

MATTERS



A PUBLICATION OF THE INDIANA STATE DEPARTMENT OF HEALTH

Getting better together

National Public Health Week 2018 is April 2 to 8, and the Indiana State Department of Health is using the occasion to increase awareness of public health topics that need our attention. This year's theme is "Changing our Future Together."

You are invited to learn more about ISDH as we celebrate National Public Health Awareness Week with an open house from 10 a.m. to 2 p.m. Thursday, April 5, in the atrium at the Indiana Government Center South in downtown Indianapolis. The event will feature information about many ISDH divisions, including a naloxone demonstration and a vital records pop-up shop where you can purchase copies of birth and death certificates.



Dr. Kris Box

To ensure every Hoosier has a chance at a long and healthy life, we must tackle the underlying causes of poor health and disease risk. Those causes are rooted in how and where we live, learn, work and play. No single agency or department can make those changes alone. We must create partnerships and work together to build healthier communities.

The Indiana State Department of Health relies on partners in both the public and private health sectors to accomplish its goals, particularly in the priority areas of the opioid epidemic and infant mortality.

For example, Indiana is pooling all of its resources to tackle the opioid epidemic. ISDH supports the Indiana Family

& Social Services Administration's new [Know the O Facts website](#) (see more information on page 6). The website was created to help build awareness and understanding about opioid use disorder as part of the state's Next Level Recovery initiative.

Infant mortality is another of our state's most pressing public health issues. In his State of the State address, Governor Holcomb made it a goal for Indiana to have the lowest infant mortality rate in the Midwest by 2024. Indiana's rate of 7.5 deaths in the first year per 1,000 live births is simply unacceptable.

It's going to take all of us working together to implement creative solutions to this stubborn problem.

I recently visited Vanderburgh County, which is launching Pre-to-3, a home-visiting program designed to support families during pregnancy and until the baby is 3 years old.

In Monroe County, the new Nurse-Family Partnerships program provides nurses to meet mom in her home and help her through the rest of her pregnancy and up to the child's second birthday.

The commitment these communities are showing to tackling this issue in their communities is critical to improving the health of moms and babies statewide. I hope you will be as inspired as I am!

Public health makes our lives healthier, safer and better every single day. I look forward to continuing our work together.

Yours in health,

Kris Box, MD, FACOG

Indiana State Health Commissioner

Legislature passes public health bills

The Indiana General Assembly adjourned sine die (indefinitely) just after midnight on the morning of March 15. More than 880 bills were proposed during the short 2018 legislative session, and 133 headed to Gov. Eric Holcomb's desk for his signature and final approval (or veto).

Among the state's most pressing public health issues that received attention were infant mortality, public safety and the opioid epidemic.

The Indiana State Department of Health (ISDH) had three bills on its legislative agenda successfully pass this year: **Senate Enrolled Act (SEA) 331**

SEA 331 gives ISDH's Food Protection Division the authority to implement the Food Safety Modernization Act's Produce Safety Rule. The act allows ISDH to inspect covered produce farms for compliance with federal regulations and ensure that consumers have access to fruits and vegetables that are safe to eat. The program supports farm inspections as well as outreach and education to the produce-grower community on the best food safety practices.

SEA 360

SEA 360 establishes perinatal levels of care for Indiana birthing centers and hospitals that offer birthing services. This legislation will create a uniform system to ensure that mothers and babies receive the right level of care in a facility equipped to meet their needs.

Indiana ranks 42nd in the nation for infant mortality, with a rate of 7.5 deaths per 1,000 live births. States with uniform

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FOCUSED ON PARTNERSHIPS



State Health Commissioner Kris Box, MD, FACOG, stresses the importance of partnerships with local health departments in protecting Hoosiers during the Local Public Health Leadership Symposium March 21 at the Ritz Charles in Carmel. Dr. Box has made it a goal to visit all 93 Indiana local health departments this year to promote collaborations across the state. Dr. Box has already been to 13 health departments and plans to visit another seven in April as she makes her way across the state. “We’re here to work as a team,” Dr. Box said. “If we don’t, we can’t improve the health of the state as a whole.”

STATE FAIR BOUND

The Indiana State Department of Health (ISDH) is going to the fair! ISDH will be a proud sponsor of First Responders’ Day at the Indiana State Fair on Monday, Aug. 13. Teams representing ISDH divisions will be on hand to promote good health for Hoosiers through displays, demonstrations and fun activities for the whole family.

This is the first time that ISDH has participated in the fair in many years, and the excitement is building as we begin planning activities that promote physical fitness and good health for Hoosiers of all ages.

Watch for more details in the next issue of Public Health Matters!



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levels of care have lower infant mortality rates and experience better outcomes for both mothers and babies. Governor Holcomb has set a goal of becoming the best state in the Midwest for infant mortality by 2024, and his first step was making SEA 360 a priority during the 2018 legislative session.

House Enrolled Act (HEA) 1120

HEA 1120 transfers the powers, duties and rules for illegal drug/meth lab decontamination from the Indiana Department of Environmental Management (IDEM) to ISDH.

ISDH’s Environmental Public Health Division assumed responsibility over the program through an agreement with IDEM in July 2017. This act updates the state laws that govern the program so that it permanently stays with ISDH. Over the past few months, ISDH has done

outreach with local health departments to identify ways to improve remediation efforts, which is critically important to protecting the public from exposure.

Two public health-related bills that Governor Holcomb made a priority this session also passed:

SEA 139

SEA 139 will expand ISDH’s pilot coroner toxicology program statewide by requiring all coroners to conduct toxicology screens on any suspected overdose death. Indiana drug overdose deaths are currently underreported, particularly those caused by opioids, largely due to inconsistencies in what toxicology screens coroners perform and how cause of death is coded on death certificates.

This legislation ensures that the screens are all done the same way and that coroners test for the same drugs so the data is accurate and consistent among all 92 counties. ISDH has been operating a cor-

oner toxicology program in 13 counties since January 2018 to help the state better identify which drugs are being used in our communities.

SEA 221

SEA 221 aims to help curb overprescribing by requiring providers to check the INSPECT prescription drug monitoring program before prescribing opioids and benzodiazepines. This will also provide physicians with a much-needed tool to identify patients at risk for substance use disorder and allow for early intervention.

Implementation will occur over a three-year phase-in period for all emergency rooms and pain clinics (January 2019), hospitals (January 2020) and health care providers (January 2021). The statewide integration of INSPECT into electronic health records is already underway and will make INSPECT reports available in seconds with just the click of a button.

Paramedicine pilot launches this month

By Greta Sanderson

The Indiana State Department of Health (ISDH) is expanding its support of community paramedicine as part of its pledge to lower the state's infant mortality rate.

Community paramedicine uses paramedics and emergency medical technicians to give routine medical care to underserved populations, such as rural areas.

ISDH has been partnering with the Crawfordsville Fire Department (CFD) for several years on a paramedicine project that started with chronic health conditions, such as cardiac care, using paramedics to follow up on patients after they are released from the hospital. This month, CFD added prenatal and postpartum care to its paramedicine pilot program, with the support of a \$200,000 ISDH federally funded grant.

"The paramedics will provide all of the services that the patient could receive in a doctor's office," said Ann Alley, ISDH director of chronic disease, primary care and rural health.

The problem is that these patients don't always get to a doctor's office for a variety of reasons, including transportation, a lack of providers and financial barriers.

Paul Miller is EMS division chief for CFD, and his passion for community paramedicine is infectious. He's excited for this latest addition to the spectrum of care the program offers, which will include prenatal care through postpartum check-ups on new moms and their babies.

Pilot program participants will be referred by area physicians and the local

Women's Resource Center, which provides obstetric services, and other community partners. Miller said the goal is to enroll pregnant moms as early as 12 weeks into their pregnancies and continue through 16 weeks postpartum.

The treatment will cover visits for moms at risk for preterm deliveries through access to lactation consultants and education about the ABCs of safe sleep. The initial visit will include a urine drug test, not to get the mother into trouble, but to identify those who may be misusing drugs and get them help.

"We're not there to judge moms, we're there to assist them with being successful, just like smoking cessation or how to manage the family," Miller said.

Miller said the need for the program expansion was clear based on the county's rates of preterm deliveries, low birth weights, lack of prenatal care and other issues that negatively impact infant mortality, the death of a baby before he or she turns a year old.

Participants in the program will be visited by a community paramedic at least once a week, more often if necessary. The paramedic has remote access to update and view the patient's medical records so that her primary care doctor and specialists can all track her conditions. The community paramedic can even see the doctor's calendar and schedule an appointment if necessary.

Community paramedicine isn't used to fill down time between emergency runs, but rather to help lower call volume through better follow-up and intervention before a health problem becomes urgent. The cardiac care community paramedicine program has reduced ER and hospital re-admissions by as much as 83 percent, Miller said, and he has no doubt

LEARN MORE

Click [here](#) for more information about the Crawfordsville Paramedicine Program.

the pilot for new mothers will generate similar results.

Miller works with many community partners to make the program work. They include Franciscan Health, whose doctors and nurses make participant recommendations to the community paramedicine program. Franciscan likes the program because it leads to early interventions, better management of chronic conditions and fewer hospital re-admissions.

CFD has one full-time paramedic visiting 15 patients a week on chronic disease management, and a second one will be added in May. Miller said that in addition to the many professional partnerships within the community that has made the program work, the community paramedics have instant credibility with patients, which makes their visits an immediate help.

"The trust factor has been fantastic for us," said Miller, explaining that the program's community paramedic is from Crawfordsville and has been on the job making calls for 28 years.

"You go out to the grocery store and they know him," he said. "It's what rural communities are good at."

Alley said a key part of the new pilot will be to collect standardized data to connect treatment to future Medicare and Medicaid reimbursement so the community paramedicine model of care is self-sustaining.

"It's crazy that we haven't been doing this longer," Miller said. "It should be an expectation of every fire department."



EMS Chief
Paul Miller

Contest focuses on educating patients about infections

You are invited to participate in a contest to help educate patients about infection prevention.

The patient education contest was created through a partnership of the Indiana State Department of Health (ISDH) with the Indiana Hospital Association (IHA) and QSource, a not-for-profit quality improvement organization that has contracted with Centers for Medicare and Medicaid Services (CMS).

The idea began when ISDH and IHA

got together last year to reduce the duplication of efforts for educational materials related to antibiotic resistance, antibiotic stewardship, healthcare-associated infections and other infection prevention topics. The group wanted to create one place where resources from Indiana partners would be available.

ISDH, IHA and QSource created a website to feature all the information available on these topics at <http://www.in.gov/isdh/27600.htm>.

While pulling together resources for the website, the patient education contest will generate new educational resources targeting patients and the public.

To enter the quarterly contest, create a patient-focused educational piece. This quarter's topic is antibiotic-resistant germs called Carbapenem-resistant Enterobacteriaceae (CRE), and the submission deadline is March 30.

Click [here](#) to download contest details and information on future contests.

Pilot project focuses on opioid crisis

By Greta Sanderson

One of the greatest responsibilities in public health is to be ready for an emergency. A new pilot project underway at the Indiana State Department of Health (ISDH) has the goal of helping all county health departments respond to a public health crisis surrounding opioid and heroin overdoses.

Local health departments from six counties — Clark, Fayette, Howard, Marion, Monroe and Montgomery — are participating in the Overdose Response Pilot Project, which is funded by a \$225,000 grant from the Centers for Disease Control and Prevention. The pilot started in January when the six counties were trained on ESSENCE, the Electronic Surveillance System for the Early Notification of Community-based Epidemics. ESSENCE is used to collect and analyze data from 122 hospital emergency rooms in Indiana.

That information is monitored by ISDH, which checks every day for signs of an outbreak, not just related to opioids, but in all areas of public health. But some of that information wasn't reaching the local health departments quickly.

"What we really wanted with this project was for them to know what's happening now," said Kayley Dotson, ISDH overdose surveillance systems epidemiologist. "Particularly for opioids, the system has been underutilized."

The first goal of the pilot was to encourage local health departments to monitor ESSENCE directly and use the information to find gaps in opioid use disorder services, to guide harm reduction strategies, to prepare for trends and to coordinate better emergency responses, said Cris Henderson, overdose response project coordinator.

And that has already started to happen. Since being trained on using ESSENCE, Clark County Health Officer Dr. Eric Yazel has seen the benefit of real-time information.

"Our hospital was tracking OD numbers, but I was getting the information after the fact," he said, sometimes as long as two or three months after.

With immediate data, Yazel said they can see patterns emerge and details, such as using a patient's ZIP code to allocate resources more effectively, like moving an ambulance for better coverage.

As a second part of the pilot, each of the counties created an overdose response

OVERDOSE RESPONSE PLANS

Here is a summary of each pilot county's project:

Clark County is in the process of implementing an Addiction Transition Team. The goal is to provide assistance during this transition phase, with further extension to close the loop from an acute overdose to complete drug-free recovery.

Fayette County will use ESSENCE data to inform community stakeholders of the ongoing opioid and heroin crisis in Fayette County and strengthen relationships to address prevention strategies needed within the community, including the development and distribution of resource cards and information packets.

Howard County will use ESSENCE data to identify spikes in overdoses and the substances responsible for suspected overdoses and develop a communication plan that notifies multiple agencies when spikes occur.

Marion County's Substance Use Outreach Services Program will host community forums monthly in high-risk neighborhoods and increase lay-responder naloxone training on each side of town based on ESSENCE data. The county is also developing an outreach campaign for lay-responder naloxone training and the dangers of opioid and heroin.

Monroe County will target residents suffering from opioid and heroin substance use utilizing ESSENCE data to collaborate with Monroe County Recovery Pathways to provide telephone and face-to-face support. The county will hire a health navigator to advocate on behalf of individuals suffering from substance use disorder and support clients when there is a time gap between when a person has overdosed and when a person can enter treatment.

Montgomery County will use ESSENCE data to improve outreach and engagement with individuals suspected of overdosing by making contact with anyone who has overdosed within 24 to 48 hours after discharge from an ER. The goal is to increase outreach and treatment efforts resulting in a 50 percent decrease in unintentional overdoses.

plan based on that information. The plan goals are to incorporate new strategies into existing procedures, strengthen partnerships and create a tool kit for the project that can be followed by other health departments along with implementation advice, Dotson said.

In Clark County, Yazel, an emergency room physician, is creating an Addiction Transition Team to "close the loop" from overdose to substance misuse recovery.

He became the health officer in October 2017 and knew right away that something different needed to be done to help overdose victims who came to the Clark Memorial Hospital ER, where he works. He had seen the toll of addiction many times, including a call he received at the stroke of midnight on New Year's Eve in 2016. A young man with three kids suffered a fatal overdose, the first of 90 OD deaths in Clark County that year, he said.

"I saw that for an overdose or someone coming in for help, we were still doing the same procedure as 10 years ago — giving them pamphlets and phone numbers," he said. But with three-month waiting lists for inpatient addiction treatment, the

same people kept coming back to the ER.

"We're letting them down without a viable treatment option," Yazel said.

Starting March 1, the transition team works with overdose patients to provide interventions while they are waiting to transition to inpatient treatment.

The transition program may include naloxone training for family members, counseling, treatment for infectious diseases or withdrawal symptoms and more to help the patient bridge the gap from the ER to a treatment facility.

"We're trying to offer more of a comprehensive response," Yazel said. He hopes that recovery coaches can eventually be added.

At the end of the pilot in September, the goal is to have tool kits available in seven areas: Communication and community engagement; data resources; grants; program planning and program support; research; resources (toolkit .pdfs and online); and training and webinars.

These resources could then be used as best practices for other counties to follow, Dotson said.

ISDH prediabetes campaign focuses on more prevention

The Indiana State Department of Health (ISDH) is renewing an advertising campaign aimed at keeping more Hoosiers from developing diabetes.

The media campaign — including billboards, radio spots, bus signs and digital ads — focuses on prediabetes, the condition individuals develop that can lead to type 2 diabetes. The Centers for Disease Control and Prevention (CDC) estimates that 84 million people in the United States have prediabetes, and research shows that 15 percent to 30 percent of these people will develop type 2 diabetes within five years.

People with prediabetes have blood sugar levels between 100 and 125, levels that have already been shown to cause long-term damage, including a higher risk for heart disease and stroke.

The CDC says people who are obese, older than 45 and physically inactive are also at risk for prediabetes.

According to the 2014 Behavioral Risk Factor Surveillance System (BRFSS), at least 7.7 percent, or 335,000, of Indiana adults were told by a doctor or health professional that they have prediabetes.

But the CDC estimates that as many as 90 percent of those with prediabetes don't know it, so the campaign is designed to reach those people and get them to take action. It's estimated that one in three Hoosiers have the chronic health condition.

"We want to increase awareness of people who are at risk and get them to do something," said Laura Heinrich, ISDH Cardiovascular Health and Diabetes Section director.



The campaign will run from March through May and is funded by a five-year CDC grant. The campaign is similar to a promotion that ran from April to June 2017, Heinrich said.

Indianapolis and South Bend will continue for another year, and New Albany, Terre Haute and Richmond will be added this year.

The media campaign will also include messages on health videos shown in doctor's offices through a partnership with the CDC and CBS Healthwatch. Heinrich said 39 primary care physicians in Indiana will play the spots twice an hour for 13 weeks.

The ads will direct people to preventdiabetes.isdh.in.gov, where they can view the list of prevention programs in Indiana. "We want them to know that there's a diabetes prevention program that can help them get a better lifestyle," Heinrich said.

She said studies have shown that healthy lifestyle changes are as effective as medication alone in reducing the risk of developing diabetes. The research recommends that if you're overweight, lose 5 to 7 percent of your total body weight. So if you're 200 pounds, just lose 10 pounds. She adds that seems more attainable to some people than reaching their ideal body weight. Heinrich also encourages increasing physical activity to 150 minutes a week and eating healthy.

Mobile WIC unit reaches out in Marion County

The Marion County Women, Infants and Children (WIC) program began in January using its new mobile unit, a commercial passenger vehicle customized to provide services to clients in the county.

Marion County WIC Coordinator Sarah DeFelice said the mobile program will address client transportation issues and improve child retention in the program.

"This unit is used to travel throughout

Marion County to serve clients outside of a clinic, such as libraries, health fairs, apartment complexes, vendor parking lots (if contractually allowable), and Head Start and low-income child care centers." The mobile unit will focus in areas where public transportation is lacking and there are no WIC clinics nearby.

Marion County

WIC is working to bring the mobile clinic to the Craine House (a work-release program for moms with infants who are coming from correctional facilities and finishing their sentences) with a peer counselor to provide breastfeeding support.

The mobile unit is already scheduled at four different Head Start clinics a week, and organizers are partnering with IUPUI to set up a schedule for the unit to be on campus in conjunction with the university's Paw Pantry, a food bank that provides food assistance to all IUPUI students, faculty and staff. Plans are also in the works to bring the unit to a library and to a large Burmese population at an Indianapolis apartment complex.

The van has been equipped with everything needed to complete certifications, including a laptop, anthropometric and hemoglobin measuring equipment, required paperwork, a wireless printer and a TV.



New ISDH program guards against falls

Every 11 seconds, an older adult visits an emergency room for a fall-related injury, according to the National Council on Aging. In 2015, 4,606 Indiana seniors ages 65 and older were treated at a hospital emergency room. And the numbers show that the majority of Hoosier seniors injured in a fall were released to a skilled nursing facility.

Falling is a life-altering possibility for seniors, but there are steps people can take to reduce their risk. That's why the Indiana State Department of Health is implementing a program called Stepping On.

Stepping On is a seven-week course for seniors to learn how to lower their risk of falling. It includes medication manage-

ment, identifying home hazards, exercise, optometry and other helpful information to help prevent injuries.

At the end of the seven weeks, participants also have a "booster" session and a home visit and assessment by a nurse to make sure they have implemented what they learned.

Preston Harness, ISDH injury prevention program coordinator, is a trained leader in the course. The first series was taught in Lafayette last fall, and the second series of classes began March 19 at St. Vincent Hospital in Indianapolis.

"The program is designed for independent-living seniors," he said.

Harness said the most rewarding part of the program has been seeing the

participants' progress. For example, at the beginning of the first session, some participants struggled with a stand up/sit down exercise, but they could do it 10 times by the end of the series.

"I realized if you don't use those muscles, you really do lose them," he said.

Stepping On, a program from the Wisconsin Institute for Health Aging, has been shown to reduce falls by 30 percent.

In addition to teaching the classes, Harness will complete training this summer so that he will be a master teacher who can train other people to be instructors and spread the program across the state.

Email Harness at pharness@isdh.in.gov or call 317-232-3121 for more information.

State launches 'Know the O Facts' opioid disorder website

The Indiana Family & Social Services Administration has launched the [Know the O Facts campaign](#) to help build awareness and understanding about opioid use disorder.

The Know the O Facts website went live in January and presents information for Hoosiers to help better understand opioid use disorder and learn key messages. Website visitors are urged to take the pledge to help reduce stigma.

A goal of Know the O Facts is to raise awareness of opioid use disorder and treatment, change the way Hoosiers think, promote effectiveness of medication-assisted treatment and recovery and to know the physical signs of opioid use disorder.

Addressing the opioid epidemic is not only a top priority for public health, but it will also help build stronger communities and allow those with substance use disorders to lead healthier, more productive lives. As each community understands more, the campaign hopes to decrease the stigma associated with opioid use disorder through these three tenets:

1. Opioid use disorder is a disease.
2. There is treatment for a person with opioid use disorder.
3. Recovery is possible.

The campaign will focus on communities where new opioid treatment programs are being established. It will also provide training and partner with community-based partners/organizations and engage them in outreach to their local communities.

The graphic features a large yellow circle with the word "Know" in blue, followed by "the facts." in yellow. Below this, it says "Understanding OPIOID USE DISORDER" and "KnowTheOFacts.org". At the bottom, three yellow circles contain the numbers 1, 2, and 3, each followed by a fact: "1 It's a disease.", "2 There is treatment.", and "3 Recovery is possible."

ISDH IN THE NEWS

Click on any of the links below to see recent ISDH press releases:

- [HEALTH DEPARTMENT HOSTS WORLD TB DAY EVENT](#)
 - [HEALTH DEPARTMENT PROMOTES SCREENINGS, LIFESTYLE CHOICES TO HELP PROTECT HOOSIERS FROM COLORECTAL CANCER](#)
 - [HEALTH DEPARTMENT SAYS INDIANA FLU ACTIVITY CONTINUES TO RISE](#)
 - [HEALTH OFFICIALS OFFER TIPS ON PREVENTING CAVITIES IN CHILDREN](#)
 - [HEALTH DEPARTMENT AWARDS NEARLY 3,400 NALOXONE KITS TO FIRST RESPONDERS IN RURAL COUNTIES](#)
 - [HEALTH OFFICIALS REPORT INCREASED FLU ACTIVITY, DEATHS](#)
 - [HEALTH OFFICIALS URGE RESIDENTS TO TEST FOR RADON](#)
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