**Detailed Plans for Priority Areas and Strategies**

**PRIORITY 1: OBESITY**

**Baseline Data:**
- Throughout the ELVPHD area, obesity rates as reported:
  - In 2013, there were an estimated 12,616 adults who were obese (29.4%). By county: Burt, 1,624; Cuming, 2,029; Madison, 7,489; and Stanton, 1,474.  
  - In 2014, there were an estimated 13,328 adults who were obese. (23.4%). By county: Burt, 1,668; Cuming, 1,970; Madison, 8,551; and Stanton, 1,494.  
  - 33.9% of respondents to the 2013 survey were obese. 39.4% of the respondents of the 2016 survey were obese.  
  - Respondents in 2016 consumed considerably less fruit than those of 2013.  
  - Respondents in 2016 consumed considerably less vegetables than those of 2013.  
  - In 2016, the weight difference by gender are significant, with a larger proportion of males (28% more) either overweight or obese.  
  - In 2013, 66% of survey respondents reported exercising for 20-30 minutes, 3 times per week or less. In 2016, 72% of survey respondents reported exercising for 20-30 minutes, 3 times per week or less.  

<table>
<thead>
<tr>
<th>2013</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 servings/day</td>
<td>2.0%</td>
</tr>
<tr>
<td>1-2 servings/day</td>
<td>53.0%</td>
</tr>
<tr>
<td>3-4 servings/day</td>
<td>21.0%</td>
</tr>
<tr>
<td>5+ servings/day</td>
<td>5.3%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2013</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 servings/day</td>
<td>10.5%</td>
</tr>
<tr>
<td>1-2 servings/day</td>
<td>56.0%</td>
</tr>
<tr>
<td>3-4 servings/day</td>
<td>26.0%</td>
</tr>
<tr>
<td>5+ servings/day</td>
<td>7.5%</td>
</tr>
</tbody>
</table>

**Data Source:**
- BRFSS, 2013, 2014  
- County Health Rankings, 2013 and 2016  
- 2013, 2016 ELVPHD community-level health survey  

**Linkage with ELVPHD Strategic Plan:** health promotion, marketing, collaboration and partnerships, quality improvement

**Linkage with State and National Initiatives:** The Healthy People 2020 (HP2020) goal for a healthy weight is 33.9% from a U.S. baseline of 30.8%. The current healthy weight for ELVPHD is 33.3%. HP2020 Objective NWS-14: Increase the contribution of fruits to the diets of population aged 2 years and older. HP2020 Objective NWS-15: Increase the variety and contribution of vegetables to the diets of the population aged 2 years and older. HP2020 Objective PA-1: Reduce the proportion of adults who engage in no leisure-time physical activity. HP2020 Objective PA-4: Increase the proportion of the Nation’s public and private schools that require daily physical education for all students. HP2020 Objective Michelle Obama’s Let’s Move Childcare and School lunch initiatives encourage increased health for children and families. The 2011-2016 Nebraska Physical Activity and Nutrition State Plan Healthy eating and active living are focus areas of this plan. Both are listed under this priority area align with the focus areas of this statewide plan.

**Linkage with DHHS Community Health Improvement Plan:**
- Reducing heart disease and stroke.  
- Reduce cancer morbidity and mortality.  
- Expand health promotion capacity.  
- Improve the integration of public health and health care services.  
- Expand capacity to collect, analyze and report health data.  

**Linkage with UNMC College of Public Health Strategic Plan:**
- Cancer prevention and control  
- Community-based health transformation

**Linkage with Public Health Association of Nebraska (PHAN) Strategic Plan:**
- Expand Educational Opportunities  
- Explore Diverse Funding

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Problem Statement: "Obesity is among the most common, costly, and preventable of all health problems in Nebraska and throughout the United States. A healthy diet, physical activity, breastfeeding, and maintaining healthy body weight all significantly contribute to preventing obesity..." – Nebraska Physical Activity and Nutrition State Plan 2011-2016
### Current Programs/Resources:
- Nutritional education in public settings (fair booths, schools, senior centers, newsletters, etc.) - FRHS, SFMH, OMH, NENCAP, ELVPHD
- Child Care Food Program offered in licensed childcare centers
- USDA school lunch regulations (Michelle Obama)
- Nutritional counseling through Commodity Supplemental Food Program, Head Start/Preschools and WIC — NENCAP
- Healthy vending/cafe options at worksites—SFH, FRHS, OMH, ELVPHD
- Nutritional counseling for patients through health coaching and/or case managers—SFH, FRHS.
- Coaching/education as a component of home visitation programs
- Presentations are being given in schools regarding physical activity/nutrition - ELVPHD Minority Health Program offers Eating Smart-Being Active program in Spanish
- NENCAP Home Visitation Program offers an educational topic regarding ‘rewarding children without food’
- Norfolk has community garden in place.
- Farm to School program is utilized by a few area schools
- SNAP food program accepted at farmer’s markets
- HyVee offers nutritionist/cooking classes.
- Some walking trails are available—Cowboy Trail, Skyview Lake, North Fork

### Analysis of Existing Gaps
- Some people may not be aware of available resources—more marketing.
- Food/candy is used as a reward at home, school, and work places.
- Food bank donations and general supply of food bank foods are often low quality and poor on the nutritional-value scale
- Convenience foods (pre-packaged foods, fast foods, and drive thru options) are cheaper and fast—more appealing for busy, working people.

### Goal #1: Increase fruit and vegetable consumption within the 3-year plan period.

<table>
<thead>
<tr>
<th>Proposed Strategies/Activities</th>
<th>Policy Change</th>
<th>Evidence-Based</th>
<th>Potential Partners</th>
<th>Timeframe</th>
<th>Performance Measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Promote healthy vending machines in communities, schools (including concession stands), and workplaces. Example: Increasing Access to Healthy Beverages in Public Buildings and Worksites, Model Practice, 2013. Example: Creating A Healthy School Environment, Model Practice, 2013.</td>
<td>X</td>
<td>X</td>
<td>Community leaders&lt;br&gt;Schools&lt;br&gt;Employers&lt;br&gt;Hospitals&lt;br&gt;Restaurants</td>
<td>2016 and ongoing</td>
<td>At least 10 sites (communities, schools, or workplaces) will develop and implement healthy vending policies. Health outcome will be measured by a reported increase in fruit and vegetable consumption in the next survey.</td>
</tr>
<tr>
<td>2. Promote the reduction of consumption of processed foods. Example: CDC National Diabetes Prevention Program (DPP), Model Practice.</td>
<td>X</td>
<td>X</td>
<td>Community-based organizations&lt;br&gt;Nursing Homes</td>
<td>2016 and ongoing</td>
<td>OMH Performance Measures:&lt;br&gt;• See the ACO matrix</td>
</tr>
<tr>
<td>3. Promote healthy lifestyles for families through education related to family-based health tips and interventions, including elements such as: shopping and cooking healthy&lt;br&gt;healthy meals ‘on-the-go’&lt;br&gt;healthy meals on a budget Example: Eating Smart and Being Active, Model Practice, 2010.</td>
<td>TBD</td>
<td></td>
<td>Northeast Nebraska Community Action Partnership (NENCAP) Schools</td>
<td>2016 and ongoing</td>
<td>At least 10 educational initiatives will be implemented each year regarding family-oriented healthy lifestyles. Health outcome will be measured by a reported increase in fruit and vegetable consumption in the next survey.</td>
</tr>
</tbody>
</table>

### Goal #2: Increase physical activity in the ELVPHD district within the 3-year plan period.

<table>
<thead>
<tr>
<th>Proposed Strategies/Activities</th>
<th>Policy Change</th>
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<th>Potential Partners</th>
<th>Timeframe</th>
<th>Performance Measures</th>
</tr>
</thead>
</table>

14
River Trail, Summit Lake Trails.
- ELVPHD has brochures for many communities with various walking routes mapped out.
- Norfolk and West Point “Trails” Committee
- Tai Chi offered in many communities as a physical activity option for seniors.
- Many areas have fitness centers/gyms available to the public. Some with discounted options for low income.
- Health coaches and case management available - SFMH, ELVPHD, MHC, OMH.
- Outpatient Nutrition Services provided by various providers in the district.
- Classes for diabetes education are offered throughout the district.
- Pre-Diabetes Classes discusses what life changes can be made to prevent diabetes and other health problems. Topics covered include healthy weight, nutrition, cholesterol, high-blood pressure and glucose levels.
- Bountiful Baskets program going in several communities. This increases access to lower-cost fresh produce.
- Most communities have parks identified as safe places for outdoor activities.
- NAP SAAC program offers education to childcare providers regarding physical activity and nutrition.

<table>
<thead>
<tr>
<th>1. Promote worksite wellness policies/plans and implementation of evidence-based worksite wellness programs. NACCHO The Guide to Community Preventive Services (Community Guide) highlights worksite health promotion as evidence-based.</th>
<th>X</th>
<th>Employers Chambers of Commerce</th>
<th>2016 and ongoing</th>
<th>Five businesses will implement this strategy and will demonstrate improved health through specific health outcome measures.</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Promote at least 20 minutes of moderate physical activity each day. Example: CDC National Diabetes Prevention Program, Model Practice.</td>
<td>X</td>
<td>Community-based organizations Hospital</td>
<td>2016 and ongoing</td>
<td>Increase DPP class participation in the service area by 5% each year. Increase percentage of DPP class participants that have completed an A1C test with results higher than 7% who lower their AIC number by ½ of a percentage point by the end of the class series.</td>
</tr>
<tr>
<td>3. Enhance community planning and design practices through support for the development of parks and walking trails, etc. The Power of Trails for Promoting Physical Activity in Communities (<a href="http://www.activelivingresearch.org">www.activelivingresearch.org</a>) reports that parks and trails are key elements in promoting physical activity in communities.</td>
<td>X</td>
<td>Municipalities Community Development Organizations</td>
<td>2016 and ongoing</td>
<td>At least one new physical fitness option will be in process during the survey period.</td>
</tr>
<tr>
<td>4. Promote healthy lifestyles for families through education related to family-based health tips and interventions including elements such as: family physical activity • decreased screen time • getting outdoors and utilization of parks, trails, walking routes, etc. Example: Eating Smart and Being Active, Model Practice, 2010.</td>
<td>TBD</td>
<td>NENCAP Schools Hospital Community Development Organizations</td>
<td>2016 and ongoing</td>
<td>At least 10 educational initiatives will be implemented regarding family-oriented healthy lifestyles. Health outcome will be measured by a reported increase in physical activity in the next survey or by current initiatives sponsored by OMH.</td>
</tr>
</tbody>
</table>

Obesity Workgroup Team Members

How to get involved in obesity initiatives:
**PRIORITY 2: ACCESS TO CARE**

**Problem Statement:** Barriers in recruitment, training and retention of healthcare providers is contributing to a lack-of-access situation in the ELVPHD district, and across rural Nebraska.

<table>
<thead>
<tr>
<th>Current Programs/ Analysis of Existing Gaps</th>
<th>Goal #1: Increase access to primary care services within the 3-year plan period.</th>
</tr>
</thead>
</table>

**Baseline Data:**
- All four counties in the ELVPHD health district are designated health provider shortage areas in primary care, dental health, and mental health.  
- Primary care provider density (ratio of population to primary care provider)  

<table>
<thead>
<tr>
<th>Region</th>
<th>2013</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nebraska</td>
<td>1,413:1</td>
<td>1,345:1</td>
</tr>
<tr>
<td>Burt County</td>
<td>3,425:1</td>
<td>3,287:1</td>
</tr>
<tr>
<td>Cuming County</td>
<td>3,052:1</td>
<td>2,999:1</td>
</tr>
<tr>
<td>Madison County</td>
<td>1,397:1</td>
<td>1,260:1</td>
</tr>
<tr>
<td>Stanton County</td>
<td>Not reported</td>
<td></td>
</tr>
</tbody>
</table>

- Community survey respondents cited the following barriers that prevent them from seeking healthcare services or prescription drugs:
  - Can’t pay for health screenings/services: 21.4%  
  - Health insurance doesn’t cover: 12.2%  
  - Deductibles or co-payments too high: 30.6%  
- 24% of survey respondents do not have dental insurance.
- Dental appointments within the past year increases with income. For respondents with income <=$25,000, only 46% had a dental exam.
- Hospital-specific community health survey respondents indicated a desire for increased services.
- Only 41% of dental providers in the area accept Medicaid.
- Only 27% of dental providers in the area accommodate Spanish-speaking patients via provision of an interpreter.
- Behavioral health wait times for appointments is 2-3 weeks locally and 2-3 months for severe illness needing intense psychiatric services.
- Chlamydia rates have doubled in the ELVPHD jurisdiction over the past 5 years.

**Linkage with ELVPHD Strategic Plan:** health promotion, collaboration and partnerships, quality improvement

**Linkage with State and National Initiatives:** HP2020 Objectives AHS-3: Increase the proportion of persons with a usual primary care provider. OH-7: Increase the proportion of children, adolescents and adults who used the oral health care system in the past year. MHMD-5: Increase the proportion of primary care facilities that provide mental health treatment onsite or by paid referral. The Obama Administration is committed to raising awareness about mental health issues, including expanding mental health coverage via ACA.

**Linkage with DHHS Community Health Improvement Plan:**
- Improve the integration of public health, behavioral health and health care services.
- Expand the capacity to collect, analyze and report health data.

**Linkage with Public Health Association of Nebraska (PHAN) Strategic Plan:**
- Expand educational opportunities.
- Explore diverse funding.

**Linkage with UNMC College of Public Health Strategic Plan:**
- Health System Transformation
- Community-Based Health Transformation

**Data Source:**
- HRSA, HPSA Data Warehouse, 2016
- County Health Rankings, 2013 and 2016
- 2016 ELVPHD community-level health survey
- 2016 ELVPHD phone survey of dental providers
- Verbal report from provider to ELVPHD, 2015
- Nebraska Electronic Disease Surveillance System, 2015
### Resources:
- Advocacy organizations exist that talk to elected officials
- Existence of MHC—primary care, dental and mental health services
- Some providers offer Spanish translation services for patients
- Public immunization clinic does exist. Other agencies are offering adult-based immunizations in innovative settings
- There are concerned agencies/groups and individuals at large that want to mobilize to solve this issue
- Smile In Style program in preschools and childcare facilities
- Creation of the Northeast Nebraska Behavioral Health Network
- Some areas are oversaturated with LMHPs
- Healthy Communities Initiative Coalition in existence
- DHHS conducting STD surveillance
- 1/3 of MHC staff are bilingual
- Veteran’s Advisory Committee exists (through ELVPHD’s VetSET Coordinator)
- Many employers offering Employee Assistance Programs (EAPs)
- TeamMates and other organized groups offer support systems for those in need
- Some dental clinics are now accepting Medicaid
- VetSET exists to help veterans

### Proposed Strategies/Activities

<table>
<thead>
<tr>
<th>Proposed Strategies/Activities</th>
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<th>Performance Measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Education regarding necessity of Medicaid expansion in Nebraska.</td>
<td>X</td>
<td></td>
<td>Hospital</td>
<td>2016 and ongoing</td>
<td>A minimum of 2 correspondences annually promoting Medicaid expansion to elected officials.</td>
</tr>
<tr>
<td>2. Enhance the availability of age-appropriate adult immunization opportunities—especially influenza. Annual flu vaccination for all persons age 6 months and above is recommended by CDC</td>
<td></td>
<td>X</td>
<td>NENCAP Hospitals/Medical Clinics Business places Chambers of Commerce</td>
<td>2016 and ongoing</td>
<td>Increase the number of influenza vaccines administered by 5% each year.</td>
</tr>
<tr>
<td>3. Enhance utilization of STD screening and treatment programs through primary care clinics and Title X services. Example: Integration of Family Planning Services into an STD Clinic Setting, Model Practice, 2010</td>
<td></td>
<td>X</td>
<td>Medical Clinics ELVPHD to promote clinics that provide this service</td>
<td>2016 and ongoing</td>
<td>Further evaluate to determine our role in this activity.</td>
</tr>
</tbody>
</table>

### Goal #2: Increase access to dental health services within the 3-year plan period.

<table>
<thead>
<tr>
<th>Proposed Strategies/Activities</th>
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<th>Potential Partners</th>
<th>Timeframe</th>
<th>Performance Measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Education regarding necessity of Medicaid expansion in Nebraska.</td>
<td>X</td>
<td></td>
<td>Hospital</td>
<td>2016 and ongoing</td>
<td>A minimum of 2 correspondences annually promoting Medicaid expansion to elected officials.</td>
</tr>
</tbody>
</table>
their access to care issues  
- Ponca Tribe of Nebraska, Norfolk 
  Clinic opened a Behavioral Health 
  Clinic for American Indians/Natives 
- Ponca Tribe of Nebraska ($5 each way) 
  and Midtown Health Center offers 
  transportation services, as well as 
  Norfolk Public Transportation ($2 each 
  way) available 
- Liberty Centre offers transportation 
  (only to its members) 
- Psychiatric nurse practitioner from 
  SFMH expanded her services to one 
  more clinic (Hooper), now offering 
  psychiatric services at 3 locations 
- Region 4 contracts for reimbursement 
  for behavioral health services 
- Oasis telehealth- O’Neill and Jr. High 
  School 
- Midtown Health Center working on 
  contract with UNMC for behavioral 
  medication management 
- Midtown Health Center hired therapist 
  for all ages 
- Local Suicide Prevention Coalition is 
  active 
- 20 bed adult inpatients at FRHS 
- Local Crisits Care Line 
- Local Continuum of Care Chapter is 
  active in Norfolk 
- Parent to Parent Network is a 
  resource 
- Probation office provides 6 support 
  groups 
- Veterans Home has a psych provider 
- Drug Court (Norfolk) 

- Transportation in rural 
  areas is a huge shortage 
- High need for 
  prescribers for 
  behavioral health 
- High need for programs 
  aimed at post-war 
  veterans and their 
  families. 
- Not all employers offer 
  EAP programs. 
- ELVPHD offers FOBT 
  kits 
- Lack of utilization of STD 
  screenings is a big issue 
- Law enforcement is not 
  utilizing crisis team 
- Need for all agencies to 
  share information at 
  Continuum of Care 
  meetings 
- Richard Young 
  telehealth does not 
  accept Medicare 
- Poor reimbursement for 
  psych care 
- No support groups for 
  people with certain 
  diagnoses—no funding 
  for such groups. 
- No geriatric behavioral 
  health beds.

2. Continue fluoride varnish program and 
   create oral care policies in centers. 
   Integrating dental care and early childhood 
   facilities is a best practice supported by 
   American Academy of Pediatrics.

   - NENCAP 
   - MHC 
   - Childcare Centers 
   - Private contracted 
   - public health dental 
   - hygienists 

   - 2016 and 
   - ongoing

3. Explore additional oral health services, such 
   as sealants or fluoride in schools program. 
   Example: Oral Health Access for Young 
   Children program endorses these services as 
   being evidence-based.

   - Neighboring health 
   - departments 
   - MHC 
   - Private contracted 
   - public health dental 
   - hygienists 

   - 2016 and 
   - ongoing

**Goal #3:** Increase access to behavioral/mental health services within the 3-year plan period.
<table>
<thead>
<tr>
<th>Proposed Strategies/Activities</th>
<th>Policy Change</th>
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<th>Potential Partners</th>
<th>Timeframe</th>
<th>Performance Measures</th>
</tr>
</thead>
</table>

**Goal #4: Promote healthcare careers within the 3-year plan period.**

<table>
<thead>
<tr>
<th>Proposed Strategies/Activities</th>
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<th>Evidence-Based</th>
<th>Potential Partners</th>
<th>Timeframe</th>
<th>Performance Measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Collaborate with Northern Nebraska Area Health Education Center (AHEC) to familiarize youth about careers in: • Medicine (primary care provider) • Dentistry • Psychiatry/mental or behavioral health • Public Health</td>
<td></td>
<td></td>
<td>ESU 2 reVision AHEC UNMC College of Public Health Northeast Community College student nurses</td>
<td>2016 and ongoing</td>
<td>At least one correspondences with local AHEC per year.</td>
</tr>
</tbody>
</table>

---

Access to Care Workgroup Team Members:

<table>
<thead>
<tr>
<th>Name</th>
<th>Organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>McKayla Hammond</td>
<td>Elkhorn Logan Valley Public Health Dept.</td>
</tr>
<tr>
<td>Sara Cameron</td>
<td>Oakland Mercy Hospital/ELVPHD Board of Health</td>
</tr>
<tr>
<td>John Werner</td>
<td>Oakland Mercy Hospital</td>
</tr>
<tr>
<td>John Werner</td>
<td>Oakland Mercy Hospital</td>
</tr>
<tr>
<td>Beth Buss</td>
<td>Elkhorn Logan Valley Public Health Department</td>
</tr>
</tbody>
</table>

How to get involved in Access to Care initiatives:

McKayla Hammond, Elkhorn Logan Valley Public Health Dept.  
402-529-2233
### PRIORITY 3: CANCER PREVENTION AND SCREENING

**Problem Statement:** When preventative practices and cancer screenings are not utilized, larger and costlier cancer conditions can result, which increases medical costs, and decreases quality of life and life expectancy.

<table>
<thead>
<tr>
<th>Baseline Data:</th>
<th>Data Source:</th>
</tr>
</thead>
<tbody>
<tr>
<td>ELVPHD</td>
<td>60.6%</td>
</tr>
<tr>
<td>State of Nebraska</td>
<td>61.1%</td>
</tr>
<tr>
<td>Women, 50-74 years old, up-to-date on breast cancer screening:</td>
<td></td>
</tr>
<tr>
<td>ELVPHD</td>
<td>75.5%</td>
</tr>
<tr>
<td>State of Nebraska</td>
<td>74.9%</td>
</tr>
<tr>
<td>Women, 21-65 years old, up-to-date on cervical cancer screening:</td>
<td></td>
</tr>
<tr>
<td>ELVPHD</td>
<td>84.2%</td>
</tr>
<tr>
<td>State of Nebraska</td>
<td>83.9%</td>
</tr>
<tr>
<td>One in 5 adults in the ELVPHD jurisdiction (18.2%) are current smokers. State average is one in 6 (17.4%). The percent of current smokers for ELVPHD did not change 2011-2014.</td>
<td></td>
</tr>
</tbody>
</table>

#### Linkage with ELVPHD Strategic Plan:
- Promotion of safe and healthy lifestyles, marketing, collaboration, quality improvement

#### Linkage with State and National Initiatives:
- HP2020 Objective C-15: Increase the proportion of women who receive a cervical cancer screening based on the most recent guidelines. HP2020 Objective C-16: Increase the proportion of adults who receive a colorectal cancer screening based on the most recent guidelines. HP2020 Objective C-17: Increase the proportion of women who receive a breast cancer screening consistent with current guidelines.

#### Linkage with DHHS Community Health Improvement Plan:
- Reducing cancer morbidity and mortality.
- Expand health promotion capacity.
- Improve the integration of public health, behavioral health and health care services.

#### Linkage with UNMC College of Public Health Strategic Plan:
- Cancer prevention and control
- Community-Based Health Transformation
- Health System Transformation

#### Linkage with Public Health Association of Nebraska (PHAN) Strategic Plan:
- Expand educational opportunities.
- Explore diverse funding.

| Current Programs/Analysis of Existing Gaps | Goal #1: Increase cancer prevention activities within the 3-year plan period. |
### Resources:
- Some health fair screenings available
- Hospital outreach services to business community
- Radon test kits disseminated through County Extension offices
- Elkhorn Logan Valley Colon Cancer Prevention Coalition
- New occult blood test screening has become available
- Entitlement programs such as Every Woman Matters for breast and cervical cancer screening
- Stay in the Game Nebraska Colon Cancer Screening Program
- Midtown Health Center is a resource for under- and uninsured
- Funding available through Komen and Avon for breast health
- With new electronic health records, screening needs are flagged
- Several community resources exist, now we need better coordination

### Proposed Strategies/Activities

<table>
<thead>
<tr>
<th>Proposed Strategies/Activities</th>
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<th>Evidence-Based</th>
<th>Potential Partners</th>
<th>Timeframe</th>
<th>Performance Measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Increase tobacco free properties (including e-cigarettes). Example: Tobacco-free properties is an evidence-based practice.</td>
<td>X</td>
<td>X</td>
<td>Business owners Employers Elected Officials Chambers of Commerce</td>
<td>2016 and ongoing</td>
<td>A minimum of 3 correspondences annually promoting tobacco free properties in the jurisdiction.</td>
</tr>
<tr>
<td>2. Increase education regarding need for increased taxation (soda, tobacco, alcohol, etc.) as method of prevention and cessation. Taxation is a proven strategy in prevention and cessation endeavors.</td>
<td>X</td>
<td>X</td>
<td>Healthcare Providers Friends of Public Health in Nebraska</td>
<td>2016 and ongoing</td>
<td>A minimum of 3 correspondences annually promoting taxation laws to elected officials.</td>
</tr>
<tr>
<td>3. Explore additional cancer prevention programs, such as permanent shade structures, radon mitigation programs, etc.</td>
<td>X</td>
<td>To be determined</td>
<td>To be determined based upon decision to pursue this strategy.</td>
<td>2016 and ongoing</td>
<td></td>
</tr>
</tbody>
</table>

### Goal #2:
Increase cancer screening rates within the ELVPHD district within the 3-year plan period.
Different organizations support different screening frequencies. Health dept. needs more marketing. There is still a gap in education. There is a generation that only utilizes computers. Other generations don’t use computers. E-cigarettes is a huge problem in the area.

<table>
<thead>
<tr>
<th>Proposed Strategies/Activities</th>
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<th>Potential Partners</th>
<th>Timeframe</th>
<th>Performance Measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Expand health fair and screenings offered in innovative settings. CDC endorses preventive health screenings.</td>
<td></td>
<td></td>
<td>Hospitals, Medical Clinics, PATCH, Northeast Community College student nurses</td>
<td>2016 and ongoing</td>
<td>At least 1 health screening opportunity will be implemented each year. Health outcomes will be measured by a reported increase in health screening rates.</td>
</tr>
<tr>
<td>2. Pursue available funding sources to enhance availability of, and opportunities for, prevention and screening programs (Komen, Avon, etc.). Base applications upon evidence-based programming and stipulations set forth by funders.</td>
<td></td>
<td></td>
<td>ELVPHD and partners</td>
<td>2016 and ongoing</td>
<td>TBD</td>
</tr>
<tr>
<td>3. Continue radon screening program on fee-for-kit basis. American Cancer Society endorses radon screening and mitigation programs.</td>
<td></td>
<td></td>
<td>County Extension Offices, Realtors, Elected Officials</td>
<td>2016 and ongoing</td>
<td>Increase participation in the service area by 5% each year. Outcome measures for participants will also be subject to ELVPHD Performance Measure: 65% of radon kits will be returned each year.</td>
</tr>
</tbody>
</table>

Cancer Prevention and Screening Workgroup Team Members:

<table>
<thead>
<tr>
<th>Cancer Prevention and Screening Workgroup Team Members:</th>
<th>How to get involved in cancer prevention and screening initiatives:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kendra One Horn, Goldenrod Regional Housing Agency</td>
<td>Tracy Benjes, Elkhorn Logan Valley Public Health Department</td>
</tr>
<tr>
<td>Anastasia Stokely, Franciscan Care Services</td>
<td>402-529-2233</td>
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<tr>
<td>Teresa Cortez, Ponca Tribe of Nebraska</td>
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<td>Lora Langley, Ponca Tribe of Nebraska</td>
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<tr>
<td>Sara Pfeifer, Ponca Tribe of Nebraska</td>
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<tr>
<td>Linda Miller, ELVPHD Board of Health/FRHS Board of Directors</td>
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<tr>
<td>Dan Frink, Oakland Mercy Medical Clinic</td>
<td></td>
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<tr>
<td>Jayna Brown, Oakland Mercy Hospital</td>
<td></td>
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<tr>
<td>Nikki Pierce, Northeast Nebraska Community Action Partnership</td>
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<tr>
<td>Connie Cooper, Northeast Nebraska Area Agency on Aging</td>
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<tr>
<td>Scott Slous, Faith Regional Health Services/Carsen Cancer Institute</td>
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<tr>
<td>Ashley Petersen, Elkhorn Logan Valley Public Health Department</td>
<td></td>
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<tr>
<td>Mason McCain, Elkhorn Logan Valley Public Health Department</td>
<td></td>
</tr>
<tr>
<td>How to get involved in cancer prevention and screening initiatives:</td>
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</tr>
</tbody>
</table>

PRIORITY 4: STANDARD MOTOR VEHICULAR SAFETY

**Problem Statement:** Motor vehicle crashes

**Baseline Data:**

**Data Source:**
are a leading cause of injury and death; at the same time there are (according to the CDC) many proven prevention strategies. Components include the use of seat belts and child safety seats, and limiting behaviors that impair judgment while driving.

- Texting while driving was rated #1 in terms of impact for the ELVPHD jurisdiction for risk behavior in both the 2013 and 2016 community-level health survey. Talking on a cell phone while driving was rated #3 in terms of impact for the ELVPHD jurisdiction for risk behaviors in both the 2013 and 2016 community-level health survey. ¹
- Although the mortality rate for this cause of death (death or injury resulting from a motor vehicle crash) is improving, it remains the most frequent cause of unintentional injury deaths in Nebraska. ²
- Traffic Data (ages 16-20) Rate per 10,000 Population³

<table>
<thead>
<tr>
<th></th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol-related fatal crashes</td>
<td>2.6 0.5</td>
<td>5.5 1.3</td>
<td>0.0 0.5</td>
</tr>
<tr>
<td>Alcohol-related injury crashes</td>
<td>10.5 8.8</td>
<td>16.6 11.6</td>
<td>10.8 6.0</td>
</tr>
<tr>
<td>Driving under influence (DUI)</td>
<td>13.1 14.8</td>
<td>16.6 14.7</td>
<td>18.9 11.7</td>
</tr>
</tbody>
</table>

² 2013, 2016 ELVPHD community-level health survey
³ Nebraska Statewide Health Needs Assessment, 2013
⁴ Nebraska Department of Transportation, 2014

Linkage with ELVPHD Strategic Plan: promoting safe lifestyles, collaboration

Linkage with State and National Initiatives: HP2020 Objective IVP-11: Reduce unintentional injury deaths. HP2020 Objective IVP-12: Reduce nonfatal unintentional injuries; HP2020 Objective IVP-13: Reduce motor vehicle crash-related deaths; HP2020 Objective-IVP-14: Reduce nonfatal motor vehicle crash-related injuries; HP2020 Objective IVP-15: Increase use of safety belts; and HP2020 Objective IVP-16: Increase age-appropriate vehicle restraint system use in children. American Association of State Highway and Traffic Officials (AASHTO) emphasis areas include: increasing seat belt usage, reducing alcohol-impaired driving, and keeping drivers alert. State and National laws have been considered in regards to motor vehicle safety and stiffening penalties for distracted or impaired driving.

Linkage with DHHS Community Health Improvement Plan:

- Expand health promotion capacity.

Linkage with UNMC College of Public Health Strategic Plan:

- Community-Based Health Transformation
- Health System Transformation

Linkage with Public Health Association of Nebraska (PHAN) Strategic Plan:

- Expand educational opportunities.
**Goal #1: Reduce standard motor vehicle accidents and injuries within the 3-year plan period**

<table>
<thead>
<tr>
<th>Proposed Strategies/Activities</th>
<th>Policy Change</th>
<th>Evidence-Based</th>
<th>Potential Partners</th>
<th>Timeframe</th>
<th>Performance Measures</th>
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<tbody>
<tr>
<td>1. Raise community levels of awareness regarding the dangers of distracted driving.</td>
<td>X</td>
<td></td>
<td>Schools, Community-based organizations, Elected Officials</td>
<td>2016 and ongoing</td>
<td>A minimum of 3 correspondences annually promoting distraction-free driving.</td>
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<td>Example: The M.E.T.H.O.D. (Mind, Eyes, Two Hands On Driving) program encourages implementation of school and community-based policies and laws that support responsible and distraction-free driving.</td>
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<tr>
<td>2. Collaborate with Nebraska State Patrol to host selective enforcement checks. This practice limits drunk-driving.</td>
<td></td>
<td>X</td>
<td>Healthy Communities Initiative, Nebraska State Patrol</td>
<td>2016 and ongoing</td>
<td>At least one enforcement check will be held annually. With increased enforcement, it is expected that citations will rise. Outcome measure will be a decrease in alcohol-related crashes over a 5-year period.</td>
</tr>
<tr>
<td>Example: Community Trials to Prevent High-Risk Drinking is an evidence-based strategy in NREPP. A component of Community Trials is the implementation of selective enforcement checks.</td>
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**Current Programs/Resources:**
- Child safety seat checks occur in some communities regularly—generally sponsored by hospitals
- Nebraska State Patrol has resources available
- Laws have been adopted in an attempt to eradicate distracted driving
- Geriatric Driving Assessments being offered at some locations
- Phone apps now available to deter distracted driving
- Car seats for qualifying individuals
- Car seat technicians in some communities
- Healthy Communities Initiative has an aim for reducing drunk-driving crashes

**Analysis of Existing Gaps**
- Elderly driving is a difficult topic for families to address.
- Legislatively, fines are not steep enough.
- More signage is needed on roadways warning drivers of children, etc.
- Personal attitudes/accountability are huge issues in participation of risky behaviors.
- Education needs to happen with parents so parents feel empowered to discuss risky behaviors with their children.
- There continues to be a lack of awareness regarding the dangers of distracted driving.
- Lack of knowledge regarding current resources available to deter distracted driving.

**Standard Motor Vehicular Safety Workgroup Team Members:**

| Ashley Petersen | Franciscan Care Services | Dusti Storm | Northeast Nebraska Community Action Partnership |
| Jerry Wordkemper | Franciscan Care Services | Nikki Mullanix | Elkhorn Logan Valley Public Health Department |
| Alisa Bruning | Franciscan Care Services | Melanie Thompson | Elkhorn Logan Valley Public Health Department |
| Terry Rasmig | Northeast Community College | Maritza Andrade | Elkhorn Logan Valley Public Health Department |
| Cliff Morrow | Burt Co. Supervisor/ELVPBD Board of Health | Mark Sears | Faith Regional Health Services |
| Christopher Johnson | Johnson Rehabilitation and Sports Performance | Barb Petersen | Faith Regional Health Services |
| Sally Olson | Memorial Community Hospital Health System | Mora McNeil | Faith Regional Health Services |

**How to get involved in vehicle safety initiatives:**
Kathy Becker, Healthy Communities Initiative
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OR
Mark Sears, Faith Regional Health Services
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