LFR, Building and Safety, and the Stronger Safer Neighborhoods project through LPD.
- Staff co-taught with Aging Partners the series of Stepping On Classes for older adults at Lincoln Medical Education Partnership. Fourteen older adults took advantage of this training to gain “hands-on” experience in fall prevention. Among the topics presented are balance, strength training, assessment of medications, assessment of living quarters, and vision impairments. Stepping On Classes are being offered at multiple sites in the community including senior living centers. Health data shows that one in three adults 65 and older fall each year. These classes are in response to the injury prevention priority identified in the Community Health Improvement Plan and are funded through a Community Health Endowment grant to Aging Partners.
- Staff conducted two Nebraska Safe Kids Child Care Transportation trainings in the past month for 16 child care center employees who transport children. These trainings evolved in response to the DHHS enhanced child care regulations. It is a requirement that all child care center staff who transport children attend this 3 hour training.

## **INFORMATION & FISCAL MANAGEMENT**

- FY 2013 and 1<sup>st</sup> Quarter FY 2014 Fiscal Review meetings with the Management Team of each Division have begun. The purpose of the meeting is to review significant fiscal activity in the past quarter, identify likely concerns or issues for the new fiscal year and discuss potential issues for the next budget cycle.
- The Division Manager joined staff from Douglas County Health Department, the Nebraska Department of Health and Human Services, and the Nebraska Health Information Initiative (health information exchange) to report to the Nebraska Health Council regarding local public health interactions with health information exchange.