

Director's Corner

Amy Atkins, MPA, Director



The Center for Local Health has a long history of supporting local health departments in the delivery of basic public health services throughout the state. Over many years, the Center's role has been to serve as the primary liaison between the local health departments and the Bureau for Public Health. In July 2014, the Bureau's Leadership reviewed our mission and scope and made the decision to transition our unit to a Center and become part of the Bureau's Leadership Team. This provides an opportunity for the Center to work more effectively and proactively within the Bureau to support the local public health system and fulfill our mission of enhancing the framework that supports the provision of basic public health.

Toward this end, the Center has formed a Basic Public Health Services Support Team that meets monthly and is comprised of all core programs within local health departments specific to the provision of basic public health services as well as the functions of finance and administration with the Center and the Bureau's Central Finance Unit. These core programs include communicable and reportable disease prevention and control programs, environmental health programs and community health promotion, specifically community health assessment and implementation planning. The primary objective of this team is to assure that program goals, objectives and performance measures are strategically aligned to improve health outcomes in the most effective manner, to develop methods for sharing and using data to understand and improve performance of the system and to coordinate training, technical assistance and support. The Center looks forward to working collaboratively with many partners, state and local, as we move forward.

Public Health Nursing: Key to Our Nation's Health

Judy McGill, Public Health Nursing Coordinator

In the 2010 Institute of Medicine's (IOM) Report *The Future of Nursing*, the committee of the Robert Wood Johnson Foundation Initiative on the Future of Nursing states, "Nurses have key roles to play as team members and leaders for a reformed and better integrated, patient-centered health care system." The IOM suggests that one way nurses can be part of health care system reform is engagement in implementation efforts by actively serving on advisory committees, commissions and boards where health policy decisions are made. The Future of Nursing WV, with a grant from the Robert Wood Johnson Foundation and the American Association of Retired Persons (AARP), developed goals that address the 2010 Institute of Medicine report. One important initiative of this effort is to identify health-oriented board vacancies and qualified nurse candidates that could bring the value of the nursing perspective and skills as important contributions to the organizational mission. Local Boards of Health are a great place for nursing leadership. Currently in West Virginia, twenty-four of the forty-nine local boards of health have nurses serving as voting members. Appointing nurses to governing boards brings relevant skills, expertise and a valuable voice in the decision making process. The Center for Local Health is excited to be part of this work in partnership with the Future of Nursing WV.

Highlights from Local Health Attendance at NACCHO Conference

Lisa Thompson, Public Health Financial Coordinator

Five new local health department administrators and two new physician directors attended the National Association of County and City Health Officials (NACCHO) Conference in Kansas City, Missouri, as part of the Center for Local Health's new program, Connections for Health Administrators: Networking, Governance and Education (CHANGE). During this conference, the participants had the opportunity to network with national and state partners to foster resources that support public health practice and service delivery.

Among the sessions attended, *"Introduction to Management Essentials Training"* provided health officials with the tools to strategize their organization's future, to interpret and act on financial information and to demonstrate leadership to engage stakeholders. Additionally, Danny Scalise, Administrator of the Fayette County Health Department, shared a session on *"Discussing the Challenges Overcome in Application for Public Health Accreditation,"* which described the challenging accreditation process for the Kanawha-Charleston Health Department. Rebecca Schmidt, CDC Public Health Advisor with the Center for Threat Preparedness, also shared a session titled *"What's the Risk? A Toolkit for Engaging Community Partners in Preparedness Planning,"* which described the public health and medical risk assessment toolkit that all forty-nine West Virginia local health departments have utilized to involve their communities in risk data collection analysis. A post event survey revealed that the majority of the participants felt they learned most about performance improvement and community health assessments. They also wanted more information on public health accreditation, establishing core essential services for local health departments, health equity in West Virginia and collaboration for financial sustainability. All participants indicated they would use the information in their work and share it with others.



Rebecca Schmidt, Drema Mace, Marybeth Shea, Amy Atkins, Christina Jackson, Stephanie Shoemaker, Sissy Price, Dr. Michael Kilkenny, Danny Scalise, Dr. Lee Smith and Dr. LaMar Hasbrouck

Public Health Leadership Training Session

Linda Lipscomb, Public Health Administrative Coordinator

The Center for Local Health will sponsor a session in partnership with the Health Administration section at the West Virginia Public Health Association Conference (WVPHA) on Wednesday, September 23, 2015, from 10 a.m. - 12 p.m. This training will be open to Board of Health chairs and health officers, as well as administrators, as space permits. The topics to be covered are in response to feedback from the participants of the Governance Forum held in May and the WVPHA Health Administration section. The session will cover topics such as ethics, conflict of interest and confidentiality. The training will be conducted by The Center for Rural Health Development. A working lunch will be provided for all participants. We hope local health departments will take advantage of this opportunity and encourage Board of Health chairs and health officers to attend this session, as well as the opening session of the West Virginia Public Health Association Conference.

West Virginia Public Health Impact Task Force Update

Linda Lipscomb, Public Health Administrative Coordinator

The West Virginia Public Health Impact Task Force convened on July 15, 2015, at the Monongalia County Health Department in Morgantown, West Virginia. Cecil Pollard, MA, Director, Office of Health Services Research at West Virginia University School of Public Health, and Dr. Henry Taylor, former West Virginia Bureau for Public Health Commissioner and State Health Officer who has served in numerous health leaderships positions in Maryland, were the guest speakers.

The presentations included a historical overview from the perspective of a previous Commissioner and current and future opportunities for partnerships around chronic disease prevention and control, as well as reports on the work completed to date by each of the four Task Force workgroups. The workgroups are Better Health, Better Quality, Affordable Public Health and Community Engagement.

Meike Schleiff, MSPH, DrPH candidate, Johns Hopkins University, presented the Task Force with the results of a survey conducted to capture the perceptions of Task Force members as they relate to fulfilling the public health mission of West Virginia; greatest challenges of the Task Force process; level of confidence in the Task Force process; and how the Task Force process can be improved. Of the twenty-four members, twenty-one responded with an eighty-eight percent response rate. Overall, the Task Force members conveyed a “somewhat high” to “high” degree of confidence in the process while also providing valuable feedback for improving the process. The survey results reveal room for improvement related to the degree to which the State is fulfilling the public health mission of helping to shape the environments within which West Virginians can be safe and healthy in their communities which support the need to work collaboratively to develop system improvements. The survey results will be used to improve the process moving forward and to help others learn from the work of the Task Force.

The agenda also included the appointment of four new members to the Task Force: Lloyd White, Administrator, Marion County Health Department; Bill Kearns, Administrator, Berkeley and Morgan County Health Departments; Terri Giles, Executive Director, West Virginians for Affordable Health Care; and Adam Breinig, DO, FAAFP, President of the West Virginia State Medical Association. Task Force meetings are open to the public and include a public comment period. The Task Force continues to actively request comments, ideas or suggestions for helping to redefine the mission of public health in West Virginia and strengthen West Virginia’s public health system. Ideas may be submitted by email to dhhrbphclh@wv.gov.

CDC Resources to Develop Effective Tobacco Control Programs

The use of Electronic Nicotine Delivery Systems (ENDS) among youth continues to rise rapidly and most adult ENDS users also smoke conventional cigarettes, which is referred to as “dual use.” The [Centers for Disease Control and Prevention](#) provides fact sheets pertaining to the use of ENDS with two new recently released resources. [Electronic Nicotine Delivery Systems \(ENDS\): Key Facts](#) provides CDC’s *Best Practices for Comprehensive Tobacco Control Programs 2014*, an evidence-based guide to help states plan and establish effective tobacco control programs to prevent and reduce tobacco use. This edition describes an integrated programmatic structure for implementing interventions proven to be effective and provides levels of state investment to prevent and reduce tobacco use in each state and other related resources for effective tobacco control programs. [Smokefree Protection in the South: Is Your Community Smokefree?](#) provides conversation around disparities and reducing exposure to secondhand smoke. The fact sheet features data from Americans for Nonsmokers’ Rights in a new map and graph demonstrating local level, comprehensive, smokefree laws and the percentage of the population protected by comprehensive laws.

West Virginia Public Health Impact Task Force Facts

Amy Atkins, MPA, Director

Who is on the Public Health Impact Task Force?

The membership of Public Health Impact Task Force includes public health partners and stakeholders, both from state and local public health agencies and external partners such as the West Virginia School of Public Health, West Virginia Hospital Association, West Virginia Association of Free Clinics, West Virginia Association of County Commissioners, West Virginia Association of Counties, PEIA, and members of the West Virginia Legislature.

What is the charge of the Public Health Impact Task Force?

The Task Force is charged with redefining the mission of public health in West Virginia. Implementation of the Affordable Care Act has resulted in dramatic shifts in federal funding and has set new expectations for improving health outcomes. In addition, West Virginia's poor health outcomes demand that our system respond quickly to move the needle in a positive direction. This Task Force will work to identify ways in which our system can respond to this evolving environment through four workgroups that will develop recommendations for improvements in the areas of Better Health (redefining the mission); Better Quality (exploring how accreditation can drive quality and services); Affordable Public Health (defining the statutory authority of the Bureau); and Community Engagement (aligning community resources to improve health).

Why was the Public Health Impact Task Force formed?

The Task Force was formed to help inform how state and local public health agencies can be best positioned to improve health in today's evolving environment.

Where can I learn more about the Public Health Impact Task Force?

The meeting agendas, minutes, presentations and membership can be found on the [Center for Local Health](#) website. The Center for Local Health also releases a monthly newsletter which includes updates about the work of the Task Force and is distributed to all local health department employees. However, anyone is welcome to receive it. If you are not receiving a copy of the newsletter and would like to receive a copy, please send an email to dhhrbphclh@wv.gov.

What is the timeframe for the Public Health Impact Task Force?

The Task Force launched in April 2015 with scheduled meeting dates through October 2015. At that time, the Task Force can determine if additional time is needed. The sense of urgency for this work is grounded in service to West Virginians. Every West Virginian deserves an effective public health system capable of providing consistent and quality services in every community.

Is there a process for public comment and input?

Yes. The Task Force meetings are open to the public. Meeting announcements are posted on the Secretary of State's website and the [Center for Local Health](#) website. A public comment period is available at the end of every meeting. Individuals and organizations wishing to submit proposals, ideas, or concepts are welcome to do so by submitting them by email to dhhrbphclh@wv.gov.

Is there a plan to regionalize or centralize the public health system?

No. There is not a preconceived plan for regionalization or centralized or any structural change. The Task Force is charged with making recommendations for any needed changes.