



KPHA E-NEWS UPDATE

Ph: 233-3103
Fax: 233-3439
Email: director@kpha.us
<http://www.kpha.us>

November 27, 2007

Questions? director@kpha.us

Table of Contents

[APHA News Annual Meeting/Public Health Grand Rounds/Emergency Response Letter](#)

[Public Health Drive-Through Flu Clinic – A Huge Success in Johnson County!](#)

[Governor's Conference On Aging, Call for Presentations](#)

[Climate Change Among Challenges, Regulator Says](#)

[Roberts Pushes for Head Start](#)

[Letter from Roberts on Farm Bill and His Support of Head Start](#)

[Toy Alert from Safe Kids for the Holidays](#)

[Governor's Column on Sexual Violence](#)

[Job Openings](#)

[KPHA Is Awarded APHA Grant!](#)

APHA News Annual Meeting/Public Health Grand Rounds/Emergency Response Letter



APHA 135TH ANNUAL MEETING AND EXPO
NOVEMBER 3-7, 2007 WASHINGTON, DC

The APHA Annual meeting earlier this month was truly a wonderful experience for many members of KPHA. We learned so much and we will be sharing photos, and lessons learned. This year APHA had very specific sessions for affiliates' leadership. Janis, Sonja, and I attended all of those sessions. Ed had to make a family emergency back home. We had a great time at the Kansas dinner (15 of the 50 there from Kansas ate together one night). Here are some terrific pictures:





Below is an email from APHA:

Dear Affiliate Leaders,

Please forward the following announcement about the November 29th Public Health Grand Rounds satellite broadcast and webcast, "Cutting-Edge Legal Preparedness for Chronic Disease Prevention," to your members.

This 75-minute program will feature New York City's innovative legal tools to:

-Phase out artificial trans fats in restaurants

-Require certain restaurants to post calorie information -Require that the results of diabetes blood-sugar tests be reported to the health department -Prohibit smoking in virtually all workplaces.

The faculty will include New York City health leaders -- Health Commissioner Dr. Thomas Frieden, Board of Health member, Dr. Lynne Richardson, and health department legal counsel Thomas Merrill -- as well as national panelists Dr. George Mensah of CDC, Dr. Patrick Remington of the University of Wisconsin's Population Health Institute, and Marice Ashe, JD, MPH, of the Public Health Institute.

To access the free registration website, visit <http://www.publichealthgrandrounds.unc.edu>

KPHA signed on to the letter below:

Martha Lee Walters, President
National Conference of Commissioners on Uniform State Laws
211 E. Ontario Street, Suite 1300
Chicago, IL 60611

Re: Support for Expanded Volunteer Legislation

Dear Ms. Walters:

The organizations represented below strongly support the passage of the Uniform Emergency Volunteer Health Practitioners Act (UEVHPA) that was passed by the National Conference of Commissioners on Uniform State Laws (NCCUSL) in July 2007. Passage of this bill will ensure that a large force of professional volunteer health care practitioners will be in a position to provide assistance to the victims of declared emergencies, including natural disasters, public health emergencies and terrorist incidents. The legislation provides needed mechanisms for the interstate recognition of professional licenses issued to health practitioners, while also ensuring that practitioners will be deployed and utilized in close cooperation with and under the supervision and control of state and local emergency management agencies.

We also strongly support proposals to improve and strengthen the existing state Good Samaritan Laws. Passage of the UEVHPA, together with the strengthening and improvement of Good Samaritan Laws, will provide for the coherent use of volunteers and service organizations at all levels during a catastrophic disaster.

The events surrounding Hurricane Katrina vividly demonstrated the need for this combined legislative effort in this important area of volunteer services. Sadly, many of our fellow citizens were injured or died because volunteers from assisting states were unable to respond quickly because of problems with reciprocal licensing provisions, liability issues, or lack of adequate medical coverage for injury or illness to the volunteers themselves.

This response problem as it related to health care practitioners was recognized by NCCUSL, which studied the problem and appointed a Drafting Committee to propose to the states a uniform law on making sure that health care professionals and their sponsoring organizations do not have reciprocal licensing problems; that volunteers and entities have protection from liability claims; and that volunteers have a source of benefits for injuries and illness incurred while performing volunteer services in a host state. UEVHPA, passed by NCCUSL in July 2007, is a thoughtful and comprehensive uniform legislative proposal. We will encourage states to consider and enact UEVHPA including Alternative A, which contains better liability protection.

While the UEVHPA is a vital step forward in meeting the problem of ensuring an adequate force of health professionals to respond to a disaster like Katrina, the Uniform Act deals only with the volunteer services of health care practitioners. A catastrophic disaster in any state on the magnitude of Katrina or greater could require the need for hundreds of thousands of volunteers for law enforcement, emergency medical, fire and safety protection; preservation or repair and replacement of state infrastructures (e.g. schools, highways, and bridges); and the provision of legal, mental health, and spiritual services and support. The requirement to meet this much greater need is why we also support the expansion and strengthening of existing Good Samaritan Laws to protect these other volunteers and their sponsoring entities during such emergencies.

Our organizations stand ready to provide whatever help and assistance may be needed so that state governments can meet any future challenge for volunteer services for its citizens. States cannot wait for the next major disaster before dealing with these vital issues.

We thank you for the opportunity to collectively express our support in this vital area of public policy. [Back to top](#)

Public Health Drive-Through Flu Clinic – A Huge Success in Johnson County!



The Johnson County Public Health Department in Johnson County, KS conducted a very successful drive-through flu vaccination clinic on Saturday, October 27, 2007. Five hundred doses of flu vaccine were administered in less than two hours! The vaccines were provided at no charge to the public.

The drive-through clinic was also designed as an exercise to test our incident command system and our ability

to dispense vaccine as quickly as logistically possible. Fifty-five employees and volunteers arrived at the Johnson County Northeast Offices bright and early to get set up for the event. Incident Commander Liz Ticer of the Johnson County Public Health Department coordinated the effort with four community partners, including the Sheriff's Office, Med-Act, Mission, KS Police Department and the County Facilities Department. The community partners were very supportive and worked well together. The key was good communication before and after the event.

The weather cooperated and people seeking flu shots began lining up in their cars by 7:30am for a 9am start. It was estimated that for a person receiving a flu shot, from the start of paperwork to driving out of the parking lot, the whole process took seven minutes. Many people were turned away due to the limited quantities of vaccine.

Leon F. Vinci, DHA, Director of Public Health, Johnson County Public Health Department commented "It was great to see such a well run operation and to hear such positive comments from the public." [Back to top](#)

Governor's Conference On Aging, Call for Presentations



One way to get out the word about Public Health is for our members to present at Conferences that relate to the health of the public and one of these is the Governor's Conference on Aging next year. Below is an email from KDOA staff:

The conference will be May 7 & 8, 2008 in Topeka at the Capitol Plaza Hotel and Maner Conference Center. Last year we had over 800 attendees from around the state.

Thank you for your continued interest and support of the Conference. Please feel free to share this information with other speakers or presenters.

If you have any questions, I can be reached by return email, or call 800-432-3535. Hope to see you in May!

Wilda J. Davison, Information and Referral
Kansas Department on Aging
503 S. Kansas Avenue
Topeka, KS 66603
800-432-3535 / 785-296-4986 /Fax 785-296-0256
Visit KDOA on the World Wide Web at www.agingkansas.org

[Click here](#) for the Call for Presentations Form. [Back to top](#)

Climate Change Among Challenges, Regulator Says

By Sarah Kessinger

kessinger@dailynews.net

Harris News Service

TOPEKA - The state's newly appointed water-use regulator expects climate change to be one of Kansas' challenges in coming years.

Kansas Agriculture Secretary Adrian Polansky selected David Barfield Monday as new chief engineer for the Kansas Division of Water Resources.

In an interview, Barfield reviewed progress on river compact negotiations with neighboring states. He, too, said changes in climate would likely draw more attention in coming years.

At a recent meeting of the Western States Water Council, Barfield said, it was clear that climate change is getting a significant look from western states.

"It's starting to affect snow pack and when we get precipitation. Many states are starting to take large-scale models and see how it affects them.

"As we have another level of uncertainty out there I guess it should give us pause to make sure our operating rules are flexible and adaptable to whatever may come," he said. "We need to be good stewards of the Ogallala (aquifer) because we really don't know what the future brings."

Barfield, who worked for former chief engineer David Pope since 1984, was the acting division head in recent months. He now holds the permanent job of administering water rights for the state while overseeing 92 employees and an \$8.4 million annual budget.

Pope earlier this year became executive director of the Missouri River Association of States and Tribes.

As a longtime division employee, Barfield has spent much time on the state's river compacts with Colorado and Nebraska and other interstate issues. Both compact court cases are settled, but the state plans to start a formal process soon to resolve differences with Nebraska over the lack of Republican River water sent to Kansas in recent years.

Kansas alleges Nebraska fell behind by 26 billion gallons of river water in 2005 and 2006. Nebraska disputes the figure, saying it's too high.

The Republican River case also involves Colorado's usage of water owed to Kansas. That part of the compact won't see negotiations until next year after the two states begin a five-year review of a U.S. Supreme Court settlement.

"They're both taking steps. Nebraska is purchasing surface water and providing it to Kansas, and Colorado has engineering consultants figuring ways for them to get into compliance," Barfield said. "But they're still both short."

Barfield also monitors Colorado's use of Arkansas River water.

"We're very near the end," Barfield said of the 1985 Kansas v. Colorado lawsuit over Arkansas River flow. "A special master for the U.S. Supreme Court is finalizing his last report to the court, which summarizes the case and provides for how we move forward from here."

Yet, keeping an eye on the western state's compliance "is something we'll always have to do," Barfield said.

The chief engineer also holds the reins on water use in Kansas and is responsible for public safety in the construction and maintenance of dams.

Barfield has a bachelor's degree in civil engineering and a master's in water resources, both from the University of Kansas.

"The depth and breadth of Mr. Barfield's understanding of Kansas water issues make him the most logical choice to fill this important position," Polansky said. [Back to top](#)

Roberts Pushes for Head Start



U.S. Sen. Pat Roberts is well liked by those with the Head Start program. No wonder. He is a big supporter of the early childhood development program and uses his seniority to help keep funding in place. His work on behalf of children has earned him the Kansas Head Start Association's "Kansas Legislative Champion for 2007" award.

Roberts is a member of the Congress' Head Start Authorization Conference Committee and helped put together a new bill reauthorizing the program. It is a compromise bill that passed the Senate last week by a vote of 95-0. Now it goes to President Bush for his signature.

Roberts' support of Head Start is welcome because the program works. Numerous studies show that today's investment in early childhood development is paid back in reduced costs to society as at-risk children grow older.

"At-risk" describes children with one or more factors that are shown to increase risks for educational failure, contact with law enforcement, poor health and low earning potential. Some at-risk factors include those from single-parent homes and those from working families that earn poverty-level wages.

In San Bernardino County in California, researchers followed 600 at-risk students who went through the Head Start program. They found society gained \$9 in benefits for every \$1 spent on the students in Head Start. Graduates showed higher rates of employment, better family stability and improved earnings, while showing lower rates for welfare dependency, crime and special education.

Head Start shows more return on "investment" than other government-funded social programs. Results are real, measurable, and witnessed daily by those working in Head Start programs, like those in Salina and surrounding communities.

Roberts is to be thanked for his work for Head Start. For his part, President Bush should sign this bill, along with the upcoming appropriations bill that will increase funding for the program. It not only benefits these children and their families, but it also pays off for communities, something that has been demonstrated many times over.

PS. The Kansas Head Start office has moved:

Here's their new contact information:

Kansas Head Start Association

925 Vermont

Lawrence, KS 66044

Telephone: 785-856-3132

Fax: 785-842-2087

E-mail: khsa@kc.rr.com

Web site: www.ksheadstart.org

Mary Baskett
Executive Director

[Back to top](#)

Letter from Roberts on Farm Bill and His Support of Head Start

Below is an email letter the KPHA office received:

Dear Mrs. Schwartz:

Thank you for contacting me regarding the Farm Bill. I appreciate your taking the time to share your thoughts with me.

In late October the Senate Agriculture Committee passed S. 2302, the Food and Energy Security Act of 2007. Two weeks later the Senate began debate on the floor with a goal to work through amendments and hopefully pass a Farm Bill. Unfortunately, procedural maneuvers on the part of Senate Majority Leader Harry Reid (D-NV) have prevented members on both sides of the aisle from offering amendments. As a result, the Senate has yet to complete its work on the Farm Bill.

These delays prohibit the Senate from passing a Farm Bill in a timely fashion, which makes financial and planting decisions difficult for our nation's farmers and ranchers. Kansas wheat farmers already planted next year's crop without knowing what a new Farm Bill will look like. I am hopeful producers and their lenders will not face a similar situation this spring. The Senate needs to have an open and honest debate and quickly complete a Farm Bill. I plan to work with my colleagues to continue to protect the programs that work for Kansans and find a way to move forward.

Again thank you for taking the time to contact me. If you would like more information on issues before the Senate, please visit my website at <http://roberts.senate.gov>. You may also sign up on my home page for a monthly electronic newsletter that will provide additional updates on my work for Kansas.

With every best wish,

Sincerely,
Pat Roberts

[Back to top](#)

Toy Alert from Safe Kids for the Holidays

Recalls Make Toy Shopping More Stressful Most Deaths Caused by Choking



Safe Kids Kansas offers toy safety reminders

With more than 65 percent of the toys bought in the United States between the Friday after Thanksgiving and Christmas, parents and caregivers are heading into the country's busiest toy-buying season.

But with millions of toys being recalled because of dangerous lead paint and magnets, toy shoppers need to remember that that number is a small fraction of the overall number of toys -- approximately 3 billion -- sold in the United States every year. "Shoppers need to be even more informed than usual to make sure they buy safe, age-appropriate toys, said Jan Stegelman, Safe Kids Kansas coordinator. "Even though most toys in the U.S. today are considered to be safe, it doesn't mean we should throw caution to the wind."

Email alerts keep shoppers up-to-date on recalls

Each year, approximately 217,000 toy-related injuries are treated in hospital emergency rooms nationwide. But on average only 15 children under the age of 14 die from a toy-related injury.

To stay informed, Stegelman recommends that parents sign up for emails that will keep them up-to-date on recalls. "It's too difficult to get your information piecemeal from TV or the newspaper," said Stegelman, "so if you get the emails sent to you each time a recall happens, you'll be up-to-the-minute and won't have to worry."

To sign up for recall emails, go to www.cpsc.gov and click on Sign up for Email Announcements.

Parents and caregivers shouldn't hesitate to report defects or design features that seem dangerous. "If your child has a close call, the next child might not be so lucky," says Stegelman. "Report safety concerns about toys to the Consumer Product Safety Commission at 800-638-2772 or www.cpsc.gov. Your experience could be part of a pattern that might lead to a recall."

Avoid second-hand toys

Stegelman reminds parents that most toys are safe, especially if you buy from a reputable retailer. "That doesn't mean you have to go to a 'big box' store, but if you shop a locally-owned toy store, make sure that the owner is aware and vigilant about getting recalled items off the shelves. And avoid used toys which could have been recalled and not removed from circulation."

"If you buy toys secondhand or get hand-me-downs, visit www.cpsc.gov to make sure the toy hasn't been recalled for safety reasons," says Stegelman. "If a new toy comes with a product registration card, mail it in right away so the manufacturer can contact you if the item is ever recalled."

Other precautions to take

Safe Kids Kansas also recommends:

- **Make sure to buy age-appropriate toys.** All toys are clearly marked if they have small parts; do not buy toys with small parts for children younger than age 3 (or allow a child under age 3 to play with those kinds of toys belonging to an older sibling). Avoid building sets with small magnets for children under age six.
- **Identify dangerous small parts.** To be sure of a toy's size, use a small parts tester (available in quantity from the Safe Kids Resource Catalog) or the cardboard tube from a roll of toilet paper to identify choking hazards. Do not let small children play with anything that can fit into one of these cylinders.
- **Buy the proper safety gear .** If you purchase a riding toy, such as a scooter, skateboard, in-line skates or bicycle, remember that the gift isn't complete without a helmet and appropriate protective gear. Riding toys should not be used near vehicle traffic, stairs, swimming pools or bodies of water.
- **Inspect toys to make sure they are in good repair.** Check children's play areas for missing or dislodged parts (such as magnets). Do not let young children play with toys that have straps, cords or strings longer than 7 inches, due to the risk of strangulation.
- **Actively supervise children .** Caregivers should actively supervise children playing with any toy that has small parts, moving parts, electrical or battery power, cords, wheels or any other potentially risky component. Simply being in the same room as your child is not necessarily supervising. Active supervision means keeping the child in sight and in reach and paying undivided attention.
- **Practice proper storage .** Teach children to put toys away after playing to help prevent falls and unsupervised play, and make sure toys intended for younger children are stored separately from those for older children. Toy chests should be equipped or retrofitted with safety hinges that prevent the lid from closing on a child who is leaning over the open chest; if a chest does not have safety hinges, remove the lid.

For more information about toy safety, protective equipment and choking, visit www.usa.safekids.org.

Safe Kids Kansas, Inc. is a nonprofit Coalition of 67 statewide organizations and businesses dedicated to preventing accidental injuries to Kansas children ages 0-14. Local coalitions and chapters are located in Allen, Anderson, Atchison, Clay, Coffey, Dickinson, Doniphan, Douglas, Elk, Ellis, Finney, Ford, Franklin, Geary,

Jackson, Jefferson, Johnson, Labette, Leavenworth, Marion, Marshall, McPherson, Meade, Mitchell, Montgomery, Osage, Pottawatomie, Republic, Rice, Riley, Saline, Smith, Shawnee, Wabaunsee, Wilson and Woodson Counties, as well as the cities of Chanute, Emporia, Leavenworth, Norton, Pittsburg, the Wichita Area and the Metro Kansas City Area. Safe Kids Kansas a member of Safe Kids Worldwide , a global network of organizations whose mission is to prevent accidental childhood injury. The lead agency for Safe Kids Kansas is the Kansas Department of Health and Environment. For more information visit www.kansassafekids.org. [Back](#)

[to top](#)

Governor's Column on Sexual Violence



As a member of the Kansas Committee on Sexual Violence and Domestic Abuse KPHA is proud to see the Governor's column devoted to the topic:

For immediate release:

November 26, 2007
Nicole Corcoran, Press Secretary
785.368.8500

The following is a column by Robert T. Stephan, Chair of Governor Kathleen Sebelius' Domestic Violence Fatality Review Board:

Governor's Domestic Violence Fatality Review Board Column:

Domestic Violence and Teenagers

A recent article in The Wichita Eagle addressed the issue of teen dating violence.

"Unhealthy relationships are common among teens. National studies have found that one in four middle school students and one in three high school or college students have experienced abuse in romantic relationships. Experts call it "dating violence" and say it can take the form of physical or verbal abuse, controlling behavior or threats."

"Often, young people don't acknowledge or don't recognize the warning signs of unhealthy relationships," says

Mercedes Perales, a clinical associate professor and director of the child and adolescent psychiatry program at the University of Kansas School of Medicine. A girl might show up in her office with cuts, bruises, maybe a black eye. But tell her she's in an abusive relationship, Perales says, and she'll respond, "What are you talking about?"

A group called Choose Respect has been formed in Wichita to address dating violence in schools and promote what is healthy.

The Bureau of Justice Statistics found in a 2002 survey of 500 young women, ages 15 to 24, that 60 percent were currently involved in an ongoing abusive relationship.

The California Women's Law Center issued a report in 1995 showing that 30 percent of all murdered teenage girls are killed by a current or former boyfriend.

Violence becomes a natural way of life for adolescents who continually engage in violent behavior or who are a witness to violent behavior in the home.

Corryne Deliberto, domestic policy advisor at the relief organization World Vision in Washington, DC, found that there was a link between teen violence and domestic violence. A lot of young people are involved in difficult family situations, often involving domestic violence which tends to give rise to a culture of violence.

Individuals can change and that is why the Choose Respect organization can assist in reversing the trend toward violence in an individuals. Though schools already have a full plate of more than academic studies on their agenda, an emphasis on preventing bullying and other violent behavior could change the course of conduct of an otherwise violent teenager.

A study at the University of Warwick in London explored the understanding and attitudes of 1,300 children age eight to 16. More than 75 percent of 11 to 12-year-old boys thought that women get hit if they make men angry and more boys than girls believed that some women deserve to be hit.

The studies make it clear that intervention into violent behavior needs to begin at a very early age. It will be a difficult task but well worth the effort to change violent behavior among our children.

If you are a victim of domestic violence or know someone who is, you can call 1-888-END ABUSE (1-888-363-2287) to find resources for help. [Back to top](#)

Job Openings

DIRECTOR OF PUBLIC HEALTH STUDIES

The Position

The Kansas Health Institute is seeking a dynamic individual to provide leadership for our work in public health. KHI is a unique, core funded, state based health policy and research organization. We work closely with policy makers in Kansas to make a real difference on important health policy issues. Following the receipt of an additional 10-year, \$30 million core-funding grant to continue and expand our work, we are recruiting a qualified, passionate, team-oriented professional to work with us and our partners in improving the health of people in Kansas.

The Director of Public Health Studies will report to the President/CEO of KHI and will serve as a member of the senior management team. The Director will lead the work of KHI in the area of public health including our ongoing work in strengthening public health systems (e.g., public health agency performance standards and accreditation, surveillance systems) and addressing priority population health issues (e.g., immunizations, obesity, tobacco use, oral health, minority health disparities). Responsibilities will include the identification and development of strategic initiatives, management of projects and staff, and representing KHI among stakeholders. A significant amount of the Director's time will be spent interacting with public health leaders, high-level state agency staff, advocates and researchers in the state, region and nation. S/he will also work closely with KHI's Board of Directors and National Advisory Committee as well as leaders of regional and national foundations. In addition, the Director will manage a core budget of approximately \$1 million in addition to specific project budgets and will oversee a staff of five to seven employees.

This position represents an outstanding opportunity for an established public health researcher or practitioner to enjoy a well-funded, strategy-driven environment where efforts can have an immediate impact on policy decisions.

Education and Experience

- A doctoral degree is highly preferred, however, a master's degree accompanied by significant experience will be considered.
- Must possess at least ten years of relevant experience in applied public health research, policy analysis, policy development or program management. Experience in state or federal government, health philanthropy, or a think tank, in addition to a research organization, is highly desirable.
- A track record of publications (peer-reviewed or other), along with substantial experience in applied public health research or policy analysis that has supported policy development and program management is essential.
- Experience with a broad range of quantitative and qualitative analytic methods is required, and a background in evaluation research in particular is highly desirable.
- Familiarity with SAS, STATA, SPSS, and SUDAAN is desirable.
- Must possess a background in and knowledge of the leading state and national policy issues affecting population health and the public health system.
- A demonstrated track record of upward mobility and increased responsibility is required.
- A history of successful project management, including leading staff and project budgets, is required.

Personal Characteristics

- Must have exceptional leadership capabilities, interests and experiences which would include excellent interpersonal skills and the ability to establish credibility among various constituencies including legislators, high level state agency staff, foundation leaders, the public health services research community and other stakeholders.
- Must have strong verbal and written communication skills along with excellent listening and presentation skills.
- Communication skills must include the ability to effectively relate complex information in a straightforward manner so that diverse target audiences (legislators, community leaders, and other non-public health experts) understand.
- High level of initiative, energy and drive with a results-oriented personality.
- Must have a commitment to team work and an ability to lead and motivate a diverse group of staff.
- Must possess exemplary analytic and project management skills with a strong focus on accuracy, objectivity, accountability and integrity.
- Tactful, diplomatic and mature in style and demeanor.

- Ability to positively impact the state's public health system, while ensuring that the Kansas Health Institute remains non-partisan and apolitical.

The Organization

The Kansas Health Institute is an independent, nonprofit health policy and research organization based in Topeka, Kansas. Established in 1995 with a multi-year grant from the Kansas Health Foundation, the Kansas Health Institute conducts research and policy analysis on issues that affect the health of Kansans.

At the time of its establishment, KHI was unique in its status as a state-focused health policy organization that is independent, non-university based, and supported primarily by philanthropic resources. Since then, both Colorado and Ohio have established similar institutes, and other states are exploring this model.

KHI recently received an additional 10-year, \$30 million grant from the Kansas Health Foundation to expand its core operations. KHI also obtains significant project-specific funding from other foundations, as well as state and federal agencies. The annual budget is currently more than \$3 million.

The mission of the institute continues to be to identify, produce, analyze and communicate information to policymakers that is timely, relevant and objective. As a part of that mission, KHI works to help policymakers understand how the health of Kansans is influenced by a wide range of factors, including socioeconomic status, cultural diversity, lifestyle choices, the quality of communities and the financing, organization and effectiveness of our public health and health care systems.

KHI helps policymakers understand the linkages between these factors and the health of Kansans in several ways. We conduct research and provide policy analysis. We convene conversations and sponsor educational forums. And we provide in-depth coverage of timely issues through our recently launched news service.

KHI offers interested professionals the exciting opportunity to use their knowledge and skills in an applied, policy-relevant setting. Located in the state capital, staff of KHI interacts regularly with leaders from the legislature, state agencies, professional associations and other research organizations. Staff actively engages leaders from throughout the state to use information and analysis to improve health in Kansas. Faculty appointments at major research universities are available for qualified staff.

We have recently reorganized the work and structure of KHI to cover the broad areas of public health, health care financing and organization (including health informatics), early childhood development, and strategic communications.

KHI staff members are drawn from diverse disciplines, including medicine, public and community health, health policy and management, anthropology, political science, sociology, health administration, engineering, communications, journalism and business. In addition, the work of KHI involves numerous consultants who provide additional expertise on selected projects.

About the Community

The Kansas Health Institute has its primary office adjacent to the State Capital in Topeka, Kansas. A family-oriented community in northeast Kansas, Topeka is located just minutes from the University of Kansas in Lawrence, and less than an hour from both the Kansas City metropolitan area and Kansas State University in Manhattan. Topeka is the capital of Kansas, and was recently named a FIVE STAR community in the 5 th Annual Quality of Life Quotient survey by Expansion Management Magazine. The population of Topeka is in excess of 123,000 people, Shawnee County is 170,000 and the State of Kansas over 2.6 million. The cost of living is 9.5% lower than the average national cost of living. Topeka is known for its excellent public school system, as well recently being ranked 34 th on the list of America's 50 Hottest Cities for Economic Development

Projects. For additional information visit: www.tcvb.accesstopeka.com. The nearby community of Lawrence, Kansas – home of the University of Kansas – is a possibility for residence. To learn more about Lawrence – the two websites to visit are: Convention & Visitors Bureau at www.visitlawrence.com and Lawrence Chamber of Commerce at www.lawrencechamber.com.

Compensation and Benefits

Compensation will be based on the experience level, credentials and personal characteristics of the candidate. A full range of employment benefits will be offered to the successful candidate including a retirement plan, professional development funds, health, dental, disability and life insurance, and relocation expenses.

Affirmative Action

KHI encourages applications from qualified individuals regardless of age, race, gender, creed, national origin, sexual orientation, and physical or mental disability.

Contact

For more information, contact search consultants Stephen E. Snodgrass or William M. Wood of Wood-Snodgrass, Inc. at (913) 681-2200 or (800) 207-1958. Please send resume in confidence to Wood-Snodgrass, Inc, 12980 Metcalf Avenue, Suite 130, Overland Park, KS 66213, or e-mail to steve@woodsnodgrass.com or bill@woodsnodgrass.com.

GRANTS AND PROJECTS OFFICER

Shawnee County Health Agency

Permanent Full Time

Starting wage: \$20.31/hr

This position oversees the planning & development of grants program of the Shawnee County Health Agency and serves as a liaison between the Agency, the community, and other governmental agencies in the securing and tracking of grants. This position provides a lead role in researching, writing, and tracking grant applications and funding resources. Also, supervises the Grants Specialist.

Job duties include but not limited to: working with Health Agency staff to make systematic reviews of operational procedures and practices with regard to grant specifications; troubleshooting grant related problems; preparing for and participating in grant application and budget proceedings as required; developing, computing, and compiling data and information for affidavits and grants.

Ideal applicants will have knowledge of federal, state, and private grant writing and application processes as well as strong supervisory and effective leadership skills. Additionally, applicants should have the ability to research, interpret and explain grant applications, rules, and regulations; establish and maintain effective working relationships with other employees, the public, and other County departments; communicate both orally and in writing using the English language.

MINIMUM QUALIFICATIONS: degree from an accredited college or university in Public Health, Public Administration, or Business Administration or a related field. Five (5) years experience in public health analysis, health administration, public administration, social services administration, grants management, or related field.

Apply at Shawnee County Human Resources by 11-19-07.

COMMUNITY HEALTH NURSE II - IMMUNIZATION CLINIC

Sedgwick County, Kansas

Job Objectives:

Perform Immunization and Health Screening services at all clinic locations. Provide direct nursing services to all citizens at these locations.

Essential Job Functions:

Provide direct health care services to all populations seeking services from the health department.
Accurately document health and health screening services.
Provide health education to clients seeking services through the health department.
Submission of reports as needed.
Knowledge of and Adherence to Sedgwick County and Health Department policies and procedures.

Job Standards:

Qualified to provide direct nursing services
1-2 years experience preferred.
Graduate of an accredited program in nursing
Currently registered in the State of Kansas as a Registered Nurse or a Licensed Practical Nurse.
Valid Kansas Drivers license.
Current Valid CPR certification
Proof of vaccination against certain diseases within 10 days of employment As a requirement of this position, in some instances it may be necessary for bilingual staff to interpret or provide written translation for the Sedgwick County Health Department.

Equipment:

Medical equipment necessary for job duties.

Work Environment:

Medical Clinic
SALARY: LPN-annual starting salary \$32,271 or CHN II annual salary \$37,293(will be adjusted based on experience)
Mon-Fri 8-5
2716 W. Central Wichita KS 67203

Valid Kansas Drivers License Required. Must meet Driver Qualification standards as set forth in Sedgwick County s Fleet Vehicle Operation and Usage policy (R#225-1999).

To Apply please go to www.hrepartners.com. [Back to top](#)

KPHA Is Awarded APHA Grant!

APHA Awards Over \$2 Million in Grants to Strengthen the Capacity of State Public Health Associations

APHA, Washington, D.C., announced 31 affiliated state and regional public health associations will receive grant awards to build capacity and strengthen the infrastructure of their associations. The grants, totaling more than \$2 million, are a part of a \$5.9 million grant that APHA received from the W.K. Kellogg Foundation in 2006.

The Kellogg Foundation grant has allowed APHA to implement the APHA Affiliate Capacity-Building Initiative. The initiative aims to build the capacity of the nation's 53 state and regional public health associations (APHA Affiliates) and the grassroots policy network and improve the nation's ability to respond to new and emerging public health threats. APHA budgeted a portion of the initiative's funds to provide the direct grants for capacity building needs, with additional funding to support technical assistance for all 53 of APHA's Affiliates.

"Our affiliated public health associations are not only essential to the work of APHA, but they also play a crucial role in protecting public health across our nation," said Georges C. Benjamin, MD, FACP, FACEP (E), executive director of APHA. "With a variety of pressing health concerns facing Americans, it is imperative that our Affiliates have the infrastructure required to meet the needs of those in their communities. We thank the W. K. Kellogg Foundation for their investment in our nation's health."

APHA received 40 grant applications, representing 46 state and regional Affiliates. After an extensive, competitive review process and thoughtful consideration, the following 25 applications, including two multi-Affiliate applications, were approved for funding:

- California Public Health Association - North & Southern California Public Health Association
- Colorado Public Health Association
- Connecticut Public Health Association
- Great Lakes Public Health Coalition*
- Idaho Public Health Association
- Iowa Public Health Association
- Kansas Public Health Association
- Maine Public Health Association
- Massachusetts Public Health Association
- Mississippi Public Health Association
- Montana Public Health Association
- New Mexico Public Health Association
- New York State Public Health Association
- North Carolina Public Health Association
- North Dakota Public Health Association
- Oklahoma Public Health Association
- Oregon Public Health Association
- Pennsylvania Public Health Association
- Rhode Island Public Health Association
- South Carolina Public Health Association
- South Dakota Public Health Association
- Utah Public Health Association
- Vermont Public Health Association
- Virginia Public Health Association
- Washington State Public Health Association

* The Great Lakes Public Health Coalition includes the public health associations of Illinois, Indiana, Michigan, Minnesota, Ohio and Wisconsin.

APHA's Affiliates are located in every state and the District of Columbia. California has two associations,

representing the northern and southern regions of the state, and New York City has its own association in addition to one at the state level. The nation's nongovernmental public health associations face limitations in communication, technology and other resources, which limit their ability to engage their communities to respond to new and emerging public health threats.

The new APHA initiative will help affiliates build on their successes, including providing leadership, influencing health policy and leading community programs. The initiative will work to ensure that all 53 Affiliates have resources for basic operations, such as non-profit incorporation and communication tools; expand Affiliates' ability to educate policy-makers on public health issues; and enhance APHA-Affiliate and Affiliate-Affiliate communications. [Back to top](#)



Visit our site at <http://ks.train.org>.



Visit our site at <http://phpartners.org/>.

Copyright 2006-2007. Kansas Public Health Association. All rights reserved.