



Public Health Advisory Council Meeting

MEETING MINUTES – March 27th, 2019 @ 4:00pm

Health Department Board Room, 2nd floor
2030 Tecumseh Road
Manhattan, KS 66502

In attendance: *Please see attached sign in sheet.*

1. Welcome and Sign In
 - a. Dr. Benne called the meeting to order at 4:05 pm
 - b. Call for other items to be added to the agenda
 - c. No public comment.
2. Director's Report
 - a. Grants
 - i. KDHE Aid to Local Grants
 - A. Submitted and under review
 - B. Awards in June
 - ii. Greater Manhattan Community Foundation Grant, submitted and under review
 - iii. Trauma Council Mini-Grant, submitted and under review
 - iv. Peine Foundation LOI, due March 29th
 - A. Support Raising Riley Quality Improvement Rating System
 - b. Save the date
 - i. Child Abuse Prevention Month – April
 - ii. National Public Health Week – April 1st – 5th
 - A. BugAPalooza, Monday, April 1st, 3:00-6:30pm
 - iii. Health in All Policies Training – April 27th – 10am-3:00pm – FCRC Conference Room
 - iv. Strategic Planning Day – April 19th – 8am-3:00pm
 - v. Mock Site Visit – June 11th
 - c. Opioid Grant
 - i. Training Opportunities
 - ii. <http://www.rileycountyks.gov/1800/Opioid-Prevention-and-Response>
 - iii. Mental Health First Aid
 - A. May 15, 8:30am-5pm (Leonardville Community Building). Register on [EventBrite](#)
 - B. May 22, 8:30am-5pm (Health Department Family Child Resource Center, West End Room). Register on [EventBrite](#)
 - C. June 26, 8:30a-5pm (Health Department Family Child Resource Center, West End Room). Register on [EventBrite](#)
 - iv. Adverse Childhood Experiences
 - A. April 24th, 1:00 pm-3pm (Leonardville Community Building). Register on [EventBrite](#)
 - B. May 30th, 1:00pm-3pm (Health Department Board Room). Register on [EventBrite](#)
 - C. June 25th, 1:00pm -3pm (Health Department Board Room). Register on [EventBrite](#)
 - v. SBIRT Training

- vi. K-TRACS Training
- vii. Ad Campaign kicking off
 - A. The ad campaign will include billboards during large public events including Country Stampede.
- d. Save the Date: BugAPalooza 2019
 - i. Monday, April 1st City Park (Wefald Pavillion)
 - ii. 3:00pm-6:30pm
- e. BugAPalooza Trend Data
 - i. Quantitative and Qualitative Data from BugAPalooza events in 2017 and 2018
 - ii. Data collected during BugAPalooza events
 - iii. Analysis
 - A. Descriptive statistics in Excel for quantitative data
 - B. Thematic analysis for qualitative
 - iv. 2017 Demographics of Attendees
 - A. Primary Language – English: 93%
 - B. Race/Ethnicity – White: 76%
 - C. Average Family Size: 3.08
 - v. 2018 Demographics of Attendees
 - A. Primary Language – English: 83%
 - B. Race/Ethnicity – White: 67%
 - C. Average Family Size: 2.43
 - vi. 2017: Based on Yes, definitely or yes, probably; strongly agree or agree
 - A. Intention - to use insect repellent: 100%
 - B. Intention - to wear protective clothing: 96%
 - C. Knowledge – prevent bug bites: 100%
 - D. Self-Efficacy – prevent bug bites: 100%
 - vii. 2018: Yes, definitely or yes, probably; strongly agree or agree
 - A. Intention - to use insect repellent: 98%
 - B. Intention - to wear protective clothing: 92%
 - C. Knowledge – prevent bug bites: 100%
 - D. Self-Efficacy – prevent bug bites: 98%
 - viii. 2017 Reasons for not getting Tdap Vaccination at the event
 - A. We did get vaccinated: 4%
 - B. Already vaccinated: 77.33%
 - C. Time: 4%
 - D. Cost: 0%
 - E. Did not see the station: 10.7%
 - ix. 2018 Reasons for not getting Tdap Vaccination at the event
 - A. We did get vaccinated: 2%
 - B. Already vaccinated: 77%
 - C. Time: 7%
 - D. Cost: 0%
 - E. Did not see the station: 10%
 - x. 2017 Themes of Qualitative Open Ended Questions which asks “Do you have any additional feedback” and “Time and location convenience.”
 - A. Strengths
 - Great Event
 - Informative
 - B. Opportunities for Improvement

- More advertising
- Could have more games for kids and adults
- Time would be better later in the day
- xi. 2018 Themes of Qualitative Open Ended Questions which asks “Do you have any additional feedback” and “Time and location convenience.”
 - A. Strengths
 - Great Event
 - Fun
 - Informative
 - B. Opportunities for Improvement
 - More event advertisement
 - Not enough time
 - More kid friendly activities and adults
 - Time hard for working parents
- xii. Conclusions
 - A. Participants reported increased knowledge, strong intentions to prevent mosquito bites, and feeling more prepared to prevent bites
 - B. Few people get Tdaps
 - Many already have them
 - Location during the event
 - C. Provide more advertising
 - D. Increase activities for kids and adults
 - E. Time can be inconvenient for some families
 - F. Overall, community members are pleased with the event
- f. Accreditation and Strategic Planning
 - i. Timeline
 - A. We push the button on Friday! Reception 1:30-2:30: We will be having cake and water. This will also be documented on Facebook Live!
 - Button pushing at 2:15pm
 - B. Mock site visit – June 11th
 - C. 2 Day site visit – ~ October 2019
 - Sessions to review each domain
 - Meetings with staff, community partners, Board of Health and You!
 - D. Decision by December 2019
- g. Strategic Planning Updates
 - i. Strategic Plan Annual Report–(online)
 - ii. Health Department Annual Report – online
 - iii. Strategic Plan 2020-2025 – Spring (March-December)
 - A. Contracting with KHI
 - B. March 12 – staff professional development and BOCC/PHAC planning day
 - C. April 19, 8am-3pm – Set goals for the strategic priority
 - Survey – second week in April
- h. Performance Management
 - i. Systematic process by which an organization involves its employees in **improving the effectiveness of the organization** and **achieving** the organization’s **mission and strategic goals**.
 - ii. PHAB Requirement: Use a performance management system to monitor achievement of organizational objectives

- iii. Measure: the specific quantitative representation of a capacity, process, or outcome deemed relevant to the assessment of performance
- iv. Performance Standard: a generally accepted, objective standard of measurement such as a rule or guideline against which an organization's level of performance can be compared.
- v. Baseline: 2017 starting point for the measure
- vi. Child Care Licensing: Percentage of Citation Due to Safe Sleep, Lack of Supervision, or Over Capacity
 - A. Measure: % of citations due to safe sleep, lack of supervision, and over capacity
 - B. Standard met
 - C. Provided regulation reviews for providers
 - D. Next step and opportunities
 - Safe sleep training for providers
- vii. WIC: Percent of Moms Breastfeeding to Six Months each Quarter
 - A. Measure: percentage of WIC mothers breastfeeding to six months.
 - B. Next steps and opportunities
 - Reviewed BFPC data
 - We're still higher than national average. It was determined the moms attending their prenatal visits, Becoming a Mom, and working with Earlisha increases breastfeeding. We want to make sure moms hit those target areas.
- viii. Raising Riley: Percent of Parents who Read to Their Children (0-5) Every Day in the Past Week
 - A. Measure: the percentage of parents who read to their children 0-5 years of age every day in the past week
 - B. Family Engagement events
 - September 2019
- ix. Across Programs: Percent of Infants Fully Immunized by age 2
 - A. Next steps and opportunities
 - Vaccine for uninsured
 - Reminder/recall
 - Updated school policies
 - We want to make certain that no matter what program a client visits they are asked if their immunizations are up to date.
- x. Public Health Clinic: Percent of Young Adults Clients Immunized for HPV
 - A. Measure: percentage of young adults (18-26) clients who have been immunized against the Human Papilloma Virus (HPV)
 - The Clinic was awarded \$5000 for increasing their HPV rates.
 - B. Next steps and opportunities
 - Reminder and recalls for HPV vaccines
- xi. MCH: Percentage of Women Who Began Prenatal Care in the First Trimester
 - A. Measure: the percentage of mothers enrolled in Becoming a Mom who began prenatal care during their first trimester
 - B. Standard met
 - C. Next steps and opportunities
 - Revised the Perinatal grant application to streamline the process
- xii. Worksite Wellness
 - A. Participation in Worksite Wellness (Any Participation): Increased
 - B. Participation in Worksite Wellness (HealthQuest) – Increased
 - C. Participation in Worksite Wellness (Fitness Fridays) – Decreased

D. Next Steps and Opportunities

- Employee Get to Know You Profiles
- Quarterly Employee Recognition Program
- Employee Satisfaction Survey

3. Business

a. Structure 2019 Goals

- i. This item was not discussed.

b. Mental Health Presentation with Robbin Cole

- i. This will be conducted at the April 24th, 2019 PHAC Meeting.

c. Underage Drinking and Substance Abuse Presentation with Jenny Yuen

- i. Current Statistics in Kansas based on High School YRBS that drank alcohol or used drugs before sexual intercourse: 12th Grade (2017)—(22.1% of 162). The survey was taken by 16,000 kids.

This is the survey that USD 383 will no longer take.

- A. 2013 – 9th Grade: Ever drank alcohol – 52.4%
 - B. 2013 – 12th Grade: Ever drank alcohol – 64.9%
 - C. 2013 – 9th Grade: Currently drank alcohol (30 days) – 21.3%
 - D. 2013 – 12th Grade: Currently drank alcohol (30 days) – 34.5%
 - E. 2013 – 9th Grade: Report of binge drinking – No report available.
 - F. 2013 – 12th Grade: Report of binge drinking – No report available.
 - G. 2013 – 9th Grade: Currently used Marijuana – 11.3%
 - H. 2013 – 12th Grade: Currently used Marijuana – 17.2%
 - I. 2013 – 9th Grade: Ever used prescribed meds (not intended for you) – No report available.
 - J. 2013 – 12th Grade: Ever used prescribed meds (not intended for you) – No report available.
 - K. 2017 – 9th Grade: Ever drank alcohol – 52%
 - L. 2017 – 12th Grade: Ever drank alcohol – 75%
 - M. 2017 – 9th Grade: Currently drank alcohol (30 days) – 18.5%
 - N. 2017 – 12th Grade: Currently drank alcohol (30 days) – 41.1%
 - O. 2017 – 9th Grade: Report of binge drinking – 7.1%
 - P. 2017 – 12th Grade: Report of binge drinking – 25.5%
 - Q. 2017 – 9th Grade: Currently used Marijuana – 7.3%
 - R. 2017 – 12th Grade: Currently used Marijuana – 18.6%
 - S. 2017 – 9th Grade: Ever used prescribed meds (not intended for you) – 11.4%
 - T. 2017 – 12th Grade: Ever used prescribed meds (not intended for you) – 18.5%
- ii. Communities that Care Student Survey
 - A. USD 383 will still allow this survey to be completed. There were 2500 surveyed. Students were asked...”During the past 30 days, on how many days did you have 5 or more drinks on the same occasion? (By 'occasion', we mean at the same time or within a couple of hours of each other).”
 - 2014 State Data: 9.6%
 - 2014 County Data: 6.73%
 - 2016 State Data: 7.35%
 - 2016 County Data: 5.24%
 - 2017 State Data: 8.51%
 - 2017 County Data: 5.98%
 - 2018 State Data: 8.45%
 - 2018 County Data: 4.92%

- B. We are below the KS average. Jenny likes this survey because it looks for perception and attitude.
- C. “On how many occasions (if any) have you had beer, wine or hard liquor during the past 30 days??”
 - 2014 State Data: 19.91%
 - 2014 County Data: 13.91%
 - 2016 State Data: 16.98%
 - 2016 County Data: 14.17%
 - 2017 State Data: 16.31%
 - 2017 County Data: 13.73%
 - 2018 State Data: 16.51%
 - 2018 County Data: 11.53%
- D. “If you wanted to get some beer, wine, or hard liquor (for example vodka, whiskey, or gin) how easy would it be for you to get some?”
 - Response: Very Easy
 - 2014 State Data: 18.87%
 - 2014 County Data: 17.27%
 - 2016 State Data: 16.66%
 - 2016 County Data: 14.14%
 - 2017 State Data: 18.09%
 - 2017 County Data: 17.14%
 - 2018 State Data: 16.04%
 - 2018 County Data: 15.03%
- E. “If you wanted to get some beer, wine, or hard liquor (for example vodka, whiskey, or gin) how easy would it be for you to get some?”
 - Response: Very Hard
 - 2014 State Data: 39.55%
 - 2014 County Data: 40.82%
 - 2016 State Data: 43.44%
 - 2016 County Data: 41.42%
 - 2017 State Data: 43.27%
 - 2017 County Data: 42.40%
 - 2018 State Data: 45.48%
 - 2018 County Data: 49.32%
- F. “On how many occasions (if any) have you used marijuana during the past 30 days?” Response of 0 Occasions
 - 2014 State Data: 91.58%
 - 2014 County Data: 92.04%
 - 2016 State Data: 94.12%
 - 2016 County Data: 94.17%
 - 2017 State Data: 93.45%
 - 2017 County Data: 93.26%
 - 2018 State Data: 93.47%
 - 2018 County Data: 94.50%

iii. Takeaway

- A. In general, Riley County is faring well compared to other counties across the State of KS in regards to underage drinking and other drugs behaviors. We are below the KS average!

- B. **Communities That Care Survey** contains several items that assess the degree to which these factors, both risk and protective, occur in the students who respond to the survey. They relate to the students themselves, their peers, their school, their community, and their family. Again, these results highlight the important relationships that guide school prevention and intervention programs across the state.
 - iv. What can the PHAC do?
 - A. Advocate for the school districts to conduct the Communities That Care Survey. In 2017-2018, the participation rate in Riley County was about 70%.
 - B. This survey helps to:
 - Identify trends and prevalence
 - Compete for available resources in KS at the state and federal level.
 - Grant applications. Other organizations rely on data gathered too!
 - v. The perception is that it would be easy to obtain alcohol but the data says there are barriers.
 - vi. The website in which Jenny collected the data has so much information.
 - vii. Julie states that KSU conducts a survey for incoming freshman that we can draw data from. Julie said 2nd year student alcohol data is higher than the national average.
 - d. State of Health Care in our Community Presentation with Dr. Benne
 - i. The medical services our community provides is
 - A. Electrophysiology
 - B. Frozen Section
 - C. Interventional Radiology
 - D. Radiology
 - E. SANE/SARC
 - F. Stat Pathology
 - G. Vascular Surgery
 - ii. We should have an arthritis physician and dental surgery in our community
 - iii. Dr. Benne mentioned that a physician from Mercy travels to Geary County one a week. Manhattan doesn't have this as an option which would be beneficial. Leslie said we used to have a physician that specialized in diabetes travel to Manhattan. It seems that those with advanced health concerns only see their primary care physician. There is a large population that need a higher level of care. KU has clinics in Salina which provides specialties. We're in between big city opportunities and a small town. If folks have their primary through Stormont they will be sent to Topeka. There is a new pediatric doctor that came from Children's Mercy.
 - iv. Dr. Benne asked if there are other ideas of why there is a lack of physicians in our community. Ellyn mentioned due to population size.
 - v. Children's Mercy will see you until you are 21 then refer to KU. Unfortunately, there's not a lot of places to refer you to. The primary care physicians don't see you for more complex needs. It is mostly for a once a year check. Anna thought that Stormont had traveling pulmonologist.
 - vi. Ellyn has a student that has to go to KC for her arthritis which takes a lot of time a coordination. Anything closer to home would be better.
- 4. Other
 - a. Ellyn states that the KSU MPH program is changing their booth based on survey results. They will get kids involved in the research corner at BugaPolooza. They will encourage families to complete a simple questionnaire for an incentive. Ellyn hopes to get young scientists participating. This is important for STEM.

Meeting adjourned at 4:58 pm Dr. Benne

Next Meeting: April 28th, 2019 @ 4:00pm