



KPHA E-NEWS UPDATE

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Table of Contents

Legislative Update

AHA (Alliance of Health Advocates) Summit Very Successful

Legislative Issues and Action Committee Conference Call

"In Memory" Ceremony at the Conference

KPHA Fall Conference More Updates

KPHA Board Member, Barbara Mitchell Chairs Orientation Manual Meetings

Legislative Update



Proposal would expand children's cabinet

By Dave Ranney
KHI News Service

TOPEKA, July 31 - The chairwoman of the 2010 Commission on Tuesday proposed putting the Kansas Children's Cabinet in charge of four early childhood development programs now run by other agencies.

"We're not reaching all of the kids we could be reaching," said Rochelle Chronister. "If we can better coordinate

our programs, maybe we can serve more kids. That's what this is about."

The proposal calls for the children's cabinet taking over two programs currently administered by the Department of Health and Environment Education: Healthy Start, and the Infant-Toddler (Tiny K) programs. It also would shift Early Head Start from the Department of Social and Rehabilitation Services and Parents as Teachers from the Department of Education.

"These are community-based programs that tend to use parents to do the teaching rather than school-based programs that use teachers to do the teaching," Chronister said. "So it makes sense, I think, for them to be under the same umbrella."

The proposal also calls for putting the Department of Education in charge of all learning programs for children ages four and older, all special education programs, and services for deaf and blind children.

KDHE would continue overseeing immunization, child health, hearing and metabolic screening programs as well as the Women, Infants and Children (WIC) nutrition program.

The Department of Social and Rehabilitation Services would remain in charge of the child-care subsidy program.

The Department of Transportation would continue to oversee the child-passenger safety programs.

"I certainly do not anticipate this being the final proposal," Chronister said. "It's intended to be a starting point, something to get the conversation going."

The 2010 Commission will discuss the proposal during its Aug. 20 meeting. Its recommendations will be forwarded to the Legislative Educational Planning Committee.

Earlier this year, lawmakers directed the educational planning committee and the 2010 Commission to come up with a plan for starting an Office of Early Childhood Education.

The office would be charged with coordinating the state's early childhood development efforts and ensuring maximum efficiency.

Currently, the children's cabinet advises lawmakers on how best to use the state's Master Tobacco Settlement receipts to improve the lives of Kansas children.

If the children's cabinet becomes the Office of Early Childhood Development, it would need additional staff, Chronister said.

"They only have two employees," she said.

Chronister, a former Republican state representative from Neodesha, said her proposal assumes the four programs' administrative positions and budgets would move to the children's cabinet.

"I don't see this as something that's going to take a lot of new people - but I don't know," she said. "It's too early to say for sure."

Melissa Ness, president of the children's cabinet's nine-member board, welcomed Chronister's proposal.

"I think it's a good starting point," she said.

"The cabinet really doesn't have an ownership in what the ultimate structure looks like," Ness said. "But we do have an ownership in program results and in outcomes, and that's what our role has been: convening and bringing people together."

Ness is a former executive director at the Kansas Children's Service League. [Back to top](#)

AHA (Alliance of Health Advocates) Summit Very Successful

Twenty-three health advocates representing a diverse group of health organizations attended a July 26th AHA Summit. The outcome was a "better organized group" for the 2008 Session to work on Health Day at the Capital, and influencing health legislation. The agenda covered included:

10:00am-10:30am

Introductions Rep. Mah

Objective: Representative Mah lead asking participants to state their name, organization and describe Legislative priority.

Outcome: improve our lobbying efforts for health legislation by sharing our experiences through personal interaction and dialogue

10:30am-11:00am

"Advocacy: What works? Are we a Long Way from where we want to be?" Senator Vicki Schmidt

Objective: Senator Schmidt talked about and emphasized the rationale for using a constituency based network to aid in impacting legislative outcomes on individual bills. Discussion will then focus on AHA's past, current and future activity at the statehouse.

Outcome: Discussion will include describing how successful networks effectively work in the Senate, in order for us to learn how we can develop a health advocacy network to impact health legislation in the 2008 Session

11:00am-11:10am

"Developing Health Advocacy Network" Representative Ann Mah

Objective: Representative Mah lead this discussion about why investing time in using grassroots networks builds value and she will describe the benefits of this type of networking and her experience of "effective lobbying" with other groups in the House.

Outcome: AHA learned how to improve efforts to create such a network in order to develop a legislative platform, introduce legislation, support or oppose legislation and effectively influence outcomes of health legislation

11:10am-11:45am

"How Do We Make It Work?" Representative Mah

Objective: Ann facilitated a discussion to engage the group to action, by assigning work for developing the network that can be called to action during the upcoming legislative session. Discussion included how to work together to develop a process to determine areas of focus with how our resources will be devoted.

Outcome: It was decided to establish a network for leadership positions in the health committees in the Senate and House

11:45am-12:15pm

Lunch-Discussion of Health Day at the Capital in 2008

12:15pm-12:45pm

"Health Advocacy--Are We Fragmented?" Susan Kang

Objective: Susan discussed the State's Health Department's vision to bring all health advocates together for greater impact on health legislation

Outcome: Discussion will include how AHA can help in that endeavor

1:00pm-2:00pm

"Informality and Diversity our Weakness and Yet, Our Strength" Rep. Mah

Objective: Discussion concluded with continued use of the legislative tracker and the potential for determining a process for choosing legislation for testimony by AHA in 2008, and acquiring a "research" position to write testimony for specific bills by AHA.

Outcome: AHA will have a greater impact next year in introducing and passing legislation! The group will determine assignments, how and when to meet, and the necessary tasks to be done before the beginning of the 2008 Session.

Attendees at the Summit (many who are KPHA members) included:

Mike Fox-Kansas University Medical Center
Corrie Edwards-Kansas Health Consumer Coalition
Elaine Schwartz-Kansas Public Health Association
Mary Jayne Hellebust-Tobacco Free Kansas Coalition
Ira Stamm-Independent Psychologist
Connie Hubbell-Kansas Foundation for Medical Care
Carolyn Mittendorf-Kansas Nurses Association
Chad Austin-Kansas Hospital Association

Kim Richter-Kansas University Medical Center
Linda DeCoursey-American Heart Association-KS
Susan Kang-Kansas Department of Health and Environment
Shalae Harris shalae@cox.net-Nurse
Julia Francisco-retired anti-tobacco advocate
Leon Vinci -Johnson County Health Department
Suzanne Wikle-Kansas Action for Children
Lisa Benlon-American Cancer Society-KS
Jace Smith-American Cancer Society-KS
Deanne Bacco-Kansas Advocates for Better Care
Sara Spinks-Kansas Assn. of Local Health Departments
Heidi Pickerell-Midland Care Connections

[Back to top](#)

Legislative Issues and Action Committee Conference Call

If you are interested in participating in a conference call to discuss the APHA proposed policies that will be considered for developing KPHA legislative priorities for the 2008 Session, please feel free to join us in the call on Thursday, August 9th at 3:00 p.m.

The number to call in for the conference call is: (866) 410-0240

When prompted, enter Conference Code 4646151 followed by #

Here are the pdf file for you to download each of the individual policies:

Group A: Health Disparities

- [A-3 Preventing Vision Loss Through Smoking Cessation](#)
- [A-4 Addressing Obesity and Health Disparities Through Federal Nutrition and Agriculture Policy](#)
- [A-5 Environmental Injustices: Research/Action to Reduce Obesity Disparities](#)
- [A-6 Vaginal Douching and Adverse Health Outcomes](#)

Group B: Environmental and Occupational Health

- [B-5 Comprehensive Tobacco-Free Schools Policies](#)
- [B-6 Calling on the U.S. Congress to restructure the Toxic Substances Control Act and implement a modern, comprehensive chemicals policy](#)
- [B-7 Addressing the Urgent Threat of Global Climate Change to Public Health and the Environment](#)
- [B-8 Agent Orange](#)

Group C: Access to Care

- [C-1 Eyecare in Disaster Preparedness](#)

- [C-3 A Call to Action on Breastfeeding: A Fundamental Public Health Issue](#)
- [C-4 Promoting School Information Sharing for Public Health Purposes](#)
- [C-6 Securing Medicare's Fiscal Integrity and Reducing the Threat of Privatization](#)

Group D: Public Health Science and Infrastructure

- [D2/D8 Death with Dignity](#)
- [D-3 Improving External Cause Coding in Hospital Discharge Data](#)
- [D-4 Building a Public Health Infrastructure for Physical Activity Promotion](#)
- [D-5 Restricting Trans Fat in the Food Supply \(LB-06-3\)](#)
- [D-7 Toward a Healthy, Sustainable Food System](#)
- [D7 Appendix](#)

[Back to top](#)

"In Memory" Ceremony at the Conference



If you know of a public health professional or health service worker who was a KPHA member and died during the past year, please send in (by email, mail, or fax) their name and information for the Conference ceremony.

[Back to top](#)

KPHA Fall Conference More Updates



**September 18-20
Wichita, Kansas**

Senator Susan Wagle, Chair of the Senate Public Health and Welfare Committee has confirmed that she will be on the Advocacy Panel on the first day of the Conference! We also have had a change in one of the sessions. A cancellation was made by Deanna Chilcoat for Session 2.3. In her place we will have a session now titled:

2.3 Being Progressive in Public Health Assessments, Ed Kalas, Shawnee County Health Agency, KPHA President. Ed will present information about the Shawnee County Health Agency completion of **MAPP: Mobilizing for Action through Planning and Partnerships**. A community-wide strategic planning tool developed by NACCHO and CDC for improving community health. Facilitated by public health leadership, this tool helps communities prioritize public health issues and identify resources for addressing them. Community ownership is the fundamental component of MAPP. Because the community's strengths, needs, and desires drive the process, MAPP provides the framework for creating a truly community-driven initiative. Community participation leads to collective thinking and, ultimately, results in effective, sustainable solutions to complex problems. Ed will cover the "how to" instructions to implement the assessment and the outcomes achieved. The Assessment process is one example of a task that will most likely be required with accreditation or certification.

We have also added information on the dinner sponsored by Sanofi Pasteur to the brochure, if you missed it, here it is:

6:30pm-8:00pm **Dinner Sponsored by Sanofi Pasteur, Meningitis and Pertussis: Examples of the Importance of Preventative Medicine, Dr. Emily Robb.** This talk will discuss Bacterial Meningitis and Pertussis, and will cover the basics of these diseases including how they are transmitted, signs and symptoms, the age groups at risk and the serious consequences of these diseases. It will focus on the importance of prevention of these diseases through vaccination, and the basics of the vaccines available and their appropriate uses. Dr. Robb was born and raised in Overland Park Kansas and has been in practice in the Kansas City area for 3 years, currently working in Lee's Summit, MO in internal medicine. She is board certified in both internal medicine and pediatrics. She trained at the University of Kansas Medical Center, and likes to focus on adolescent & women's health.

It is not too late to help out with the conference! Just email Janis Goedeke, Conference Chair that you would like to participate. Her email is: jgoedeke@crawfordcohd.org We need 6 laptops and projectors for the breakout sessions. Let Cyndi Treaster know if you will provide one at ctreaste@kdhe.state.ks.us We are also needing more award nominations-if you get one in as soon as possible, I'm sure Shirley Orr and her committee

will consider it. Just click on the information on our website to download the form. To check out all the information on the conference, just go to www.kpha.us and be sure to register and book your room by August 17, to get the discounted room rates! [Back to top](#)

KPHA Board Member, Barbara Mitchell Chairs Orientation Manual Meetings

The Public Health Orientation Manual Task Force has had several meetings and great things are being accomplished, according to Bobbi Berkowitz, consultant for the Kansas Health Foundation Grant. Both Bobbi and Bruce Myahara have been a great help in putting the manual pieces together. Below are the notes from the meeting in Wichita:

Present:

Barbara Mitchell, Chair
Ed Kalas
Bobbi Berkowitz
Ed Garner
Edie Snethen
Linda Frazier
Diana Rice
Carolyn Williams
Ruth Wetta Hall
Janice Goedeke
Bruce Myaharra
Elaine Schwartz
Amy Chesser

Emphasis was made to keep it as basic as possible. It will be in an electronic format and there will be an established training component by KPHA to implement. Possibly with a Post Test on TRAIN, or other activity to ensure some learning is determined by the user.

Barbara covered who was putting together each section of the manual. Discussion included (in red) by those responsible for the sections and the group:

1. Introduction with timeline/history of public health in Kansas and in the United States list on major successes on NACHO
2. Definition/Mission of Public Health
3. Core Functions and Essential Duties of Public Health
(Include environmental health)-feedback with local services assessment (CDC) link to the National Public Health Standards, Quad Council on linkages, have more discipline specific in competencies - overview with links to web info and link to BT Competencies, School of Nursing from Columbia University. (TRAIN) link to Power Point on CDC's National Public Health Standards program website. Look at Missouri's "What is Public Health" California also has done lots of work around public health 101 specific to their state. Use the KALHD format on storytelling about essential services. Use lots of pictures. Look at NACHO's Public Health and You and operational definition. Trainer needed to disseminate information or put on TRAIN as a class, etc. Ensure updates are made as necessary. Possible post test and credit on TRAIN. Use stories. Keep basic.
4. Public Health Competencies and Performance Standards

5. How is Public Health Funded and it's Structure (org charts, private and public sector, who are the partners of public health) Use reference to % of \$ spent on PH in Kansas
6. Glossary of Public Health Terms Familiar terms and acronyms
7. Resources (including legislative resources, websites, listing of PH Dept. throughout the state) have web person sort and how to utilize in electronic format-Ruth has contact and Diane. Keep manual at comprehension level-in WORD. Have printable format available. Discussed having in Spanish, decided not necessary.

Acknowledgements will be in the front of the document with a table of contents and a listing of what KDHE does.

Ed Kalas suggested acquiring stories from the membership to put in the essential services portion. He is working on this project for his EPHLI capstone and will put together an email to be sent asking for stories for the orientation manual. The winners will be announced at the Fall Conference.

Here are my unofficial notes at the July meeting in Topeka:

Present: Barbara Mitchell, Bobbi Berkowitz, Bruce Myahara, Linda Frazier, Earlene Stover, Amy Chesser, Shirley Orr, Ed Kalas, and Elaine Schwartz

History

Earlene covered, "History of Public Health" handout. Reviewed History-need to add sites on Environmental History. Bobbi and Bruce covered their roles with the project-advisory and assistance in putting the manual together.

"Want the idea of orienting the workforce to be Kansas centric and reflect the values of the system in Kansas, it should have Frameworks of public, core competencies, services, etc. If you want the workforce to be able to articulate public health it should be the Kansas version."

The History with Dr. Crumbine is important. Currently the Focus is on tasks, not enough global and changing public health's image. One way to change that is to bring people's stories to the manual and have focuses on family, community, lab, etc. Also could add a piece on what is population health. Some of public health is task oriented. Task, people, and events need to be captured. Earlene is working on a post polio stories and asked if we were still planning on using "stories" Elaine said she had just talked to Ed and he was going to put together a Call for Stories for the Core Functions that would go out this week and we would pick 3 from each one and have them displayed at the Fall Conference.

We need to add the history of Public Health in Kansas and make sure we have that in our Manual. As of now, there really is no document that describes the history in Kansas, except for the Crumbine book. Need to concentrate on all of public health. Ric Averill put together the play on public health with Dr. Crumbine.

Question-would we be interested in Polio Pieces--Protection, Kansas was the first community in the world to have all their citizens immunized, is there a timeline? It is December, but we are assured to not rush the project. We could cite books, like Barney Turnoc, "Essentials of Public Health" that talks about what the emphasis is in the different time periods.

History should include some global history at least understand where public health has been over the last 100 years. Pfizer has done a book. And there is one on-line. Add a visual of the timeline to the manual - a quick reference oversight, i.e. when was fluoridation? Also add the contributions Public Health has made to the population health, i.e. when tobacco was designated as a health hazard, abolishing the common cup. We have made improvements but there are still issues. Need to nail down what the issues really are, how to we really help improve when the battle is constant. Think about the history of health problems for the manual as visuals.

We want to give them the basics and the resources to go back and continue to absorb more.

Consider a pretest and a posttest for each section. We could put the pretest and post test on Kansas TRAIN. We now have a tracking portion for required classes for the learning record. One task of the committee could be to pull out the critical parts, and this would also help clarify in the editing of the manual. Have a couple of people do this, the "take-a-ways."

Earlene asked about the intent of the manual-it was discussed in the planning grant on developing a Common Language for Public Health, that we want all the workforce to be saying the same message, esp. to policymakers, trying to get some agreement **on the 3 most important elements of each chapter**. The stories that enrich could be links. Some people don't understand what public health is - they think of it as just getting shots, etc. One of the basic questions is who does public health effect. Look at what is in the news that has to do with health and the public.

Definition and Mission

Barbara covered "Definition and Mission of Public Health" handout. Approached as a definition as in Webster's Dictionary. It might be an opportunity to transition from the definition to the Core Function. Start out with a paragraph on Prevention, Protection, a paragraph about the frameworks. Primary work is Prevention, Protection, Promotion, and, it would help introduce the framework, i.e. and the core functions of the wheel. Might also want to pull in the Association of State and Territorial Directors of Nursing framework-the oval-public health nursing-add a link. Need transition to Essential services and core functions of public health. We should add mission for Kansas - KDHE's and Healthy People Build Strong Communities, (put this one on the bottom of each page. Use the Manual portion that indicates how to use it. Pull the artwork for this, also. Start with the Definition and Mission and then do the History. On Wald site, the history is not utilized as much, if it is used as a button-i.e. click his picture to link to the history. The 3 most important pieces of each chapter should start the chapter. Could also use it as a post, or do a pilot test with KPHA Board or policymaker. Use summary at the end of each chapter or at the end of the book. Add Determinants of Health.

Core Functions

Linda covered "The Core Functions. Should bring in the task force wheel-Minnesota. NACHO's operational definition of the local department of health would be good to add as a link. Have a chapter on new initiatives in public health, i.e. accreditation, etc., and, link to NACHO. Linda had a handout titled "The Core Functions and Essential Services of Public Health." This will be added to the manual. Committee from Illinois wrote the book-the Orange Crush. The link is to the University of Illinois. Add in here the link to the Operational Definition-this is good for further explanation. We are replacing large print Core Functions with new document. Linda will make the changes and resubmit. Add Committee on Assuring the Health of the Public in the 21st Century (IOM). We will organize the manual for both a book and for the web and discussed someone putting it together as a capstone, or hiring an IT web designer, and editor, etc.

Public Health Competencies and Performance Standards

Linda covered handout "Core Competencies for Public Health Professionals" including the occupations in public health, and CDC links. Need to add the link to the two articles of the framework-two articles on the use of the competencies. Council on Linkages: aware, knowledgeable, and advance. (Public Health Nursing-has what you need for each level). Add 3 levels of skill to each competency. Shirley will work with Barbara on this. We need to work with Environmental Health (on page 8 of the Competency of Public Health Workers - "A Collection of Competency Sets for Public Health Related Occupations and Professions") - and info for Lab. Discussed NPHPS that they are a tool for seeing what is recommended and will be eventually replaced by accreditation. There should be a link to NACHO/CDC's Mobilizing for Action through Planning and Partnerships (MAPP). We discussed there are too many assessments in public health, and no uniformity, etc. Strategic Network Assessment Process SNAP is Linda's idea for assessments. Discussed other states as Florida and Oklahoma

and that all local departments are under the state and are state employees. Some used Tobacco and Preparedness monies to change their structures.

The Organization of Public Health: Structure and Funding

Shirley covered, "Fiscal Management, Fiscal Management Policies." Janis Bird worked on this-from docs on KDHE's website, in Public Nursing Resource. A few things have been updated. Need to add an intro on how public health is funded-use NCSL's language. Add other information on the big picture, i.e. problems in care due to funding, etc. We could use the majority of the information as a link. Keep it Kansas specific, too. As to how the 105 counties operate, and use APHA's info on funding in each state. Link to K.S.A. 65-201. Shirley will work with Janis to see if she has any more time to work with it. Shirley will work with getting this chapter organized. Want to get across that public health workers are part of this system. Health Departments are part of the system, and they and the State are part of a bigger system. Have to define who you are. Need to concentrate on a basic description for the public health workforce. Should this description go in first or in Structure-it should go in first chapter as a organizational structure (org chart) and then further detail here. And make sure it includes Environmental Health. Need KDHE Org Chart.

Glossary of Public Health Terms and Acronyms

Elizabeth Campbell and Jamie Kenklen put this together . . . it is really information and excellent for a reference -does not include much on Environmental Health. Need to maybe par down. Add some extra environmental and use as a link. Elaine will check with APHA to see if they have a glossary and acronyms. Check with Jamie, to see where this one came from and use maybe just as a link. It would be good to have a link in manual paragraphs to definitions. On Acronyms document we need to eliminate some; ask where they came from. CDC should have one, and we need to check it out.

Resources (including legislative resources, websites, listing of PH Dept. throughout the state)

Elaine covered the handout KANSAS PUBLIC HEALTH DIRECTORY. It was discussed to use links to many and only County Health KALHD numbers. Add national links-NACCHO, APHA, etc. Use most frequently used numbers. We need to Link to KLS--Legislature. Add link to How the Core Public Health Functions "MAP" the Course of Public Health Practice (Wetta-Hall). Add links to Healthy Kansas 2010 and descriptions.

Once we get all the chapters updated (1-2 months), Bobbi will come back to Kansas to meet again to go over the final draft. And, it is not too late to participate in the manual development. Just email Barbara at **Barbara**.

Mitchell@jocogov.org. [Back to top](#)



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