

Sharing Sessions

Sessions designated as “Federal” are designed to showcase the programs and activities of NACCHO’s federal partners working in various arenas of public practice.

Sharing Session Schedule

Thursday, July 30

10:45 AM - 12:15 PM

1:45 PM - 2:45 PM

Friday, July 31

9:30 AM - 10:30 AM

11:00 AM - 12:00 PM



Thursday, July 30

10:45 AM - 12:15 PM

Achieving Continuous Improvement in Public Health through the Application of Quality Improvement Tools at the Local Level Based on the Success of a National Model

Public health departments find that with the increased demand to handle emergencies, along with planning and managing preparedness-related work, the information systems in place are not adequate. Quality improvement methods for assessing and improving public health processes and systems are needed to effectively guide efforts to remedy that situation. Common Ground is a three-year national collaborative project in which preparedness requirements for information systems are defined based on input from public health practitioners at state and local levels. We will demonstrate tools used to document and improve work processes, and discuss how they are being used for quality improvement in local health departments. Participants will practice using one of the tools and discuss how it can be applied to their own quality improvement efforts.

Facilitator/Speaker

Fred Theadore, MS, BS, Project Manager, CMA Consulting/New York State Department of Health

Speaker

Karen Torghele, MPH, Health Scientist for Programs, Public Health Informatics Institute, Georgia

Beyond HIA: Integrating Public Health Perspectives into Local Planning

The benefit of public health involvement in urban planning has been demonstrated throughout the country in the last decade. The urban form that public health practitioners advocate to promote physical activity, access to nutritious food and sound mental health is aligned with the vision of many planners and developers higher density, mixed-use, pedestrian and transit-oriented communities. This panel assumes the connection between public health and smart growth, and asks how can we institutionalize the public health perspective in local planning decisions in the long term? Not why should we, but rather how can we? Much of the conversation to date has revolved around Health Impact Assessment

(HIA). HIA is a useful tool, but it's voluntary, based on individual projects or plans, and dependent on staff interest and capacity. However, local governments around the country are taking the next steps to formalize the long term integration of public health perspectives into local planning and policy-making. What are the political processes, organizational structures, partnership types and financing models that are working? What kind of evidence-based standards are available that can ground public health's presence in local growth decisions, and how can we make these standards available and relevant to local planners?

Facilitator/Speaker

Arthur Wendel, MD, MPH, Medical Officer, Centers for Disease Control and Prevention, Georgia

Speakers

Wendel Brunner, PhD, MD, MPH, Director of Public Health, Contra Costa Health Services, California

Todd Monson, MA, Public Health Director, Hennepin County Human Services and Public Health Department, Minnesota

Community Investment in Improving Health Status - Strategy's and Results

The session will outline proven strategies for multisector support and funding for community public health care initiatives. Public health practitioners, county/city/state government, medical and mental health providers, lawmakers, the philanthropic community, business leaders and, most importantly, county residents have come together in a community-wide coalition to provide funding and support of health status improvement. Strategies include leveraging of resources, mutual incentives, and commitment to specific outcomes. The session will detail how these strategies can be replicated and how to measure the effectiveness of public health collaborative models in improving the health of the community. Genesee County, Michigan is among the first counties in the nation to develop collaborative partnerships resulting in an innovative system of disease prevention and care. These initiatives with the oversight of Genesee County Health Department and its partnership with Genesee Health Plan (GHP), a community-initiated non-profit organization are funded by philanthropic organizations, health care providers (including Ascension Health), and the community-at-large through a dedicated property tax generating \$11.5 million annually.

Facilitator/Speaker

Linda Hamacher, Senior Consultant, Health Management Associates, Genesys Health Plan, Michigan

Speakers

Barbara MacGregor, BSN, RN, Health Director, Bay County Health Department, Michigan

Trissa Torres, MD, MSPH, FACPM, Medical Director of Population Based Care, Ascension Health, Genesys Health System, Michigan

Making the Case for Healthy Policy: Using Data on the Social Determinants of Health to Impact Policymakers

Presenters will share approaches to using data on health outcomes and the social determinants of health to promote policy and regulatory changes. The session will include tools for data collection on factors that impact health, and for the Kellogg-sponsored Health Equity Index, a demonstration of how three data banks captured at the census tract level (social determinants, demographics, health outcomes) yield correlations of high significance to civic planners. It will also include methods to present local health data along with corresponding social, environmental, and economic data to make the case for changes to economic development and land use policies that impact public health. Presenters will discuss the challenges, lessons learned, and success stories from the field to eliminate health inequities through data collection, analysis and public presentation.

Facilitator

Sharon Mierzwa, MPH, RD, Project Director, the Health Equity Index Initiative, Connecticut Association of Directors of Health, Inc., Connecticut

Speakers

Baker Salisbury, MPH, MSW, MHSA, Director of Health, Ledge Light Health District, Connecticut

George Schroeder, MPH, MS, Environmental Health Manager, Bernalillo County Building, Planning, Zoning and Environmental Health Department, New Mexico

Partnering with Planners to Incorporate Chronic Disease Prevention in the Built Environment

Collaboration between public health practitioners and planners at the local level can have a remarkable impact on the built environment, promoting

physical activity, healthy eating, environmental sustainability, and social inclusion. This session will provide two examples of local partnerships promoting healthy development. Presenters will discuss best practices for public health departments to initiate and maintain collaborations that prioritize health in the development and re-development of cities of all sizes. Representing both public health and planning agencies, they will discuss the perspectives and approaches of different sectors. Presenters will also highlight specific strategies to promote health through the built environment, including Complete Streets ordinances, regional walking and biking plans, and multi-stakeholder planning workshops.

Facilitator/Speaker

Jessica Yorke, Walk and Bike Lansing Initiative Coordinator, Mid-Michigan Environmental Action Council, Michigan

Speakers

Mac Gillespie, Healthy Eating, Active Living Coordinator, Benton County Health Department, Oregon

Andy Kilpatrick, MS, Transportation Engineer, City of Lansing, Michigan

Preventing Violence Before It Occurs: Recognizing Public Health's Role in Engaging Multiple Sectors

Violence poses a serious health challenge, leading to death, injuries and chronic disease. Yet the traditional response often defaults to law enforcement and criminal justice, overshadowing the public health implications of violence. A new era of city leaders are insisting that we cannot arrest our way out of the problem. This session responds to the needs of cities by exploring violence as a public health issue; providing an overview of UNITY, a national initiative to prevent violence; and presenting case studies of public health initiatives that are using multi-sectoral approaches to prevent violence. This session will highlight the role of public health in preventing violence, including the definition of the problem; strategies for coordinating multiple sectors and public health solutions that compliment criminal justice approaches; lessons learned from the perspective of city leaders; and the major findings from the UNITY City Assessment. Local examples of neighborhood-level interventions initiated and led by public health leaders who are working across multiple disciplines and sectors within the community will be presented.

Facilitator/Speaker

Annie Lyles, MSW, Program Manager, Prevention Institute, California

Speakers

Jeffery Hall, PhD, MSPH, Behavioral Scientist, National Center for Injury Prevention & Control, CDC, Georgia

Anthony Iton, MD, JD, MPH, Alameda County Public Health Department, California

Adewale Troutman, MD, MPH, MA, Louisville Metro Public Health and Wellness, Kentucky

The Future of Public Health and Health IT: The Federal Perspective *(Federal)*



Local health departments are challenged as never before to understand threats to the public's health, identify successful strategies to protect and improve health, and evaluate progress toward our nation's vision of a healthier America. Increasingly public health departments are relying on health information technology (HIT) to carry out core functions and services. Investments in health information technology and electronic health information exchange (HIE) are vital to the long-term viability of LHDs. Leaders from the CDC's National Center for Public Health Informatics and HRSA's Office of Health Information Technology will highlight the short and long range implications of current HIT/HIE initiatives on local public health practice and systems. The speakers will also discuss current efforts to strengthen public health informatics capacity and promote collaboration between public health and clinical practices.

Facilitator

Poki Stewart Namkung, MD, MPH, Health Officer, County of Santa Cruz, Health Services Agency, California

Speakers

Cheryl Austein Casnoff, MPH, Associate Administrator, Health Resources and Services Administration, Office of Health Information Technology, Maryland

Leslie Lenert, MD, MS, FACMI, Director of the National Center for Public Health Informatics, Centers for Disease Control and Prevention, Georgia

Public Health Leadership Forum: The Role of Public Health in Health Reform

NACCHO advocates for supporting disease prevention in any federal health reform effort. Initiatives such as The Alliance to Make US Healthiest and the

Commission to Build a Healthier America have reaffirmed the commitment of public health stakeholders to include public health in health reform. These initiatives include grassroots approaches to transforming the current health system. Changes in the White House and Congress also create opportunities to create healthier communities. Sponsored by the Public Health Leadership Society, the National Public Health Leadership Institute, and the National Public Health Leadership Development Network; this session will explore the role played by public health leadership in shaping the public health agenda for health reform. Participants will engage in way-finding dialogue towards visioning, strategy design, and leadership development, ultimately, identifying what roles they can play in managing and leading changes that will shape the new public health. Attendees will also learn about NACCHO's Local Health Department Congressional Action Network.

Facilitator/Speaker

Kaye Bender, Dean, University of Mississippi School of Medicine, Mississippi

Speakers

Donna Brown, JD, MPH, Government Affairs Counsel, Senior Advisor for Public Affairs, NACCHO, District of Columbia

Joseph Kimbrell, LCSW, Director, National Network of Public Health Institutes, Louisiana

Quality Improvement and Performance: Integrating CDC's Strategies to Strengthen Local Public Health (Federal)

As quality improvement (QI) and performance of public health programs, agencies, and systems becomes ever more important, CDC has been actively engaged in developing and implementing several programs and initiatives to support QI and performance improvement for state and local partners. This session will seek to share individual efforts with an emphasis on how each of these programs can be integrated through collaboration and coordination across the public health spectrum. A panel of speakers for this session will focus on specific efforts underway in preparedness, chronic disease, communicable disease, environmental health, and cross-cutting system opportunities that directly impact local public health agencies. Participants will learn not only what CDC has to offer, but will learn how these disparate programs and initiatives can provide a coordinated approach to quality improvement and performance. Participants will also be invited to share their ideas on how CDC can advance and further integrate these important programs.

Facilitator/Speaker

Dennis Lenaway, PhD, MPH, Director, Office of Public Health Systems Performance, CDC, Georgia

Speakers

Sharunda Buchanan, PhD, Director, Division of Environmental Health Services, CDC, Georgia

Craig Thomas, PhD, Branch Chief, Coordinating Office of Terrorism, CDC, Georgia

The Multi-State Learning Collaborative: Fostering Multi-Sector Collaborations around Quality Improvement and Accreditation Preparation

Lead States in Public Health Quality Improvement is the third phase of the Multi-State Learning Collaborative (MLC). The program, which builds off the momentum of two previous MLC initiatives, brings state and local health departments in 16 states together with other stakeholders including public health institutes, health care providers and universities to improve public health services and the health of their community by implementing quality improvement practices. Each of the participating states is addressing specific health outcomes like decreasing the incidence of vaccine preventable diseases or reducing the burden of illness due to tobacco or alcohol usage. Additionally, participants are addressing how they deliver public health services such as ensuring customer satisfaction or collection and use of health data. Speakers will share their work in coordinating collaboratives of local health departments that are implementing quality improvement techniques targeted at specific health outcome and capacity-related areas. The presenters will also share how they are using these and other efforts to prepare for the national accreditation program.

Facilitator

Leslie Beitsch, MD, JD, Professor, Florida State University

Speakers

Cathy Montgomery, MS, Performance Consultant, Florida Department of Health

Sheila Robusky, AA, Strategic Planning Coordinator, Martin County Health Department, Florida

Peter Tabbott, MPH, Health Officer, West Caldwell Health Department, New Jersey

The Power of Health Equity: Transforming Public Health Practice in Partnership with Community

In 2005, the Ingham County (Michigan) Health Department launched the Social Justice Project, an effort to identify and implement strategies to reorient the workforce toward a social justice/health equity framework. The role of public health in transforming and influencing community outcomes is an evident and customary goal. However, this project made apparent the reciprocal role of community influence on public health practice. The earnest engagement of a co-learning and co-teaching relationship with community members was the lever that provided the department real traction in shifting its organizational culture. Presenters will share details of their new, intensive social justice training program and the tangible departmental benefits gained from creating and delivering the program with people who are not part of the public health workforce. Participants will learn the importance of addressing health equity and social justice at four levels of oppression, privilege, and change, and examine the evidence of changes in knowledge, attitudes, and behavior that occurred as a result. Participants will engage in facilitated dialogue on the challenges and benefits.

Facilitator

TBD

Speakers

Doak Bloss, BA, Health Equity Coordinator, Ingham County Health Department, Michigan

Renee Canady, PhD, Deputy Health Officer for Public Health Services, Ingham County Health Department, Michigan

Workforce Requirements for Achieving Health Equity

This session will explore the requirements for recruiting and training the public health workforce to tackle the root causes of health inequity. Achieving health equity demands knowledge, skills, and sensibilities associated with influencing institutional practice outside of public health, interpreting data across many disciplines, engaging with affected populations, community organizing, as well as familiarity with issues such as racism, poverty, land use, transportation, and education, among others. Panelists will describe required skills and experience from this new workforce, and how they have or could be deployed to greatest effect.

Facilitator

TBD

Speakers

Barbara Ferrer, PhD, MPH, Director, Boston Public Health Commission, Massachusetts

Linda Rae Murray, MD, MPH, Chief Medical Officer, Cook County Department of Public Health, Illinois

Zip Code Wellness Score: Oklahoma County's Innovative Approach to Target Health Improvement

Research confirms the significant role of community infrastructure on the decisions made by individuals thus impacting rates of chronic and infectious disease and playing a significant role in Oklahoma's low national health ranking. The Wellness Score developed by OCCHD is based on the premise that health examined on community level is influenced by a wide range of factors. By developing relationships with community partners, previously unavailable demographic factors were obtained by zip code and through a statistical weighting process were combined with traditional levels of disease. The resulting values were stratified into a Wellness Score for each zip code in Oklahoma County. This presentation will show how individual and community factors impact the health communities and allow intervention strategies to be communicated and targeted for greatest impact. Multiple health influencing factors have been grouped into four broad areas for targeted intervention. These are Workforce Development and Retention; Connecting Communities with Primary and Preventive Medical Services; Physical Activity through Community Design; and Healthy Choices in Economically Sound Communities. The goal: Implementation of coordinated collaborative efforts with measurable improvements in individual, community, and geographical health measures.

Facilitator

TBD

Speakers

Pamela Rollins, BSN, ARNP, MPH, Assistant Director, Oklahoma City-County Department of Health, Oklahoma

Jon Lowry, MPH, Program Administrator; Epidemiology Services Program, Oklahoma City-County Department of Health

Thursday, July 30

1:45 PM - 2:45 PM

Assuring a Competent Public Health Workforce: An Indiana Multi-State Learning Collaborative 3 (MLC3)

This session will demonstrate utilization of CDC, NHPSP, LPHS assessment findings, and the Indiana Public Health System Quality Improvement Program (PHSQIP) problem-solving process, as the foundation and evidence-base for an Indiana mini-collaborative. As a participating partner in the Multi-State Learning Collaborative 3 (MLC3), this mini-collaborative developed and implemented a program to engage local health department staff in a workforce education and training program. The objectives were to develop a comprehensive and sustainable program in public health education and workforce development, and to help staff gain the knowledge and skills needed to effectively deliver essential public health services to promote population health, and prepare for national voluntary accreditation. This session provides an interactive approach with the audience to the program and curriculum developed, including presentations and self-assessments for each of the ten essential public health services, promotional program materials, program evaluation tools to measure the impact of education and training, and evidence of improving individual local public health practice. The demonstration will also include initial program development using a systematic process and application of interactive problem solving tools, including root cause analysis.

Facilitator

TBD

Speakers

Deb Koester, DNPC, MSN, RN, WHNP, Population Health Initiatives Program Manager, Purdue University Healthcare Technical Assistance Program, Indiana

Mike Meyer, MA, Administrator, Clark County Health Department, Indiana

Donna Oeding, MA, Administrator, Dubois County Health Department, Indiana

Building a Strategic Agenda to Engage Multisectoral Collaboration around Healthy Eating and Active Living

The new public health calls for a focus on prevention that addresses the underlying determinants of health in order to address rising rates of illness, injury and their associated costs. These efforts cannot be successful without collaboration across sectors and a broad, strategic agenda to engage a diverse constituency. This session will explore the elements of successful prevention-oriented efforts to reduce diet and activity-related chronic diseases and how to engage diverse partners—including economic development, transportation and agriculture—in this work. Strategies from the Healthy Eating Active Living Convergence Partnership's Promising Strategies for Creating Healthy Eating and Active Living Environments framework will also be highlighted. The Convergence Partnership is a national group of funders committed to a multifield collaborative effort to foster and sustain healthy environments through an equity, policy and organizational practice change orientation.

Facilitator/Speaker

Linda Shak, MSW, Program Manager, Prevention Institute, California

Business Process Analysis and Redesign Tools for High Quality, Efficient Public Health Work



Through Common Ground, a grant funded by the Robert Wood Johnson Foundation, grantees have learned tools to collaboratively identify requirements for information systems using business process analysis. The importance of this project goes far beyond preparing for new large-scale information systems. Collaborating and documenting business workflows allows health departments to gain a better understanding of processes and identify opportunities for improvement. This method, although intensive to complete, can help to appropriately allocate resources during these difficult economic times. Including staff to collaboratively define the processes and identify improvements leads to greater ownership and adoption of changes once they are implemented. This session will share the benefits of undertaking this project as well as how to overcome barriers that may prevent others from implementing similar projects.

Facilitator

Rhonda Miller, MEd, Researcher/Analyst, Public Health Informatics Institute, Georgia

Speakers

Cris A. Craig, MBA, Program Manager, Health Information Resources, Kitsap County Health District, Washington

Tracy Lockard, BA, Business Process Director, Cabarrus Health Alliance, The Public Health Authority of Cabarrus County, North Carolina

Communication Strategies to Engage Municipal Leaders in Health Equity Efforts

The social determinants of health are being brought to the forefront in discussions of health equity issues. To meaningfully address health inequities, LHDs must increasingly engage with colleagues representing housing, economic development, education, public safety, and environmental management. Participants will learn about a series of focus group sessions conducted with municipal leaders and local department heads from a variety of disciplines including: economic development, land-use and housing, public safety, education, and environment. These sessions were held to determine how health directors can best engage municipal leaders in mutual efforts to address health disparities and incorporate health equity principles in the development of regulations, policies, and practices. Key findings will be presented that reveal the benefits and challenges of multi-disciplinary collaborative relationships. These findings informed the development of a comprehensive communications strategy aimed to enhance understanding of the role of health directors in the decision-making and political processes. A local public health fellowship program was created along with a series of communication materials designed to aid health directors in their efforts to initiate dialogues and establish themselves as a key player in regulations and policy development.

Facilitator

TBD

Speakers

Angie Funaiolo, BS, MA, Communications Specialist, Connecticut Association of Directors of Health, Inc., Connecticut

Sharon Mierzwa, MPH, RD, CADH Health Equity Index Project Director, Connecticut Association of Directors of Health, Inc., Connecticut

Cool, Crisp, Clean: Keeping Water Safe to Drink through EPA's Water Laboratory Alliance *(Federal)*

Ensuring safety of public drinking water supplies is a crucial concern for public health officials. This session will provide participants with information to advance their understanding of water contamination incidents and their capability to respond effectively to protect public health. Using demonstrative training techniques, participants will learn about collaborative projects involving a diverse array of other federal, state, and local agencies and practice using new U.S. EPA water sector tools.

The EPA tools that will be presented are designed to assist public health and other agencies in terms of preparedness, planning, selection and use of analytical methods, collaborations and other partnerships throughout communities in responses to drinking water emergency situations and contamination events. The collective value of these tools also provides guidance for public health agencies in addressing and handling potential biological, chemical, and radiochemical contaminants.

Facilitator/Speaker

Pamela Bernard, Physical Scientist, US Environmental Protection Agency, District of Columbia

Demonstrating the Value of Community Preventive Services

Partnership for Prevention has received funding from the Robert Wood Johnson Foundation to develop and assess measures that will demonstrate the value of interventions recommended in the Guide to Community Preventive Services. The National Commission on Prevention Priorities (NCPP), convened by Partnership for Prevention, is setting the study's parameters and guiding its methods. The measures, including health impact and cost effectiveness, will help decision-makers both as they plan and set priorities, and as they implement recommendations from the Community Guide. The speakers, who are members of the NCPP, will talk about the study's measures of value for community preventive services and the process it will use to collect and summarize evidence for these measures. They also will illicit discussion from the audience about what information is essential and should be measured across Community Guide interventions to help public health agencies effectively use their limited resources. Results from a survey of state and local public health leaders will be presented to provide a context for the NCPP's decisions.

Facilitator

Kim Barnhill, MS, Administrator, Jefferson County, Florida

Speakers

Michael Caldwell, MD, MPH, Commissioner, Dutchess County Department of Health, New York

Eduardo Sanchez, MD, MPH, Vice President and Chief Medical Officer, BlueCross BlueShield of Texas

Food Protection Partners – Keys to Collaboration *(Federal)*

Local, state, and federal communication and coordination are critical elements of an effective, efficient, integrated food safety system that delivers food protection for the public. Please join us to discuss with Centers for Disease Control and Prevention, United States Department of Agriculture/ Food Safety and Inspection Service and Food and Drug Administration about tools, resources, and initiatives that include opportunities for local health departments to engage with federal partners.

Facilitator

Bruce D. Dart, PhD, Health Director, Lincoln-Lancaster County Health Department, Nebraska

Speakers

Richard Barnes, REHS/RS, Director, FDA/DFSR, Maryland

Elisabeth Hagen, MD, Deputy Assistance Administrator (Acting), FSIS/USDA, District of Columbia

Arthur Liang, MD, MPH, Associate Director of Science, CDC, Georgia

How LHDs Can Implement Policy, Systems, and Environmental Change Strategies to Promote Healthy Behaviors among Youth and Adults *(Federal)*

This session will highlight the progress of the National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP) Integration Demonstration Project and how that relates to local health departments and discuss the creation of a blueprint for local health department chronic disease departments. Details will be shared about the lessons learned about policy, systems, and environmental change strategies for prevention activities across the life course from over 10 years of tobacco control and prevention efforts. In addition, a look at how these are transferable to other diseases with health

behaviors determined early in life and for different population groups, and how they can be and are being used by local health departments will be included.

Facilitator

Kimberly A. Rasch, MS, MPH, Bureau of Chronic Disease Prevention & Control, NYC Department of Health & Mental Hygiene, New York

Speakers

Donald Benken, JD, MPH, Senior Public Health Analyst, Public Health Law Program, CDC, Georgia *(Invited)*

Janet Collins, PhD, Director, National Center for Chronic Disease Prevention and Health Promotion, CDC, Georgia

Matthew McKenna, MD, MPH, Captain, U. S. Public Health Service, Director, Office on Smoking and Health, CDC, Georgia

New England Partnership for Health Equity: Implementing a Unified Health Equity Agenda

This session will describe the principles and agenda of The Boston Public Health Commission's (BPHC) Center for Health Equity and Social Justice which focuses on eliminating racial and ethnic health inequities among city residents. Speakers will explore coalition building, partnership principles, addressing racism, engaging communities in developing and implementing strategies, policy and advocacy strategies, building institutional capacity, and collecting and using data. Participants will also learn about unique tools and measures for evaluating health equity strategies. Questions to be addressed include: how does racism affect outcomes in the social determinants of health? How do we build the capacity across New England to develop strategies that address the social determinants of health and achieve health equity through community, system and policy level change, and changes in public health practice? Panelists will share BPHC's comprehensive and regional health equity approach as a model that will be valuable for public health departments aiming establish similar approaches and partnerships.

Facilitator

TBD

Speakers

Nashira Baril, MPH, Director, Center of Excellence in the Elimination of Disparities Co-Director, Center for Health Equity and Social Justice, Boston Public Health Commission, Massachusetts

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Meghan Patterson, MPH, Director, Office of Health Equity Co-Director, Center for Health Equity and Social Justice, Boston Public Health Commission, Massachusetts

Safe Sex in Second Life: Using the 3D Virtual Reality World to Teach and Learn about HIV/AIDS



In response to the alarming statistics that AIDS is the leading cause of death among African American women age 25-34 and the leading cause of death among African American men age 35-44, the BASUAH (Brothers And Sisters United Against HIV/AIDS) initiative was formed. The program specifically targets middle school, high school and college age students and trains them to become BASUAH Ambassadors (peer-educators). These Ambassadors complete a culturally competent online training that raises awareness about the epidemic and ways they can protect themselves. Once the Ambassadors have been trained we keep them engaged through BASUAH activities online and in their communities. This presentation will highlight the various internet technologies being used to keep our BASUAH Ambassadors engaged. More specifically, we will highlight the work we are doing in Second Life and the partnerships we have forged in this virtual reality world, which is helping our ambassadors with learning and retention.

Facilitator/Speaker

Veronica Halloway, BA, MA, Public Service Administrator, Illinois Department of Public Health, Illinois

Speakers

Deborah Antoine, MA, Instructional Designer, University of Illinois at Springfield, Illinois

Doris Turner, Chief, Center for Minority Health Services, Illinois Department of Public Health, Illinois

Surgeon General Says (Federal)

In addition to helping communities prepare for and respond to emergencies using public health, medical and non-medical volunteers, Medical Reserve Corps (MRC) units promote healthy living throughout the year. Many MRC units partner with local health departments (LHDs), hospitals, long term care facilities and other organizations to help protect and improve the health of their communities. This session will explore ways in which MRC units can

be involved in day-to-day public health initiatives. Presenters will highlight examples of how MRC medical and non-medical volunteers can staff seasonal flu and mass vaccination clinics, provide outreach to homeless and at-risk populations, and serve as volunteer epidemiology response team members who assist in outbreak investigations.

Facilitator/Speaker

Dean Trombley, Lieutenant Commander, US Public Health Service, Federal Government

Speakers

Jennifer E. Freeland, State Volunteer Coordinator, Virginia Department of Health

Jennifer Gulley, RN, BSN, AE-C, MRC Coordinator, Montgomery County Health Department, Kentucky



Friday, July 31

9:30 AM - 10:30 AM

A Regional Model for Public Health Practice: Colorado Emergency Preparedness and Response

In Colorado, local public health agencies have increased capacity and capability in the area of emergency preparedness and response (EPR) due to a regional practice model that provides personnel and expertise across the state. The model uses CDC funding through the state public health department to support EPR professionals employed by local public health agencies. Regional epidemiology, planning and training professionals serve local public health agencies within their region, not only their employer agency. Colorado's geography and population centers have led to wide variability in the capacity and structure of local public health agencies. The Regional EPR System has helped overcome challenges of both low-resourced and highly-populated local public health agencies in preparing and responding to public health emergencies. In 2008, Colorado Association of Local Public Health Officials (CALPHO), the state association of county and city health officials (SACCHO), performed a review of the model. This presentation will describe the model, detail the components of success and challenges within the model, discuss potential translation of this model into other public health areas, and outline future use of the regional system to support statewide implementation of Project Public Health Ready.

Facilitator

TBD

Speakers

Christopher Lindley, MPH, Division Director, Emergency Preparedness and Response Division, Colorado Department of Public Health and Environment, Colorado

Lisa VanRaemdonck, MPH, MSW, Project Manager, Colorado Association of Local Public Health Officials, Colorado

Walter (Snip) Young, PhD, Evaluation Consultant, Colorado Association of Local Public Health Officials, Colorado

CDC/HRSA Public Health Workforce Development Efforts: A Pipeline into the Public Health Field (Federal)

This session will provide visibility and recognition to NACCHO's federal partners at the Centers for Disease Control and Prevention (CDC) and the Health Resources Services Administration (HRSA) working in the area of public health workforce development. It will provide them with the opportunity to showcase their efforts and gather input from local health department representatives as to how to best meet the practice needs.

Facilitator

J. Maichle Bacon, MPH, RS, Public Health Administrator, Chair, Workforce Development and Leadership Strategic Direction Team, NACCHO, Winnebago County Health Department, Illinois *(Invited)*

Speakers

Bob Chatfield, Director, Strategic Workforce Development Division, Office of Workforce and Career Development, Centers for Disease Control and Prevention, Georgia

Daniel Mareck, MD, Chief Medical Officer, Office of the Associate Administrator, Bureau of Health Professions, DHHS, HRSA *(Invited)*

Stephen B. Thacker, Director, OWCD, CDC, Georgia *(Invited)*

Emerging Priorities for Environmental Health (Federal)

This session will explore ways in which the National Center for Environmental Health and Agency for Toxic Substances and Disease Registry at the Centers for Disease Control and Prevention can support local public health. Presenters will highlight two new initiatives: (1) CDC's Climate change program and (2) the National Conversation on Public Health and Chemical Exposure, which will lead to an action agenda for better protecting public health from harmful chemical exposures. Participants will be expected to engage in dialogue and discuss issues relevant to local health departments.

Facilitator

Dennis McBride Director of Health, Milford Health Department, Connecticut

Speakers

Ben Gerhardstein, MPH, Public Health Analyst, NCEH/ATSDR, CDC, Georgia

Jeremy Hess, MD, MPH, Consultant, Office of Director Assistant Professor, NCEH/ATSDR, CDC, Emory University Schools of Medicine and Public Health, Georgia

Engaging the Community: Food Protection, Self Audits, and Food Safety Employee Training in Minneapolis

The restaurant industry employs 13.1 million people, and 59% of reported food-borne illness outbreaks were associated with restaurants in 2005. Outbreaks are usually related directly to food-handler error. The City of Minneapolis, Minnesota conducts an estimated 3,000 yearly risk based food inspections. Establishments out of compliance and/or cited for high numbers of critical violations were suggested to voluntarily participate in a self audit program and attend food safety employee training for front line food workers. The self audit program is designed to help food operators meet both the state and local food safety codes and put in place a system of food safety and security measures to protect against unintentional and deliberate contamination of food by regularly inspecting their own facility. Food safety employee training was based on the self audit and covered personal hygiene, cross contamination, time and temperature, approved sources, chemicals, proper use of utensils and equipment, physical facility and food security management. Inspection reports of 123 food establishments were compared before and after introduction to the self-audit program and food safety employee training. Of the restaurants participating in the self audit program and training sessions, a 40% decrease ($p=0.0002$) in critical violations was observed. Participants also demonstrated statistically significant improvement in employee health and hygiene ($p=0.002$), protection from cross contamination ($p=0.002$), time and temperature logs ($p=0.001$), use of chemicals ($p=0.013$) and food security management ($p=0.0006$). It appears as though performing regular self audits and participating in regular training programs can lead to uniform and comprehensive food protection, a reduction in critical violations and ultimately reduce the number of food-borne illness investigations.

Facilitator

B. Z. (Bud) Karachiwala, MS, MBA, Director, Environmental Public Health Division, Harris County Public Health and Environmental Services, Texas

Speaker

Tim Jenkins, MPH, Supervisor Food Safety, City of Minneapolis Environmental Health, Minnesota

Kendra Kauppi, PhD, Extension Educator, University of Minnesota Extension Service, Minnesota

Improving State and Local Performance and Accountability through a Focus on Financial Management Practices

Can you show your local board of health how your agency uses its budget in a compelling way? Local health departments can use financial data to demonstrate the costs of public health programs and to monitor and improve their performance. Through a state and local collaboration, the West Virginia public health system implemented a standardized chart of accounts and financial reporting system designed to acquire consistent and accurate data regarding the costs of public health programs, resulting in improved local financial management practices and a coordinated approach to assessing and responding to local financial performance needs. Only through uniform and valid data will public health agencies be able to effectively manage resources to accomplish an expanding mission during a time of such economic strain.

Facilitator

TBD

Speakers

Amy Atkins, MPA, Associate Director, Division of Local Health, West Virginia

Mickey Plymale, BS, RS, MCSE, CHS III, Local Health Administrator, Wayne County Health Department, West Virginia

Infrastructure, the Building Blocks of Public Health *(Federal)*

This session will highlight efforts of the Centers for Disease Control and Prevention's Office of the Chief of Public Health Practice, Office of Strategy and Innovation and Coordinating Center for Health Information and Service. Representatives from the Centers will engage with participants in an interactive discussion focused on CDC priorities and activities supporting public health infrastructure at the local level, including accreditation.

Facilitator

TBD

Speaker

Steven Solomon, MD, Director, Coordinating Center for Health Information and Service, Centers for Disease Control and Prevention

Measuring the Value of Public Health through Practice-Based Research Networks (PBRNs)

In an era of constrained economic resources, public health agencies increasingly are challenged to document the health and economic benefits of their work and to justify resource allocation decisions based on evidence of impact and value. Most agencies, however, do not have all of the resources and expertise needed to mount rigorous, comparative studies of their operations. Practice-based research networks (PBRNs) provide a model for public health agencies to collaborate with researchers in designing and implementing studies that produce this type of evidence in real-world practice settings. This session presents early experiences from a new initiative supported by the Robert Wood Johnson Foundation to develop public health PBRNs. The developers of new PBRNs in Massachusetts, Colorado, and Washington will describe the motivations behind their networks, the roles played by practitioners and researchers within these collaborations, the types of interventions and practices identified for study, and the general approaches used to assess value and impact in public health practice.

Facilitator

TBD

Speakers

Harold Cox, MSSW, Associate Dean for Public Health Practice, Boston University School of Public Health, Massachusetts

David Flemings, MD, Director, Health Officer, Seattle-King County Department of Public Health, University of Washington, Washington

Glen Mays, MPH, PhD, Professor and Chair, University of Arkansas for Medical Sciences, Arkansas

Lee Thielen, BSFS, MPA, Executive Director, CALPHO, Colorado

The Environmental Nutrition and Activity Community Tool: Promoting Healthy Eating and Physical Activity through Organizational Practice and Policy

Local public health leaders increasingly recognize the importance of moving beyond categorical funding and a disease-by-disease approach towards environmental changes that address issues fundamental to community health and chronic disease prevention. Prevention Institute developed the Environmental Nutrition and Activity Community Tool (ENACT) to stimulate environmental change on a local level in order to improve opportunities for

healthy eating and physical activity, particularly in underserved communities. This session will prepare participants to use ENACT to assess their local food and physical activity environments, prioritize strategies for change, and use the resources provided as starting points towards policy implementation. Promising policies and practices from across the country that have improved food and physical activity environments to facilitate improved health outcomes will also be highlighted.

Facilitators/Speakers

Linnea Ashley, MPH, Program Coordinator, Prevention Institute, California

Linda Shak, MSW, Program Manager, Prevention Institute, California

The Federal Role in Ensuring Health Promotion Services for Women, Children, and Disabled Populations *(Federal)*

During this session, participants will engage in an interactive dialogue with federal partners from the Centers for Disease Control and Prevention and the Health Resources and Services Administration. Federal partners will share current programs, discuss key priorities, and address emerging issues related to health promotion services for women, children, and disabled populations.

Facilitator

Lillie Hall, MHS, MPH, CHES, Associate Director of Health Education, South Carolina Department of Health and Environmental Control, Public Health Region 2, South Carolina

Speakers

Alison B. Johnson, MPA, Deputy Director, National Center on Birth Defects and Developmental Disabilities, CDC, Georgia

Jimmy Mitchell, RPh, MPH, MA, Director, HRSA Office of Pharmacy Affairs, Health Resources and Services Administration, Maryland

Amanda Reyes, Public Health Analyst, Health Resources and Services Administration, Maryland

Lisa Scholz, PharmD, MBA, Senior Director, HRSA Pharmacy Services Support Center at American Pharmacists Association, Health Resources and Services Administration, District of Columbia

The Flu Project: Collaboration and Coordination of Influenza Immunization for 8,000 Children

Participants in this session will: 1) Understand the new research on immunizing all children and youth for influenza and why schools are the perfect venue to reach the masses. 2) Learn approaches to public education officials (in a large urban school system comprised mostly of minority and indigent student population) to explain a mass immunization program and how it benefits the school children, the community, and educational outcomes. 3) Implement a diverse, multi-sector program involving the school system, a local nonprofit agency coordinating health services in schools, the local Emergency Medical Services ambulance staff, local schools of nursing programs, local hospitals with career leadership tracks for their nursing staff, a local technical college, and the Louisiana Department of Agriculture. Analyze the implementation of the project, how to establish a chain-of-custody for vaccine transport, and data collection. 5) Learn the benefits and challenges of a mass vaccine program across 90 school campuses and covering a potential client base of 45,000 children.

Facilitator

TBD

Speaker

Sue Catchings, MA, CHES, Chief Executive Officer, Health Care Centers in Schools, Louisiana

The Health Equity Toolkit: Leveraging Local Action to Change Policies and Institutional Practices of Local Health Departments and Community Based Organizations

Health practitioners are increasingly working to reverse health inequities. Major advances can be made to improve health by creating more equitable communities by changing policies, systems and institutional practices; for example transportation systems can support walking and biking, and housing policy can provide equal access to healthy homes. Contributing to the field's knowledge of social determinants of health inequity, this session will provide an overview of why an health equity approach improves the public health, share the needs and successful strategies local health departments have identified and used, and introduce the Health Equity Toolkit. Developed by the Prevention Institute of California, with input from NACCHO's Health Equity and Social Justice Strategic Direction Team, the Health Equity Toolkit is an online resource designed to highlight local-level actions that engage

diverse stakeholders, focus on prevention and make the case for health department involvement in policy and institutional change for health equity. This session may also provide an online demonstration of the toolkit.

Facilitator/Speaker

Linnea Ashley, MPH, Program Coordinator, Prevention Institute, California

Speaker

Anthony Iton, MD, JD, MPH, Health Officer, Alameda County Public Health Department, California

The New Public Health and RHIOs: The Intersection of Public Health and Informatics



Local public health departments increasingly rely on health information technology (HIT), data systems and electronic health information exchange for a variety of public health functions. The current H1N1 outbreak serves as a prime example of the need for timely information exchange among public health and clinical providers that can be analyzed and acted upon by public health officials. This session will provide an overview of Duval and Orange County Health Departments' work with the Central FL Regional Health Information Organization (RHIO). The speakers will explore the possible uses of aggregate RHIO and EMR data for surveillance, health service delivery research and community health planning purposes.

Facilitator/Speaker

Robert Harmon, MD, MPH, Director, Duval County Health Department, Florida; Chair, Northeast Florida Health Information Consortium

Speakers

Becky Cherney, Central Florida RHIO

Kevin Sherin, MD, MPH, Director, Orange County Health Department, Florida

Voices from the Field: An Adolescent STI Intervention Success

This session will provide participants with an overview of current national adolescent reproductive health data trends and a case study of one local successful intervention program, CHOICES. CHOICES addresses the 60% of Nashville teens, ages 13 - 20 who test negative for pregnancy and are at risk for sexually transmitted infections (STI) through evidenced-based education and community health screenings. Through review of the 4-year cohort data of the CHOICES Program, participants will: identify the value of evidence-based curricula and approaches; identify strategies for early diagnosis, screening and treatment for adolescents and reducing Chlamydia rates in adolescent sub-populations; develop strategies for forging nontraditional partnerships to address adolescent reproductive health issues in their communities; identify communication strategies to convey the quantitative, qualitative and cost-savings value of these interventions to relevant stakeholders; and plan future adolescent reproductive health interventions.

Facilitator

Wesley Tice, MPH, Administrator, Franklin County Health Department, Florida

Speakers

D'Yuanna Allen, MPH, Youth Development Specialist, Metro Public Health Department, Tennessee

Kennithia Southall, RN, MPA, CHOICES Program Coordinator, Metro Public Health Department, Tennessee



Grab the Spotlight!

Is your LHD using the national identity for local public health?

Since NACCHO introduced the national identity for local public health in July 2006, health departments around the country have been using the logo, colors and tagline to increase their visibility within the community. If your department is one of these leaders, go to <http://www.naccho.org/NA2009/logo> and submit photos of your staff, department or promotional materials for the opportunity to be recognized in front of your peers. Please submit items in JPG format. The best submissions will be featured in prominent places around the conference. Show off your efforts and stand in the spotlight! For questions, contact Kate Grisard: kgrisard@naccho.org, 202-507-4222.

Friday, July 31

11:00 AM - 12:00 PM

Aviation Entry Screening for Pandemic Influenza at U.S. Ports of Entry - Risk Based Border Strategy and the Federal-State-Local Public Health Nexus *(Federal)*

The session is designed to provide information on the Risk Based Boarder Strategy (RBBS), a collaboration between the Centers for Disease Control and Prevention's Division of Global Migration and Quarantine, the Department of Homeland Security, and the Department of Transportation. The RBBS involves airport-specific plans to identify and manage ill travelers and their contacts arriving on inbound international commercial traveler flights to the United States during the early stages of a severe influenza pandemic. This screening process is one part of a multi-layered federal government strategy for pandemic influenza containment, mitigation, and management. Attendees at this session will receive background information on the project, learn about the status of the project's current activities, as well as the role of public health on the unified command planning teams being established in 19 port of entry jurisdictions. The session will also provide an opportunity to identify the resources needed to meet public health screening process responsibilities.

Facilitator/Speaker

Todd W. Wilson, MS, Associate Chief for Preparedness and Response, U.S. Centers for Disease Control and Prevention, Georgia

Healthy Places and Healthy Communities *(Federal)*

Through community design and policy, systems, and environmental strategies, many communities are striving to turn the tide on the national epidemic on chronic diseases. This session will explore ways in which the National Center for Environmental Health and the National Center for Chronic Disease Prevention and Health Promotion at the Centers for Disease Control and Prevention can support local health departments. Presenters will discuss initiatives from both Centers and connections between chronic diseases and the built environment. Participants will be expected to engage in dialogue and discuss issues relevant to local public health

Facilitator

Martin Fenstersheib, MD, MPH, Health Officer, Santa Clara County Public Health Department, California

Speakers

Wayne Giles, MD, MS, Director, Division of Adult and Community Health National Center for Chronic Disease Prevention and Health Promotion, CDC, Georgia

Ken Rose, MPA, Associate Director for Policy, NCEH/ATSDR, CDC, GA

The Impact of Strategic Partnerships on Childhood Lead Poisoning Prevention in Detroit, Michigan

Childhood lead poisoning is a complex problem in the city of Detroit that requires deliberate action and collaboration across many agencies. In an effort to eliminate childhood lead poisoning, the Detroit Department of Health and Wellness Promotion (DHWP) spearheaded the inception of the Detroit Lead Partnership (DLP). The DLP can be viewed as a model of collaboration that has been instrumental in achieving positive public health outcome of lowering the childhood lead poisoning rate.

Facilitators/Speakers

Audrey Smith, MPH, General Manger, Community Health Services, Detroit Department of Health and Wellness Promotion, Michigan

Lyke Thompson, PhD, Director, Center for Urban Studies, Wayne State University, Michigan

Infectious Diseases in Tough Economic Times—Is Prevention a Luxury? *(Federal)*

This session will provide participants with an opportunity for direct discussions with CDC leaders. Representatives from the National Center for Preparedness, Detection, and Control of Infectious Diseases (NCPDCID), the National Center for Immunization and Respiratory Diseases (NCIRD), and the National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP) will each provide a brief overview of their program areas and then will dialogue with participants on infectious disease issues of relevance to local health departments.

Facilitator

E. Oscar Alleyne, MPH, Epidemiologist, Rockland County Department of Health

Speakers

Hazel D. Dean, ScD, MPH, Deputy Director, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, CDC, Georgia

Rima Khabbaz, MD, Director, National Center for Preparedness, Detection, and Control of Infectious Diseases, CDC, Georgia

Anne Schuchat, MD, Director, National Center for Immunization and Respiratory Diseases, CDC, Georgia *(Invited)*

Injecting Ethics into the Public Health Quality Improvement Movement

What is the role of ethics in efforts to accredit local public health departments? Emerging standards for accreditation of public health agencies do not adequately address consideration of public health ethics. The recent graduating class of the National Public Health Leadership Institute (PHLI) is examining these issues and has developed cases to demonstrate how the Principles of the Ethical Practice of Public Health can be incorporated into practice, including as guides or statements of values in the accreditation process. Speakers will draw on these and other cases, along with the Principles, as a framework to explore different tools, such as quality management and evaluation that can be used in accreditation. The Principles can provide a rationale for including public health ethics as an explicit consideration in the development of accreditation standards. Application of the Principles demonstrates that accountability and other values, increases the transparency of decisions and fosters the community trust that are needed in state and local public health interventions. In addition, they are flexible, compatible, and extensible, allowing public health ethics to be incorporated into a variety of different accreditation approaches, at both the local and state agency levels and in different areas of public health practice.

Facilitator/Speaker

Ruth Bernheim, JD, MPH, Director, Division of Public Health Policy and Practice, Department of Health Evaluation Sciences, University of Virginia School of Medicine, Virginia

Speakers

Alan Melnick, MD, MPH, Health Officer, Clark County Health Department, Washington

Matthew Stefanak, MPH, Health Commissioner, Mahoning County General Health District Board of Health, Ohio

Legal Issues Surrounding the 2009 H1N1 Outbreak (Federal)

During this session, participants will engage in an interactive dialogue with federal partners from the Department of Health and Human Services and the Centers for Disease Control and Prevention. Legal issues raised for state and local health departments as a result of the recent H1N1 Outbreak will be reviewed and discussed.

Facilitator/Speaker

Tony Moulton, PhD, Co-Director, CDC Public Health Law Program, Office of Strategy and Innovation, Centers for Disease Control and Prevention, Georgia

Speakers

Toby L. Merlin, MD, Deputy Director, Influenza Coordination Unit, Centers for Disease Control and Prevention, Georgia

Susan Sherman, JD, MHS, Attorney, Department of Health and Human Services, Office of General Counsel, District of Columbia

Leveraging Web Technology to Deliver Public Health Services, Information and Training



NACCHO, along with NACo (National Association of Counties) is sponsoring Network of Care for Public Health's online web portal. This local government sponsored one-stop web site allows the public as well as staff and providers to access a broad range of public, environmental and community health information that goes beyond the norm. Site content, available in multiple languages, is designed to provide the public with current, helpful information that can empower them to make informed decisions. Fragmentation across information systems is addressed by an easy-to-use service directory, a 50,000 page health library, links, access to legislative activity, daily news, and an online personal health record to store important health information as well as items of interest from across the site. Each site is customized to reflect local initiatives and activities and serves to connect individuals with the right service information and a time convenient to them. Local government can take advantage of the initial investment that created the first NOC site and provide expansive information to the public.

Facilitator

Carol Moehrle, RN, District Director, North Central District Health Department, Idaho

Speakers

Bruce Bonzan, MA, President, Trilogy Integrated Resources, LLC, California

Afshin Khosravi, Chief Executive Officer, Trilogy Integrated Resources, LLC, California

Jacqueline Zimmer, BS, National Sales Manager, Trilogy Integrated Resources, LLC, California

The Power of the Question: Facilitated Dialogue as a Vehicle for Community Action

For ten years, Ingham County (Michigan) Health Department has used facilitated dialogue to engage the community and multi-sector partners in designing and implementing creative strategies to improve the community's health. This has resulted in dozens of sustainable community-managed resources such as urban gardens, a health care coverage model, and ex-offender re-entry programs. The department's intentional use of facilitated dialogue to achieve community health goals has created efficiency in collaborative decision-making processes, leveraged new funding from multiple partners, and greatly increased public health's visibility as a valued community partner. In 2008, the presenter helped to launch the Facilitators Guild to expand the community's capacity to facilitate dialogue. Rather than sharing a toolbox of techniques, this session will showcase what the Guild discovered about the values, norms, and skills of effective facilitation, and how local health departments can use them to build their internal capacity to engage and mobilize the community.

Facilitator/Speaker

Doak Bloss, BA, Health Equity Coordinator, Ingham County Health Department, Michigan

Using Community Data to Improve Community Health: Planning, Policy, and Tracking

The Community Health Status Indicators (CHSI) is a report that helps communities to see, react, and act upon creating a healthy community (<http://communityhealth.hhs.gov>). The report can serve as a starting point

for policy development and planning by helping with community assessment of needs, quantification of vulnerable populations, and measurement of preventable diseases, disabilities, and deaths. CHSI provides easy to understand reports that contain comprehensive and nationally comparable data that convey the breadth of public health issues and the uniqueness of local needs and assets. CHSI provides peer-county comparisons, enabling communities to benchmark their health indicators against similar counties. This session will show how communities can use CHSI to plan, influence policy, and track their efforts to improve community health status.

Facilitator/Speaker

Ron Bialek, MPP, President, Public Health Foundation, District of Columbia

Work it Out: Engaging New Public Health Partners in the 21st Century

Work it Out: Engaging public health partners in the 21st century explores one example of successful multi-sector partnerships to address adolescent obesity prevention and health promotion. Sectors addressed include: public schools, youth development, local public health, local parks and recreation department, extension programs, non-profits and the private business sector coming together to support the youth-led, cost-efficient public health intervention, TITANS Program. The TITANS Program is a 12-week nutrition and physical activity program created for youth by youth to address risk factors associated with premature death related to cardiovascular disease and diabetes in ethnic minority populations. By the end of the sessions, participants will be able to: identify opportunities to forge non-traditional partnerships in their communities, describe key components of successful multi-sector interventions.

Facilitator

TBD

Speakers

D'Yuanna Allen, MPH, Youth Development Specialist, Metro Public Health Department, Tennessee

Working Across Sectors to Raise Community Investment in Public Health Preparedness

This session will provide participants an example of how a small, rural health department utilized partnerships established through emergency preparedness efforts to reach across sectors to expand these partnerships, resulting in a heightened level of awareness of the value of public health in the community and increased personal and resource investment in community-based public health preparedness. The session will present their efforts as a case study, utilizing after action reports and data collected from a public health preparedness exercise that relied heavily on community partner involvement. Lafayette County is a rural County, population 33,125, neighboring the Kansas City, Missouri metropolitan area. It is in this statistical area for City Readiness Initiative planning purposes. The exercise presented will have tested three key objectives: 1) the capability of a rural health department staff of 12 to utilize relationships with community emergency management agencies, chambers of commerce, school districts, media, private businesses and volunteers to test an alternate dispensing model in concordance with CRI methodologies, 2) test contingent methods for disseminating communications in an emergency, and 3) survey participants who receive these materials to determine if SNS medications had been dispensed using this methodology, what proportionate number of adverse reactions might have occurred.

Facilitator

TBD

Speakers

Rodney Kirchoff, LPN, EMT-P, Emergency Response Planner, Lafayette County Health Department, Missouri

Nola Martz, MSN, RN, Administrator, Lafayette County Health Department, Missouri

Working for Balance: A partnership Offering Worksite Wellness Programming

Working for Balance is a comprehensive workplace wellness program designed to contain corporate health-related costs by helping companies promote positive changes in personal health practices among employees. Developed through a partnering of Tulsa Health Department, OU Physicians and YMCA of Greater Tulsa, the program provides the resources, education and technology to easily implement and manage a customized wellness initiative resulting in measurable outcomes. Good things come in threes, like the three respected community leaders who have come together, doing what they do best, to form the Working for Balance program. Together, these professional teams provide the education, medical care, fitness programs and managerial tools to optimize employer results.

Facilitator

TBD

Speakers

Jill Almond, BA, Wellness Coordinator, Working for Balance Program, Tulsa County Health Department, Oklahoma

Karen Sanders, RN, MSN, MS, Instructor, Division of Research, University of Oklahoma Department of Family Medicine, Oklahoma

