Public Health MATTERS

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Mitchell E. Daniels Jr.
Governor

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State Health Commissioner

Indiana State Department of Health

Welcome to the Indiana State Department of Health Newsletter

State Health Commissioner Gregory Larkin, M.D.

Thank you for your interest in the State Health Department's new quarterly newsletter, *Public Health Matters*. The newsletter was created to help educate Hoosiers about the role of our agency in the public health arena. This includes raising awareness about our many divisions, programs and services we provide to you.

Since being appointed State Health Commissioner in March of 2010 by Governor Daniels, I have focused on improving key areas of public health, including immunizing children, improving trauma care, tobacco reduction, reporting and reducing medical errors, preparing Indiana's public health organizations for accreditation and changing the health culture around Indiana. I'm proud to say we've been able to make great strides in these areas and others.

As you will read in this edition, Indiana Tobacco Prevention and Cessation recently became part of the State Health Department, our teens are better protected from communicable disease than ever before due to increased immunization requirements, our Division of Nutrition and Physical Activity is changing health culture by creating new wellness toolkits for schools and worksites, and State Health Department staff and partners worked diligently to create the recently released five-year State Health Improvement Plan.

As I've traveled the state and met many of you, I've been listening to your questions and concerns. As I meet new individuals, there are always questions about what our position is on certain health issues, activities we have coming up, initiatives, grants awarded, etc. It is my hope that this newsletter will provide this information and shed some light on what happens behind the scenes to protect the health of you and your family every day.

Please forward this newsletter to your patients, colleagues and anyone that you think would benefit from this information or sign them up by visiting http://bit.ly/publichealthmatters.

Regards,

Gregory Larkin
MD, FAAFP, FACOEM

Indiana Tobacco Prevention and Cessation Joins the State Health Department

1-800-QUIT NOW
Indiana's Tobacco Quitline

On July 1, Indiana Tobacco Prevention and Cessation became part of the State Health Department and is now the Tobacco Prevention and Cessation Commission (TPC). Tobacco reduction and protection from secondhand smoke exposure has now been further integrated into many existing state health promotion programs. TPC has developed a state and local tobacco control infrastructure and funds more than 65 minority and community coalitions.

Another core component of TPC is the Indiana Tobacco Quitline, a confidential, free telephone-based counseling service that helps Hoosiers quit smoking. The Quitline phone number is 1-800-QUIT-NOW and is available 7 days-a-week.

Nearly 5,000 Hoosiers from 90 counties entered the 2011 Quit Now Indiana contest!

This summer, the fourth Quit Now Indiana Contest got underway to help encourage Hoosiers to quit smoking. As an extra incentive to the benefits of better health, the contest offered participants a chance to win prizes for remaining tobacco-free during the month of October. Winners of the contest will be drawn at random, testing will be conducted to substantiate their smoke free status and will be announced in December.

State Health Improvement Plan Focuses on Improving Health Outcomes

Executive Committee had a broad-based, multi-sector representation from:

- Local and state public health
- Health professionals
- Community and business leaders
- Academia
- Health facilities
- State governmental agencies
- Not-for-Profits

A five-year plan outlining several priorities for improving the health of Hoosiers is now available. The Indiana State Health Improvement Plan focuses on: ensuring food safety, reducing healthcare associated infections, and reducing the burden of HIV, sexually transmitted diseases, and Viral Hepatitis, as well as infant mortality, obesity, and tobacco use. The six health priorities identified were determined to have the most significant influence on health and illness in Indiana. The Centers for Disease Control and Prevention health priorities, "Winnable Battles," were used as a basis.

"The goals, objectives and activities contained in the Indiana State Health Improvement Plan are geared toward improving the lives of all Indiana residents over the next five years," said State Health Commissioner Gregory Larkin, M.D. "Successful implementation can only occur through collaboration among individuals, public, private, governmental, and nonprofit organizations. The Indiana State Department of Health is confident that with strong and committed partners, the Plan will move forward and be successful in achieving optimal health for all Hoosiers."

The Plan was developed by an Executive Committee led by Dr. Deborah McMahan, Health Officer for the Fort Wayne-Allen County Department of Health and Dr. Richard B. Williams, Dean, College of Nursing, Health and Human Services, Indiana State University.

"The Plan focuses on several health priorities, as well as key system improvements that, when achieved, will significantly impact health in Indiana," said Dr. McMahan. "It is the hope and intent of the State Executive Planning Committee that each and every public health system partner will identify activities in the Plan which will enable them to contribute to the improvement of health outcomes in Indiana. The State Health Improvement Plan is founded on the premise that together, Indiana Public Health System partners can make a difference."

Indiana's adult smoking rate has substantially declined from a rate of 27.4 percent in 2001 to a historic low of 21.2 percent in 2010.

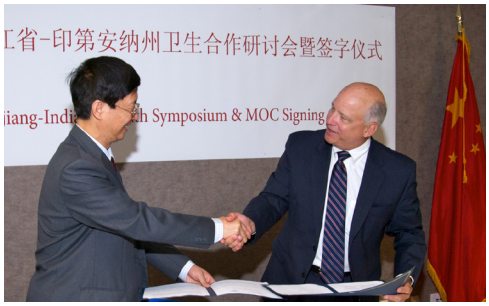
Call 1-855-HELP-1ST for Family Support and Referrals Statewide

For more than 20 years, the Indiana Family Helpline (IFHL) has been helping to improve the lives of Indiana residents by offering referral assistance and support in efforts to promote self sufficiency and a better quality of life for Hoosiers. The IFHL is a comprehensive information and referral program of the Maternal and Child Health Division with the State Health Department.

The focus of the IFHL is to provide information, referrals and consumer education on a variety of topics related to callers' social service needs. The IFHL can serve as a source of advocacy for callers who may struggle with meeting their needs on their own. In 2010, the IFHL responded to 44,973 incoming calls. There were 1,076 advocacy calls and 86,987 referrals provided.

Since 1988, the IFHL has been recognized by its bright yellow phone magnet with the 1-800-433-0746 toll free number. In August of this year, the IFHL activated a new 800 number and the logo will soon be getting a new look. The IFHL can now be contacted toll free by calling 1-855-HELP-1ST (1-855-435-7178). For Spanish-speaking callers, there is a Bilingual Communication Specialist available and for callers who may speak other languages, the IFHL has access to the AT&T Language Line.

State Health Department Hosts International Delegations



Three international delegations visited the State Health Department in early to late summer. In June, representatives from the Health Bureau of Zhejiang Province, China and the State Department of Health signed a Memorandum of Commitment (MOC) to develop a long-term relationship for the mutual benefit of the two states. They entered into an agreement to promote the health and safety of their citizens through public health advancements, the application of new medical technologies, and the development and improvement of health care policies.

In August, a Russian Delegation visited Indianapolis to discuss the health and social welfare of underserved women and children in the United States. They met with Connect2help, the Indianapolis Children's Bureau, Wishard Hospital, Susan Komen Race for the Cure and the Office of the Attorney General, Division of Victims Assistance.

They also met with Dr. Larkin and State Health Department Program Directors to discuss policies for underserved communities. Program areas that were represented included the office of Minority Health, Maternal and Child Health and the Hoosier Healthwise Healthcare program.

In September, a Czech Republic delegation visited Indianapolis to learn more about E-health and Telemedicine. They met with the Regenstrief Institute and Indiana Health Information Exchange to establish contacts and learn about the research centers.

In addition, the delegation met with Dr. Larkin and State Health Department staff to discuss the State of Indiana Health data plan and specific initiatives including the Quality Health First program to showcase the effort to align transparency, efficiency and quality.

2010 Medical Error Report is Released

The State Health Department recently released its Medical Error Report for 2010. This annual report is based on the National Quality Forum's 28 Serious Adverse Events. The most reported event in 2010 was a stage three or four pressure ulcer acquired after admission to a hospital. In four out of five years, pressure ulcers have been the most reported event.

There were 107 reported events in 2010. This is slightly higher than the 105 events reported in 2007 and 2008 but is the most number of reported events in the five-year history of the report. Some of the increase may be attributable to a 2009 change in the falls standard that likely resulted in an increased number of reportable events.

The most reported events in 2010 were:

- 34 stage 3 or 4 pressure ulcers acquired after admission to the hospital
- 33 foreign objects retained in a patient after surgery (30 in hospitals, 3 in ambulatory surgery centers)
- 17 falls resulting in a death or serious disability
- 14 surgeries performed on the wrong body part (12 in hospitals, 2 in ambulatory surgery centers)

In 2005, Indiana became the second state to adopt the National Quality Forum's reporting standards. The reporting standards are not intended as a comprehensive study of medical errors but rather as a broad representation of healthcare issues. Based on the findings, the State Health Department implemented initiatives to improve healthcare quality. Medical errors are preventable but prevention requires a system-based approach. By focusing on a few fundamental prevention activities and an organized prevention system, errors can be eliminated.

The State Health Department recently adopted hospital reporting rules for healthcare associated infections. Infection reporting begins effective January 1, 2012.

Ask THE EXPERT

with Shawn M. Richards
Respiratory Epidemiologist
Indiana State Department of Health

What is the flu vaccine?

The flu vaccine helps protect you from the influenza virus. There are different types of flu vaccine including the traditional shot given in the arm and the nasal spray.

How effective is the flu vaccine?

The effectiveness of the flu vaccine depends on the age and health status of the person getting the vaccine, the type of vaccine they are given, and the similarity or "match" between the flu viruses in the vaccine and those in circulation. The flu vaccine provides good protection against serious influenza illness.

Who should get the flu vaccine?

Everyone over 6 months of age should get a flu vaccine each flu season. The flu shot is approved for use in people older than 6 months, including people with chronic medical conditions. The nasal-spray flu vaccine is approved for use in people aged 2 through 49 who are not pregnant.

What will it protect against this year?

The 2011-2012 flu vaccine will protect against three influenza viruses, influenza A (H1N1) virus, influenza A (H3N2) virus and influenza B virus, that scientists have predicted will most likely be common during the season. These are the same three strands included in last year's vaccine. It is important to get vaccinated annually as the flu vaccine begins to lose its effectiveness after 6 to 8 months.

Where can I get the flu vaccine?

Your local health care provider, local health department and many of your local pharmacies carry the flu vaccine.

For more information, visit the Influenza Fact Sheet on the State Health Department's website.

Would you like to work for the Indiana State Department of Health?
Search for employment opportunities at www.in.gov/spd/

Teen Immunization Rates Up

Teens in Indiana are better protected than ever before from a variety of infectious diseases thanks to increased immunization requirements, interagency partnerships and dedicated state funding. According to the 2010 Centers for Disease Control and Prevention (CDC) *National Immunization Survey for Teens (NIS-Teen)*, some teen immunization rates in Indiana have increased by 60 to 70 percent from 2009 to 2010.

Certain immunizations such as the Tdap booster, meningococcal and varicella vaccines, all of which became school requirements last year, increased the most. This increase was primarily due to the efforts of local health departments, physicians and school nurses to ensure vaccinations were up-to-date and records were accurately maintained, as well as to monitor compliance with school immunization requirements.

The State Health Department worked with the Indiana Department of Education to change the administrative code for immunization requirements for teens starting with the 2010-2011 school year. These changes were intended to bring Indiana's immunization requirements to be more in line with CDC recommendations. The new requirements focused on diseases transmitted in schools, which is why the increase is notable in Tdap (64 percent increase), varicella (66 percent increase) and meningococcal vaccination rates (70 percent increase).

Following Governor Daniels' recommendation, the Indiana State Legislature has dedicated $11 million every year since the inception of the latest tobacco tax to provide immunization services to kids who are underinsured.

To learn more about immunization requirements in Indiana, visit the immunization page of the State Health Department's website at www.statehealth.in.gov.

Spotlight on...

Public Health Preparedness and Emergency Response Division

Indiana Health and Medical Response Classes

When Indiana responds to and prepares for manmade and natural disasters, responsibilities are broken up into numerous different functions referred to as Emergency Support Functions (ESF). All activities relating to health and medical emergency response are referred to as ESF-8. Each ESF has a designated lead agency charged with coordinating all tasks that fall under a particular ESF. The lead agency in Indiana for ESF-8 is the State Health Department, specifically the Public Health Preparedness and Emergency Response Division (PHPER). Created in 2002, the PHPER Division houses the public health and hospital preparedness programs. Early planning efforts in PHPER were highly focused on the distribution of emergency medical supplies. Recently, however, many efforts have been made to expand to an all hazards planning approach and embrace the role as the lead in coordinating all elements of state level health and medical emergency response in Indiana.

In support of this approach, the State Health Department and the Indiana Department of Homeland Security (IDHS) agreed to jointly develop and present an ESF-8 awareness course in each of Indiana's ten public health and homeland security districts. The primary objective of this course was to bring together local ESF-8 partners in each district and discuss the roles and responsibilities of ESF-8; how local, state and federal partners support each other during planning and response activities; present new initiatives that are underway associated with ESF-8 preparedness; and discuss the emergency planning process.

During the months of July and August, over 300 people representing local public health, hospitals, emergency management agencies, disaster mental health, EMS, the Red Cross and coroners attended the course throughout the ten districts. Response to the course was very positive and the State Health Department and IDHS received a lot of valuable input and suggestions regarding local preparedness considerations. Overall, the course was a great success, illustrating the dedication of local preparedness partners throughout the state, and provided a great foundation for future ESF-8 collaboration.

Updates to the Indiana Administrative Code

The State Health Department recently adopted **hospital reporting rules for healthcare associated infections,** LSA #11-102. Effective January 1, 2012, hospitals will report central line associated bloodstream infections, surgical site infections and catheter associated urinary tract infections. The Medical Licensing Board recently adopted rules regarding **expedited partner therapy**. Effective October 28, physicians can distribute medications to patients diagnosed with chlamydia or gonorrhea to provide to sexual partners without examination.

WIC rule amendments, LSA #10-731: added a definition, updated requirements for preauthorization visits and updated minimum stock requirements. (effective October 28)

Reporting of Healthcare Associated Infections rule, LSA #11-102: requires hospitals and ambulatory outpatient surgical centers to report healthcare associated infections. (effective October 28)

School Buildings and School Sites rule amendments, LSA #11-319: removed references to post-secondary institutions, colleges and universities from the rule. The rule was also reformatted. The rule amendments were finally adopted by the Executive Board and are being reviewed by the Office of the Attorney General.

Lead-Based Paint Program rule amendments, LSA #10-734: the rule updates and adds definitions, adds reporting requirements for licensed lead professionals, updates licensing requirements and updates remediation procedures. The rule amendments have been finally adopted by the Executive Board and are being reviewed by the Office of the Attorney General.

HIV rule amendments, LSA #11-458: clarify definitions, the information and counseling given to a pregnant patient, the provider's responsibilities to a pregnant patient and the reasons for not offering HIV tests. It also removes information that must be noted in a pregnant patient's medical records and adds information that must be listed in the confidentiality portion of the birth certificate. It adds the use of the rapid test and updates references to Indiana Code sections. The rule amendments have been preliminarily adopted by the Executive Board.

Newborn Screening rule amendments, LSA #10-504: the rule amendments update the newborn screening procedures to bring them into conformance with current program practices. This includes adding the requirements for newborn hearing screening tests. The rule amendments have been preliminarily adopted by the Executive Board.

2011 Public Health Legislative Update

Great strides for public health were made in the past legislative session due to a large bill carried by Senator Patricia Miller (R-Indianapolis) and a health-minded group of legislative committee members. Senate Enrolled Act (SEA) 366 housed initiatives such as consolidation of committees at the State Health Department, duplicative prison surveys, legislative restrictions on hiring practices and minor tweaks to the Indiana Death Registration System.

The State Health Department identified that the multiple healthcare committees meeting within the health department were becoming compartmentalized. To ensure coordination in the regulatory process, it was decided to merge many of the healthcare facility committees into one slightly larger committee of experts who would be able to understand the regulatory process in other types of facilities in hopes of making the entire process more comprehensive and efficient.

Another portion of SEA 366 identified a duplication of efforts in the prison system. All prisons in Indiana are accredited by a nationally accredited body, yet the State Health Department was still inspecting each prison annually. Through a joint effort with the Department of Corrections (DOC) and the State Health Department, it was decided that the State Health Department would still retain the right to inspect the prisons, yet an annual inspection was unnecessary given their accredited status.

While keeping with the efficiency theme in this piece of legislation, the State Health Department identified an errant section of the code restricting the ability of the department to hire qualified personnel such as the Director of the Children's Special Health Care Services program. The previous law required this director position to be either a medical doctor or hold a master's degree, thus preventing experienced, tenured staff with expert qualifications from holding the position. It is believed that reducing this qualification will not affect participants in this program.

Finally, SEA 366 made necessary changes to the electronic birth and death record system housed at the State Health Department by allowing authorized residents to execute death records. In most instances, a funeral director initiates the death certificate, but in a very few specific cases, a physician needs to have the ability to initiate a certificate themselves. It is believed that this will add to the incredible redevelopment of how certificates are provided to all citizens in Indiana by making these necessary documents even more accessible, accurate and timely.

Project 18

If you are a partner of the State Health Department and would like to be featured in the newsletter, please contact Amanda at aturney@isdh.in.gov.

Both Peyton Manning and the State Health Department are concerned about childhood obesity in Indiana. Project 18, named after Peyton's football jersey number, was created to teach at-risk children healthy behaviors when they are young to help avoid serious health risks that comes with childhood obesity. To help achieve this, Peyton, in conjunction with Peyton Manning Children's Hospital at St.Vincent, Marsh Supermarkets and Ball State University, has teamed up with partners across the state, including the State Health Department.

The partnership between Project 18 and the State Health Department focuses on improving the health of school-aged children. The Project 18 school program is targeted for third through fifth-grade students and includes an 18-week health and wellness curriculum designed to address the major risk factors in elementary school students in the areas of nutrition, physical activity and holistic (body, mind and spirit) health.

Both INShape Indiana and the State Health Department have long recognized the value in working with schools and school personnel to increase the opportunities for healthy foods and physical activities in that setting.

So far in 2011, the number of participating schools is 525. To learn more about Project 18, call 338-KIDS or visit www.project18.stvincent.org.

Office of Women's Health (OWH) Happenings: 2011 OWH/INShape Mini-Grant Opportunity Projects

Several Indiana counties have initiated planning for community activities centered on promoting walking and increased physical activity, as well as education on nutritious meal selections for women, with their 2011 OWH/INShape Mini-Grant Opportunity funding that was awarded in June. Two of the projects are highlighted below.

Delaware County's Women of INfluence initiative has started a twelve-week walking program that is modeled after the Illinois Women Out Walking program. The walkers participate in monthly educational programs, hosted by local experts on issues such as relaxation, stress management, nutrition and physical activity. On December 13, there will be a Women's Health Forum – replete with speakers on special topics and testimonials from the campaign's participants.

Parke County held a successful launch to their program and registered 19 women for their Families Eating and Exercising Together (FEET) program for the women of Parke County. FEET targets women aged 18 to 44 and divides participants into teams. The women receive support and weekly inspirational phone calls to help their team reach their goals. Participants are assessed at the beginning of the project on a number of health indicators such as resting pulse rate, body fat index, blood pressure and eating habits. The women will engage in an exercise program, ranging from Zumba, weight-training, yoga and walking (the Women Out Walking program will be provided). They will also learn to make healthy recipes at cooking seminars at their local grocery store.

FEET
Parke County
Families Eating & Exercising Together

On December 29, the "FEET Complete" event will mark the end of the program and post-measurements will be taken. Teams will demonstrate some of their favorite exercises and report on their successes, and data will be analyzed to announce a winner of the "Woman with the Most Improved Health."

Toolkits Aim to Increase Nutrition and Physical Activity Opportunities

The Division of Nutrition and Physical Activity (DNPA) has developed two toolkits to increase opportunities for healthy choices at schools and worksites.

The *Indiana Healthy Schools Toolkit* provides schools with information about what they, along with teachers, parents, community organizations and businesses can do to include healthy eating and physical activity opportunities into schools. Examples include strengthening the school wellness policy, hosting healthy school parties, and providing healthier vending options. To make a difference in your school corporation, ask about becoming involved in your local coordinated school health advisory council.

The *Indiana Healthy Worksites Toolkit for Small Businesses* provides employers with information about low to no cost changes that can be made to increase opportunities for healthy eating and physical activity. Examples include incorporating healthy meeting guidelines, healthy vending guidance and physical activity breaks at work.

The valuable guidance provided in each toolkit will help implement many of the objectives found in *Indiana's Comprehensive Nutrition and Physical Activity Plan, 2010-2020*. Launched in January 2011 by the Indiana Healthy Weight Initiative of the State Health Department, the goal of this plan is to make changes in local communities, schools, worksites, child care, health care, and faith-based organizations that have already been proven to improve nutrition and increase physical activity.

Awards

In early October, the State Health Department received a **Best Practices Award** by the Association of Health Facility Survey Agencies (AHFSA). The award was presented for the State Health Department's online survey report system.

Also in October, the State Health Department was awarded a **Certificate of Excellence** for "Creative Use of Multi-Media" for the online educational modules and consumer brochure related to the prevention of healthcare associated infections.

Dr. Daniel Maas, Emergency Physician, Goshen Hospital, received the Health Commissioners Award for his role in identifying the measles outbreak that impacted the northeast region of Indiana this summer. (August 2011)

Dr. Daniel Maas received the Health Commissioners Award for his work during the measles outbreak this summer.

Dr. Judith Ganser, Medical Director for Maternal and Child Health, Children's Special Health Care Services and WIC, received the Richard G. Lugar Healthcare Leadership Award. This award is a lifetime achievement award that is given to individuals who have demonstrated exceptional personal and professional commitment throughout their careers to ensure that children and families in Indiana have access to affordable health insurance coverage. (December 2011)

Denise Giddens, Program Director in the WIC division, received the inaugural Friend in Government award from the Elders at the Table Coalition (EAT). (November 2011)

Public Health Happenings

December 6	TB and Diabetes; TB in Foreign Born webinar, (open to public health nurses)
December 15	Office of Women's Health Advisory Board meeting (open to the public)
January 11	State Health Department Executive Board meeting (open to the public)
January 26	Public hearing on proposed amendments to 410 IAC 1-6 and 410 IAC 1-7 to clarify healthcare provider responsibilities as outlined in IC 16-41-6, which was amended by the General Assembly in 2011 (open to the public).

For more information on these and other state events, visit the State of Indiana event calendar at http://1.usa.gov/ISDHevents

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Indiana State Department of Health

The Indiana State Department of Health supports Indiana's economic prosperity and quality of life by promoting, protecting and providing for the health of Hoosiers in their communities.

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