HARPER COUNTY

REQUEST FOR COUNTY BOARD ACTION

Items *must* be received in the Administrator's Office by *12:00 Noon* on the *Thursday* prior to the scheduled meeting to be considered.

Item #: _____
(Assigned by Administrator)

Meeting Date: January 19, 2016

Department: Public Health/Home Health

Item Requested: Employee safety; and non-action items

Summary of the Issue: We had a total of three employees fall on the ice in the recent ice storm, no one was hurt seriously. One employee was off work for three days.

Background: While a plan is being developed for snow and ice removal around county offices, that will not resolve the issue of ice/snow on the streets, walking to the post office and other locations to conduct business during the day and sending staff to client homes for in-home services. Many of the in-home service clients do not have anyone available to clean their driveways, sidewalks or steps for them. Requesting that the county allow the department to purchase a type of ice cleat (yaktrax) for department employee use through a local business.

Funding: The cost per pair is approximately $23.00 per pair at the local business and we have approximately 20 employees at the current time. The total cost would be around $460.00 for the department and we could absorb this within the existing budget as a departmental expense.

Recommendation: This expenditure seems reasonable to provide enhanced safety and reduction of potential for injury for employees. The equipment would be checked in/out to employees on the form used in the department employee equipment log and the equipment should last several seasons depending on ice/snow frequency during work time.

Other non-action items:

- 2015 Public Health Statistics
- 2015 year end budget estimates
- Mid-year SFY 2016 grant reports
- Upcoming PHEP Exercises
  - Ebola Tabletop (Wednesday, 1/20/2016) at the Sedgwick County Extension Office, Wichita
  - Functional Exercise (Thursday, 2/11/2016) at the Westview Conference Room, Harper, - we need participation as this will count as a part of the PHEP work plan requirement.
- Meeting reminders:
  - Advisory Board Meeting – Tuesday, January 26, 2016 at noon, HCHD conference room
  - LEPC Meeting - Wednesday, January 27, 2016 at 3:00 pm, HCHD conference room
  - SKCPH Executive Board Meeting – Friday, February 5, 2016, 9-11 am at Pratt

2015 PUBLIC HEALTH STATISTICS

KIPHS REPORT (Client/Services in Date Range 01/01/2015-12/31/2015)

Type of service	Clients	Procedures
Adult Health Services	98	362
Child Health Services	126	352
Courier	1	24
Family Planning Services	107	1,390
Healthy Start Services/ICH	75	278
Immunization Services	461	2,061
Private Immunizations	695	2,515
REM	140	174
TB Skin Tests	95	203
WIC Services	256	804
	2054	**8,163**

Total Services 2015	**8,163**	Total Services 2013	6,242
Total Services 2014	6,491	Total Services 2012	6,044
Increase in services:	1,672		

The numbers may not always be correlated from year to year though due to program changes. These counts also do not include blood pressure clinics and some other services provided through the agency.

WIC GRANT (January 1, 2015 – December 31, 2015) During this grant period we served an average of **176** individuals a month through the WIC program (compared to 182 per month in 2014).

WIC Encounters included:

2010	2011	2012	2013	2014	2015	
1,041	992	820	919	923	933	Check Pickups
10	4	10	43	46	102	Mid Certifications
376	353	287	324	355	277	WIC Certifications
104	106	78	138	121	110	New Applications

$ 110,501.71 - WIC funds were spent in the local grocery stores (compared to 2014 amount of $117325.84; 2013 amount of $101,979.09; 2012 amount of $97,295.55; 2011 amount of $110,821.66; 2010 amount of $107,544.05; 2009 amount of $115,170.81). Gene's Heartland Foods and Larry's Hometown Market in Anthony and SPK Grocery in Harper are currently serving as WIC vendors in Harper County. Some clients choose to spend their WIC vouchers outside of Harper County and we do not have a total of WIC dollars being provided through our agency as the software does not show the origin of WIC checks in the vendor reports.

2015 Health Budget Worksheet

Item	YTD	Budget	2014 Actual	Budget	2013 Actual	Budget	2012 Actual	Adopted	Budget	2011 Actual	Adopted	2010 Actual	Budget	2009 Actual	Budget	2008 Acutal	Budget	2007 Actual	Budget	2006 Actual	Budget	2005 Actual	Budget
	12/31/2015	2015	12/31/2014	2014	12/31/2013	2013	12/31/2012	2012	2012	12/31/2011	2011	12/31/2010	2010	12/31/2009	2009	12/31/2008	2008	12/31/2007	2007	12/31/2006	2006	12/31/2005	2005
PERSONNEL	644,222	712,283	624,554	670,706	584,374	701,445	578,693	649,242	667,103	571,142	613,900	533,011	462,360	387,791	450,892	382,780	369,600	318,205	286,000	258,592	271,000	247,771	254,600
COMMODITIES	86,495	66,500	64,428	66,000	61,281	60,500	55,382	56,400	56,400	52,387	60,000	44,784	45,000	39,943	25,000	29,881	23,000	23,022	23,000	17,145	23,000	19,365	22,000
CONTRACTUAL	14,614	18,926	15,342	21,200	21,080	24,500	20,183	26,300	26,300	17,767	30,000	20,639	20,000	20,910	40,000	14,010	45,000	24,941	39,000	39,147	39,000	32,995	37,900
CHA																							
commodities	0	0	0	0	0	0	0			0													
contractual	0	0	0	0	0	0	6,640			67													
BT/PHEP																							
commodities	432	2,500	3,064	2,500	3,643	3,100	2,043	3,000	3,000	4,499	3,500	4,633	3,500	1,465	2,500	2,258	3,000	1,764	1,500				
contractual	4,633	2,200	3,171	2,200	1,994	1,700	1,541	1,800	1,800	2,848	3,500	3,162	3,500	4,730	5,000	2,382	4,000	5,387	4,500				
EBOLA/(CCLR hx)																							
commodities	217	0	0	0	0	0	0	200	200	300	500	0	500	6	500	0	500	0	900	57	900	0	700
contractual	71	0	0	0	0	0	56	600	600	983	850	385	850	590	500	617	900	262	900	418	900	493	1,700
Family Planning																							
commodities	4,861	3,650	2,765	3,500	2,948	2,700	3,157	3,400	3,400	1,719	4,000	1,838	4,000	3,063	4,000	1,856	4,000	2,455	4,000	2,838	4,000	2,920	5,200
contractual	2,398	5,750	3,979	5,300	5,141	5,500	3,932	6,300	6,300	3,785	6,500	4,705	6,500	5,559	6,000	4,898	6,000	5,476	6,000	5,104	6,000	4,973	2,100
Food Assst.																							
commodities	0	0	0	0	0	0	0																
contractual	0	0	0	0	0	0	86																
Home Health																							
commodities	5,116	11,500	8,208	11,500	5,011	9,500	9,953	9,000	9,000	8,396	10,000	10,171	6,700	3,125	4,500	4,644	5,500	2,328	5,000	4,729	5,000	2,437	8,800
contractual	26,106	34,200	27,963	34,200	22,911	36,200	25,572	37,300	37,300	28,546	30,000	27,675	19,800	17,803	14,000	16,128	7,000	11,123	4,000	7,027	4,000	4,166	5,200
IAP																							
commodities	70	600	553	600	422	1,500	347	1,700	1,700	385	2,400	1,092	2,400	1,362	1,000	720	500	542	600	188	600	1,732	0
contractual	838	3,100	844	3,100	1,075	2,400	2,784	2,250	2,250	2,279	4,800	2,170	4,800	2,229	3,000	3,818	3,000	3,137	3,000	2,860	3,000	2,823	0
KALHD																							
commodities	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	500	0	500	0	0
contractual	485	0	1,845	1,000	2,086	1,000	910	1,000	1,000	1,396	1,200	2,080	1,200	1,776	1,500	522	1,500	1,429	500	1,499	500	1,070	0
MCH																							
commodities	1,246	1,600	1,238	1,600	1,696	1,400	2,697	1,550	1,550	863	1,500	1,445	1,500	529	2,000	952	2,000	1,941	4,000	866	4,000	1,118	4,100
contractual	1,927	2,000	2,238	1,600	1,980	1,800	1,094	2,050	2,050	1,509	1,700	1,464	1,700	1,692	3,000	1,142	2,000	2,334	2,000	1,277	2,000	1,405	2,600
BF																							
commodities	0	0	0	0	104	0	519	0	0	1,499	0	28,232	0	128	0	2,120	1,500	2,369	1,500				
contractual	0	0	24	0	656	0	2,687	0	0	6,185	0	88	0	487	0	918	1,500	1,127	1,200				
Public Health In-Home																							
commodities	1,803	6,800	2,394	6,800	5,378	7,200	9,125	11,400	11,400	4,641	4,500	13,662	3,000	6,055	2,000	1,330	10,000	312	2,500	7,930	2,500	4,072	2,600
contractual	20,747	26,100	22,089	26,100	20,775	26,600	22,589	26,300	26,300	20,319	30,000	21,861	19,550	17,218	15,000	15,102	5,000	12,273	4,000	4,356	4,000	3,733	6,700
WIC																							
commodities	200	700	625	700	795	700	1,954	800	800	1,692	1,500	238	1,500	649	1,500	549	1,500	544	2,000	643	1,000	5,438	1,000
contractual	202	1,800	1,082	1,800	1,483	1,800	1,268	1,400	1,400	1,914	1,800	8,561	1,800	2,022	1,500	867	1,500	367	2,000	975	2,500	816	900
GRANT PROGRAMS	71,552	102,500	82,082	102,500	78,098	103,100	98,954	110,050	110,050	93,805	108,250	133,242	82,800	70,488	67,500	60,823	60,900	55,170	50,600	40,767	41,400	30,449	37,300
SANITARIAN	0	0	0	0	0	0	9,400	10,000	10,000	9,400	10,000	9,400	10,000	7,050	10,000	5,450	10,000	9,400	10,000	9,400	10,000	7,050	9,000
CAPITAL OUTLAY	0	9,000		10,500	7,000	10,000	274	15,000	15,000	1,300	15,000	3,558	15,000	0	15,000	5,200	15,000	685	15,000	0	15,000	4,594	15,000
Neighborhood Revit.		11,740		8,954	0	1,734				0	3,154												
TOTAL EXPENDITURES	**816,883**	**920,949**	**786,406**	**877,860**	**751,833**	**901,279**	**762,886**	**866,992**	**884,863**	**745,801**	**840,304**	**744,634**	**635,160**	**526,182**	**608,392**	**498,144**	**523,500**	**431,423**	**423,600**	**365,051**	**399,400**	**342,224**	**375,800**
FEES																							
Public Health Receipts	136,401	174,300	154,442	275,900	129,688	299,000	116,697	230,000	299,000	301,248	291,948	282,498	200,000	202,538	165,000	240,882	140,000	165,641	140,000	118,019	120,000	117,272	120,000
PH In-Home Reciepts	142,874		145,104		152,209		142,835																
Total PH Service Revenue	279,275	174,300	299,546	275,900	281,897	299,000	259,532																
Home Health Receipts	124,147	170,000	134,970	200,000	172,595	210,000	192,836	210,000	210,000	212,035	175,000	102,157	90,000	106,688	80,000	72,319	90,000	67,181	70,000	73,220	85,000	72,212	65,000
Total Service Revenues	403,422	344,300	434,516	475,900	454,492	509,000	452,368	440,000	509,000	513,283	466,948	384,655	290,000	309,226	245,000	313,201	230,000	232,822	210,000	191,239	205,000	189,484	185,000
Tax revenue	460,132	484,352	285,457	275,408	252,303	250,041	230,912	223,899		396,954	373,356	279,904	256,007	280,644	255,929	296,050	277,715	195,300	183,697	125,836	107,644	184,230	181,735
Add. Tax	0	15,117	0	0	0	0	0	0	0														
Revenue Totals	863,554	843,769	719,973	751,308	706,795	759,041	683,280	663,899		910,237	840,304	664,559	546,007	589,870	500,929	609,251	507,715	428,122	393,697	317,075	312,644	373,714	366,735
Beginning Fund Balance	162,918	77,180	229,353	229,353	274,390		229,353	229,353															
Total Fund Balance	1,026,472	920,949	949,326	980,661	981,185		912,633	893,252	509,000	910,237	840,304	628,182	546,007	589,870	500,929	609,251	507,715	428,122	393,697	317,075	312,644	373,714	366,735
Ending Fund Balance	209,589	0	162,919		229,353		274,390			350,204		185,769		265,969		202,288		91,181		94,482		115,352	
		2015		2014		2013		2012	2012		2011		2010		2009		2008		2007		2006		2005

2004 Actual	Budget
12/31/2004	2004
211,760	214,000
14,561	22,000
40,055	36,800
441	700
759	1,650
2,074	5,000
2,102	2,000
2,292	8,500
3,946	5,000
0	0
0	0
0	0
0	0
5,890	4,000
1,300	2,500
2,027	2,500
2,656	6,500
1,006	1,000
2,257	900
22,287	36,000
	39,300
11,945	14,490
2,062	8,000
302,670	**331,290**
129,856	127,000
100,037	61,600
229,893	188,600
46,127	
276,020	
276,020	
	2004

FINANCIAL STATUS REPORT
Aid To Local FY16

1. Grant Name Assigned By Funding Agency	2. Recipient Organization
State Formula 2015-2016	Harper County Health Department

3. Federal Employer Identification Number	4. Recipient Identifying Number	5. Funding/Grant Period		6. Report Period	
486005267	1578	Start: 7/1/2015	End: 6/30/2016	Start: 10/1/2015	End: 12/31/2015

7. Submitted By	8. Date Report Submitted	9. FSR #	10. Final Report
	1/1/0001	1065	No

11. Transactions:	I Previously Reported	II This Period	III Cumulative
a. Total Obligated (Sum of lines b and c)	**N/A**	**N/A**	**$7,000.00**
b. Payer Obligated (Award)	**N/A**	**N/A**	**$7,000.00**
c. Recipient Obligated (Match)	**N/A**	**N/A**	**$0.00**
Expenses:			
d. Total Payer Share of Expenses	**$1,500.00**	**$1,500.00**	**$3,000.00**
• Benefits/Grant Expenditure	$0.00	$0.00	$0.00
• Capital Equipment/Grant Expenditure	$0.00	$0.00	$0.00
• Contract Personnel/Grant Expenditure	$0.00	$0.00	$0.00
• Other/Grant Expenditure	$0.00	$0.00	$0.00
• Salary/Grant Expenditure	$1,500.00	$1,500.00	$3,000.00
• Supplies/Grant Expenditure	$0.00	$0.00	$0.00
• Travel/Grant Expenditure	$0.00	$0.00	$0.00
e. Total Recipient Share of Expenses	**$96,494.00**	**$111,316.02**	**$207,810.02**
• Benefits/Local core support, funding match	$0.00	$0.00	$0.00
• Benefits/Maintenance of Effort	$23,169.00	$18,208.09	$41,377.09
• Benefits/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Benefits/Revenue Expenditure	$0.00	$0.00	$0.00
• Capital Equipment/Local core support, funding match	$0.00	$0.00	$0.00
• Capital Equipment/Maintenance of Effort	$0.00	$0.00	$0.00
• Capital Equipment/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Capital Equipment/Revenue Expenditure	$0.00	$0.00	$0.00
• Contract Personnel/Local core support, funding match	$0.00	$0.00	$0.00
• Contract Personnel/Maintenance of Effort	$150.00	$150.00	$300.00
• Contract Personnel/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Contract Personnel/Revenue Expenditure	$0.00	$0.00	$0.00
• Other/Local core support, funding match	$0.00	$0.00	$0.00
• Other/Maintenance of Effort	$2,738.00	$3,442.39	$6,180.39
• Other/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Other/Revenue Expenditure	$0.00	$0.00	$0.00
• Salary/Local core support, funding match	$0.00	$0.00	$0.00
• Salary/Maintenance of Effort	$55,218.00	$43,122.92	$98,340.92
• Salary/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Salary/Revenue Expenditure	$0.00	$0.00	$0.00
• Supplies/Local core support, funding match	$0.00	$0.00	$0.00
• Supplies/Maintenance of Effort	$14,830.00	$45,504.78	$60,334.78
• Supplies/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Supplies/Revenue Expenditure	$0.00	$0.00	$0.00
• Travel/Local core support, funding match	$0.00	$0.00	$0.00
• Travel/Maintenance of Effort	$389.00	$887.84	$1,276.84
• Travel/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Travel/Revenue Expenditure	$0.00	$0.00	$0.00

f. Unliquidated Total Obligated (Line a minus lines d and e)	**N/A**	**N/A**	**($203,810.02)**
g. Unliquidated Payer Obligated (Line b minus line d)	**N/A**	**N/A**	**$4,000.00**
h. Unliquidated Recipient Obligated (Line c minus line e)	**N/A**	**N/A**	**($207,810.02)**
Income:			
i. Total Income From Payer	**$3,500.00**	**$0.00**	**$3,500.00**
j. Total Income From Recipient	**$0.00**	**$0.00**	**$0.00**
• Fees/Medicaid/KanCare	$0.00	$0.00	$0.00
• Fees/Other Public Health Insurance	$0.00	$0.00	$0.00
• Fees/Patient/Client Fees	$0.00	$0.00	$0.00
• Fees/Private Health Insurance	$0.00	$0.00	$0.00
• Fees/SCHIP	$0.00	$0.00	$0.00

	A	B	C	D	E	F	G
1	**FAMILY PLANNING QUARTRERLY AFFIDAVIT**						
2				**Report Period:**		**County:**	
3		**Revenues**		2nd Qtr. SFY 2016		Harper	
4	Last qrtr. unexpended revenues	$0.00					
5	Medicaid Payments	$0.00					
6	Patient/Client Fees	$42.00					
7	SCHIP/Healthwave	$0.00		**Grant Funds Received this Quarter:**			
8	Other Public Insurance	$0.00		$2,134.77			
9	Private Health Insurance	$105.44					
10	Other - specify _____	$0.00					
11	**Total Revenue**	**$147.44**					
12			**Box A- Local Expenditures**	**Box B-Revenue Expenditures**	**Box C-Grant Expenditures**	**Total Expenditures**	
13	Salaries		$3,389.25	$147.44	$2,134.77	$5,671.46	$5,671.46
14							
15	Travel, to include mtg. fees, lodging, meals		$90.85	$0.00	$0.00	$90.85	$90.85
16							
17	Pharmaceutical Supplies (only)		$2,383.56	$0.00	$0.00	$2,383.56	
18	Other Medical Supplies		$229.13	$0.00	$0.00	$229.13	
19	Office and Other Supplies, inc. ed. Supplies		$0.00	$0.00	$0.00	$0.00	
20	Total Supply Expenditures		$2,612.69	$0.00	$0.00	$2,612.69	$2,612.69
21							
22	DO/ARNP/PA/MD/Pharnacist/Translator		$150.00	$0.00	$0.00	$150.00	
23	Lab Fees		$94.50	$0.00	$0.00	$94.50	
24	Copies/Postage/Phone/Fax/Utilities		$20.29	$0.00	$0.00	$20.29	
25	Linen Service/Medical Waste		$33.35	$0.00	$0.00	$33.35	
26	Pt. Refund/ other reimbursements		$0.00	$0.00	$0.00	$0.00	
27	Total Category Expenditures		$298.14	$0.00	$0.00	$298.14	$298.14
28							
29	Total Affidavit Expenditures		$6,390.93	$147.44	$2,134.77	$8,673.14	$8,673.14
30			$6,390.93				
31	unexpended revenues this qtr.			$0.00	$0.00		
32							
33	rev. 04-11	**Report Prepared By:**		Sherry Vierthaler, Admin.			

Family Planning Semi-Annual Report

Submit Form

Reporting Period: July 1 - December 31 Year: 2015

Clinic Name: Harper County Health Department

Contact Phone Number 620-842-5132

Report prepared by: Sherry Vierthaler, Administrator

Physician total hours client encounter time for this period: 0

ARNP/CNM/PA total hours client encounter time for this period: 29

RN total hours client encounter time for this period: 100

Chart Review
Abnormal Pap Results*: FPAR Table 9

	# records sampled	# records in compliance**
Number of Pap tests with ASC or higher result in this time period	4	4
Number of Pap tests with HSIL or higher results in this time period	0	0

* Exhibit 1 - the 2001 Bethesda System (Abridged), excerpted from 2004 Title X FPAR Revisions.

** All records with abnormal pap smears (ASC or higher results) must be audited. Records must indicate notification and referral of client within six weeks.

HIV Reporting

HIV - total number of positive confidential FP tests: 0

Prepare your narrative in a word document, copy and paste into the field box below. The field will expand.

Progress Report: Describe/list significant accomplishments; challenges/problems encountered; staffing changes and other pertinent information.

Education and Outreach Report: Each family planning project must provide community education and outreach based on an assessment of community needs. The report should describe/list community-specific activities designed to meet those needs and include measurable outcomes. Community education should enhance community understanding of the objectives of the project, inform potential clients of the availability of services and encourage continued participation by persons to whom family planning may be beneficial.

The Family Planning Semi-Annual Report, including the Program Narrative, should be submitted directly to Christina Flyntz, Family Planning Administrative Consultant electronically by clicking the "Submit" button above or e-mail to CFlyntz@kdheks.gov.

AMILY PLANNING PROGRAM NARRATIVE
SCKCPH - HARPER COUNTY SITE
SEMI-ANNUAL REPORT July 1 – December 31, 2015

Progress Report

We participate in the South Central Kansas Coalition for Public Health region for Family Planning Services. 23 annual visits and 9 initial visits were completed during this report period.

Family Planning Community Education and Outreach

1. Agency will assure that skilled personnel, equipment and medical back-up services are available to provide the required services.
2. Agency advisory board meets on a quarterly basis and is involved in planning, development and evaluation of the local family planning program.
3. Agency is a member of the South Central Kansas Public Health Coalition (SCKPHC) which meets monthly to review

information in regards to Family Planning services. This group also has an advisory board that meets on a quarterly basis to guide decision making for Family Planning Services.
4. Agency has developed a brochure for Family Planning Services and will continue to make this available to medical providers and the community. Healthy Start Home Visitors include these brochures in their packets of information to pre-natal and post natal women.
5. Agency participates in local community events, including but not limited to local health fairs and the county fair. Information regarding agency programs including Family Planning Services is made available to the public at these events.
6. Staff will continue to work with school nurse and other school personnel on educating students and staff of the Family Planning Services. Brochures have been made available to the schools via the school nurse.
7. The agency will continue to be an active participant in community meetings for health care topics.
8. The agency will continue to maintain the web-pages on the Harper County website (www.harpercountyks.gov). Family Planning Service information is included on the Public Health page of this website. The agency also uitlizes facebook and twitter.
9. Agency will continue to use feedback from user summary reports and client satisfaction surveys to assess community needs.
10. Agency will continue to utilize interpreters as needed to support the provision of Family Planning Services.

Community Specific Activities

During this report period we have completed the following to achieve the goals of our plan listed above:
1. Agency hired a new practitioner in May 2015 and she is working well with staff and clients having a strong background in family planning services. We have provided her with materials specific to the Family Planning Grant program. We continue to replace equipment when needed and staff attend Family Planning meetings and webinars that pertain to the services we provide as available and appropriate and as time allows. Agency continues to develop and maintain personnel, equipment and supplies to provide the required services.
2. The Harper County Health Department/Harper County Home does have a local Advisory Board for the agency that meets on a quarterly basis to guide decision making for agency services including Family Planning.
3. Agency continued to participate in agency advisory board meetings, the South Central Kansas Coalition for Public Health (SCKCPH) and SCKCPH executive board meetings.
4. The Harper County Health Department also initiated an Advisory Board for Family Planning services that will meet annually in the spring.
5. Agency continued to distribute brochures to the community, medical providers, school nursing personnel, and during Healthy Start pre-natal and post natal visits.
6. Agency provided bags of information including information regarding Family Planning Services at the Harper County Fair August 5 - August 7, 2015 and at the annual Women's Fair October 31, 2015.
6. Agency personnel continue to work with school nursing personnel at both school districts in the county and provide both with information and brochures for students and school personnel use.
7. Agency continued to participate in community meetings and grant activities to support healthy lifestyles and maintain a community resource directory.
8. Agency continues to maintain agency website at www.harpercounty.ks.gov which includes information on Family Planning services. Agency. Facebook and twitter accounts are also in use.
9. Agency continues to review user summary reports and client satisfaction surveys to assess community needs.
10. Agency continues to utilize interpreters as needed in the provision of Family Planning services. The agency currently employs two individuals who are bilingual with Spanish/English languages.

Accomplishments/Challenges

Involvement in the South Central Kansas Coalition for Public Health continues to strengthen our ability to provide family planning services in a cost efficient and enhances the quality of the services we provide. We also feel that working with community partners and other groups increases the knowledge of family planning services in the community. Our outreach efforts at local events do not seem to create any significant changes in the numbers of individuals utilizing family planning services, but it is one way of maintaining visibility for the program in the local community. We continue to use an appointment reminder system in addition to mailing appointment letters for clients that agree to this service to try to reduce the number of no shows for family planning appointments. We have had stabilization in front desk personnel during the past year but are still working on data collection issues that have been an issue during this report period.

FINANCIAL STATUS REPORT
Aid To Local FY16

1. Grant Name Assigned By Funding Agency	2. Recipient Organization
Immunization Action Plan 2015-2016	Harper County Health Department

3. Federal Employer Identification Number	4. Recipient Identifying Number	5. Funding/Grant Period		6. Report Period	
486005267	1578	Start: 7/1/2015	End: 6/30/2016	Start: 10/1/2015	End: 12/31/2015

7. Submitted By	8. Date Report Submitted	9. FSR #	10. Final Report
	1/1/0001	1064	No

11. Transactions:	I Previously Reported	II This Period	III Cumulative
a. Total Obligated (Sum of lines b and c)	**N/A**	**N/A**	**$25,906.28**
b. Payer Obligated (Award)	**N/A**	**N/A**	**$2,446.00**
c. Recipient Obligated (Match)	**N/A**	**N/A**	**$23,460.28**
Expenses:			
d. Total Payer Share of Expenses	**$611.50**	**$611.50**	**$1,223.00**
• Benefits/Grant Expenditure	$0.00	$0.00	$0.00
• Capital Equipment/Grant Expenditure	$0.00	$0.00	$0.00
• Contract Personnel/Grant Expenditure	$0.00	$0.00	$0.00
• Other/Grant Expenditure	$0.00	$0.00	$0.00
• Salary/Grant Expenditure	$611.50	$611.50	$1,223.00
• Supplies/Grant Expenditure	$0.00	$0.00	$0.00
• Travel/Grant Expenditure	$0.00	$0.00	$0.00
e. Total Recipient Share of Expenses	**$5,184.87**	**$6,826.14**	**$12,011.01**
• Benefits/Local core support, funding match	$1,476.04	$1,857.55	$3,333.59
• Benefits/Maintenance of Effort	$0.00	$0.00	$0.00
• Benefits/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Benefits/Revenue Expenditure	$0.00	$0.00	$0.00
• Capital Equipment/Local core support, funding match	$0.00	$0.00	$0.00
• Capital Equipment/Maintenance of Effort	$0.00	$0.00	$0.00
• Capital Equipment/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Capital Equipment/Revenue Expenditure	$0.00	$0.00	$0.00
• Contract Personnel/Local core support, funding match	$100.00	$100.00	$200.00
• Contract Personnel/Maintenance of Effort	$0.00	$0.00	$0.00
• Contract Personnel/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Contract Personnel/Revenue Expenditure	$0.00	$0.00	$0.00
• Other/Local core support, funding match	$180.77	$90.65	$271.42
• Other/Maintenance of Effort	$0.00	$0.00	$0.00
• Other/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Other/Revenue Expenditure	$0.00	$0.00	$0.00
• Salary/Local core support, funding match	$3,428.06	$4,637.06	$8,065.12
• Salary/Maintenance of Effort	$0.00	$0.00	$0.00
• Salary/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Salary/Revenue Expenditure	$0.00	$0.00	$0.00
• Supplies/Local core support, funding match	$0.00	$0.00	$0.00
• Supplies/Maintenance of Effort	$0.00	$0.00	$0.00
• Supplies/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Supplies/Revenue Expenditure	$0.00	$0.00	$0.00
• Travel/Local core support, funding match	$0.00	$140.88	$140.88
• Travel/Maintenance of Effort	$0.00	$0.00	$0.00
• Travel/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Travel/Revenue Expenditure	$0.00	$0.00	$0.00

f. Unliquidated Total Obligated (Line a minus lines d and e)	**N/A**	**N/A**	**$12,672.27**
g. Unliquidated Payer Obligated (Line b minus line d)	**N/A**	**N/A**	**$1,223.00**
h. Unliquidated Recipient Obligated (Line c minus line e)	**N/A**	**N/A**	**$11,449.27**
Income:			
i. Total Income From Payer	**$1,224.00**	**$0.00**	**$1,224.00**
j. Total Income From Recipient	**$0.00**	**$0.00**	**$0.00**
• Fees/Medicaid/KanCare	$0.00	$0.00	$0.00
• Fees/Other Public Health Insurance	$0.00	$0.00	$0.00
• Fees/Patient/Client Fees	$0.00	$0.00	$0.00
• Fees/Private Health Insurance	$0.00	$0.00	$0.00
• Fees/SCHIP	$0.00	$0.00	$0.00

FINANCIAL STATUS REPORT
Aid To Local FY16

1. Grant Name Assigned By Funding Agency	2. Recipient Organization
Maternal & Child Health 2015-2016	Harper County Health Department

3. Federal Employer Identification Number	4. Recipient Identifying Number	5. Funding/Grant Period		6. Report Period	
486005267	1578	Start: 7/1/2015	End: 6/30/2016	Start: 10/1/2015	End: 12/31/2015

7. Submitted By	8. Date Report Submitted	9. FSR #	10. Final Report
	1/1/0001	1061	No

11. Transactions:	I Previously Reported	II This Period	III Cumulative
a. Total Obligated (Sum of lines b and c)	**N/A**	**N/A**	**$26,449.27**
b. Payer Obligated (Award)	**N/A**	**N/A**	**$5,784.00**
c. Recipient Obligated (Match)	**N/A**	**N/A**	**$20,665.27**
Expenses:			
d. Total Payer Share of Expenses	**$1,446.00**	**$1,446.00**	**$2,892.00**
• Benefits/Grant Expenditure	$383.88	$0.00	$383.88
• Capital Equipment/Grant Expenditure	$0.00	$0.00	$0.00
• Contract Personnel/Grant Expenditure	$0.00	$0.00	$0.00
• Other/Grant Expenditure	$0.00	$0.00	$0.00
• Salary/Grant Expenditure	$1,008.27	$1,446.00	$2,454.27
• Supplies/Grant Expenditure	$53.85	$0.00	$53.85
• Travel/Grant Expenditure	$0.00	$0.00	$0.00
e. Total Recipient Share of Expenses	**$538.01**	**$2,332.27**	**$2,870.28**
• Benefits/Local core support, funding match	$0.00	$745.92	$745.92
• Benefits/Maintenance of Effort	$0.00	$0.00	$0.00
• Benefits/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Benefits/Revenue Expenditure	$0.00	$0.00	$0.00
• Capital Equipment/Local core support, funding match	$0.00	$0.00	$0.00
• Capital Equipment/Maintenance of Effort	$0.00	$0.00	$0.00
• Capital Equipment/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Capital Equipment/Revenue Expenditure	$0.00	$0.00	$0.00
• Contract Personnel/Local core support, funding match	$111.95	$127.75	$239.70
• Contract Personnel/Maintenance of Effort	$0.00	$0.00	$0.00
• Contract Personnel/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Contract Personnel/Revenue Expenditure	$0.00	$0.00	$0.00
• Other/Local core support, funding match	$190.95	$453.65	$644.60
• Other/Maintenance of Effort	$0.00	$0.00	$0.00
• Other/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Other/Revenue Expenditure	$0.00	$0.00	$0.00
• Salary/Local core support, funding match	$0.00	$718.59	$718.59
• Salary/Maintenance of Effort	$0.00	$0.00	$0.00
• Salary/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Salary/Revenue Expenditure	$0.00	$0.00	$0.00
• Supplies/Local core support, funding match	$195.43	$242.08	$437.51
• Supplies/Maintenance of Effort	$0.00	$0.00	$0.00
• Supplies/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Supplies/Revenue Expenditure	$0.00	$0.00	$0.00
• Travel/Local core support, funding match	$39.68	$44.28	$83.96
• Travel/Maintenance of Effort	$0.00	$0.00	$0.00
• Travel/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Travel/Revenue Expenditure	$0.00	$0.00	$0.00

f. Unliquidated Total Obligated (Line a minus lines d and e)	**N/A**	**N/A**	**$20,686.99**
g. Unliquidated Payer Obligated (Line b minus line d)	**N/A**	**N/A**	**$2,892.00**
h. Unliquidated Recipient Obligated (Line c minus line e)	**N/A**	**N/A**	**$17,794.99**
Income:			
i. Total Income From Payer	**$2,892.00**	**$0.00**	**$2,892.00**
j. Total Income From Recipient	**$0.00**	**$0.00**	**$0.00**
• Fees/Medicaid/KanCare	$0.00	$0.00	$0.00
• Fees/Other Public Health Insurance	$0.00	$0.00	$0.00
• Fees/Patient/Client Fees	$0.00	$0.00	$0.00
• Fees/Private Health Insurance	$0.00	$0.00	$0.00
• Fees/SCHIP	$0.00	$0.00	$0.00

Maternal & Child Health 2015-2016
Date Generated: 01/05/2016
Harper County Health Department
Period: 07/01/2015 - 06/30/2016
Filter(s): Q2 2015; & Harper County Health Department;

Grouping A - Administration and Management

Goal: A.1 - Applicant Structure/Overview

Status: 0% Complete

List staff changes this quarter: No staffing changes this quarter for public health services. Sherry Vierthaler, Administrator remains the primary point of contact for MCH services at: harperhealth@harpercountyks.gov

Goal: A.2 - Capacity Building and Accountability

Status: 0% Complete

Strategy: A.2.1 - Build Internal Capacity

Status: 0% Complete

Requirement: A.2.1.1 - Attend Governor's Public Health Conference

Status: 0% Complete

Requirement: A.2.1.2 - Provide Orientation and Training of New Staff

Status: 0% Complete

Requirement: A.2.1.3 - Develop a Method for Recruiting, Selecting and Training Staff

Status: 0% Complete

Requirement: A.2.1.4 - Use Evidence-based Counseling Services, Intervention Services or Curricula

Status: 0% Complete

Requirement: A.2.1.5 - Assure Cultural Competence within All Services

Status: 0% Complete

Strategy: A.2.2 - Coordinate and Communicate Local Work with State Staff

Status: 0% Complete

Requirement: A.2.2.1 - Submit Affidavit of Revenues and Expenditures Quarterly

Status: 0% Complete

Requirement: A.2.2.2 - Submit Narrative Reports Quarterly

Status: 0% Complete

Requirement: A.2.2.3 - Submit Aggregate Client Data Quarterly

Status: 0% Complete

Requirement: A.2.2.4 - Participate in Technical Assistance Calls and Webinars

Status: 0% Complete

Requirement: A.2.2.5 - Participate in Site Monitoring Visits as Requested

Status: 0% Complete

Goal: A.3 - Program Evaluation Process

Status: 0% Complete

Strategy: A.3.1 - Develop a Program Assessment Process to Ensure Services are Provided as Proposed

Status: 0% Complete

Requirement: A.3.1.1 - Utilization of continuous quality improvement process

Status: 0% Complete

Requirement: A.3.1.2 - Develop and maintain program policies and procedures that are based on program standards and guidelines

Status: 0% Complete

Grouping B - Data and Information

Goal: B.1 - Describe Program Data Collection Method

Status: 0% Complete

Goal: B.2 - Collect Data Accurately and Report on a Timely Basis

Status: 0% Complete

Strategy: B.2.1 - Collect Minimum Required Data Elements

Status: 0% Complete

Strategy: B.2.2 - Track Participant Information by Identified Categories

Status: 0% Complete

Grouping C - Evaluation

Goal: C.1 - Measure Program Effectiveness

Status: 0% Complete

Describe any changes this quarter: No changes in staffing or service provision for Maternal Child Health services during this quarter.

How do you know your program is effective and meeting identified needs?: We collect data on MCH visits at the time services are completed. The HSHV has not completed the number of HSHV as we have in past years during the first half of this grant year. This may be due to the fact that the current HSHV performs multiple tasks as a front desk clerk for the agency. We will continue to discuss MCH services and accountability standards in upcoming staff meetings. Of the five Healthy start visits completed this quarter, we received five MCH client satisfaction surveys with high marks of being very satisfied by the service. Our agency does serve as the primary resource coordination point in the community and we strive to be aware of other resources that could be of benefit to the clients we serve, as well as the general public. We are looking forward to having the capability to collect the data needed through DAISEY to enhance our accountability and plan to collect the data in KIPHS and import into DAISEY later this year.

Strategy: C.1.1 - Develop Goals, Objectives and Outcome Measures

Status: 0% Complete

Strategy: C.1.2 - Monitor Progress on Meeting Community Needs

Status: 0% Complete

Strategy: C.1.3 - Measure Client Satisfaction

Status: 0% Complete

Grouping D - Interventions to Improve Public Health

Goal: D.1 - Population Served

Status: 0% Complete

Number of Clients receiving MCH funded services this quarter

Prenatal/Pregnant Woman: 3

Post-Partum Woman: 2

Woman (18-44 years): 0

Infant (<1 year): 2

Child (1-11 years): 11

Adolescent (12-22 years): 0

Of the Infants, Children and Adolescents above:

How many have Special Health Care Needs: 0

Setting of Visit

In the Home: 6

In the Clinic: 12

In the Hospital: 0

In Other Community Settings: 0

Strategy: D.1.1 - Number Served

Status: 0% Complete

Strategy: D.1.2 - Service Area

Status: 0% Complete

Strategy: D.1.3 - Services to Undocumented/Uninsured Population

Status: 0% Complete

Goal: D.2 - Provide Services Based on Community Need

Status: 0% Complete

Strategy: D.2.1 - Community Demographic Information

Status: 0% Complete

Strategy: D.2.2 - Identify and Describe Gaps in Services, Disparities, Community Needs to be Targeted

Status: 0% Complete

Strategy: D.2.3 - Community Needs Assessment

Status: 0% Complete

Goal: D.3 - Address Priority Areas found at http://www.kdheks.gov/doc_lib/MaternalAndChildHealthServices.html

Status: 0% Complete

Goal: D.4 - Population Domains and Related Issues

Status: 0% Complete

Strategy: D.4.1 - Women's/Maternal Health

Status: 0% Complete

Describe progress/activities towards reaching program objectives this quarter: The HSHV completed 2 prenatal home visits, 1 prenatal office visit and two postnatal home visits during this quarter. The HSHV gave resource information for health care providers and insurance providers as none of these clients indicated having both insurance and a health care provider. 2 of these individuals had applied for Medicaid and applications were pending and 3 individuals indicated a health care provider but no insurance coverage. 2 of the prenatal women indicated they were currently smoking and did not accept a referral to Quitline or other resource information; the one postpartum individual who indicated that she was smoking did accept a referral to Quitline. Only one of the 3 prenatal women indicated they planned to breastfeed following the birth of their child and one of the postpartum women attempted breastfeeding after the birth of her child and reported problems with latching and switched to formula. The other postpartum mother opted not to breastfeed. We have provided breastfeeding classes, promotional materials and incentives to mothers who breastfeed so the results for breastfeeding for this quarter were disappointing. We have a new breastfeeding class provider that will be offering a one evening two hour course on a quarterly basis in our community, whereas in the past we had a two evening four hour course provided biannually. It will be interesting to see if this change increases participation during the coming year.

Activity: D.4.1.1 - Well Woman Care

Status: 0% Complete

Activity: D.4.1.2 - Low-risk Cesarean Deliveries

Status: 0% Complete

Strategy: D.4.2 - Perinatal/Infant Health

Status: 0% Complete

Describe progress/activities towards reaching program objectives this quarter: During this report period we served a total of 31 infants (less than one year old) for all public health services (primarily immunizations - 30 and child health - 1). 29 caregivers of infants served identified having a medical home with a payor source and primary provider. Referral information for medical providers and insurance options were provided to the two infant caregivers who indicated they did not have a medical home. The Healthy Start Home Visitor also made three prenatal and two postnatal visits during this report period. Our agency does not include immunization services in the MCH grant activities, but we do obtain information regarding medical home on all clients served through basic public health programs.

Activity: D.4.2.2 - Breastfeeding

Status: 0% Complete

Activity: D.4.2.3 - Safe Sleep

Status: 0% Complete

Strategy: D.4.3 - Child Health

Status: 0% Complete

Describe progress/activities towards reaching program objectives this quarter: For Children we served a total of 97 children from age 1 - 11 during this grant period (primarily through immunizations and child health services). 93 of the 97 caregivers of children indicated they had a medical home and resource information regarding medical providers and insurance options were given to the remaining 4 caregivers of children. Of the children in this report period, BMI measurements were recorded for a total of six children between the ages of 1 - 11; three of the children measured at a healthy BME and three measured as overweight by BMI. There were none that measured obese or underweight in this grant period.

Our agency does not include immunization services in the MCH grant activities, but we do obtain information regarding medical home on all clients served through basic public health programs.

Activity: D.4.3.1 - Developmental Screening

Status: 0% Complete

Activity: D.4.3.2 - Injury

Status: 0% Complete

Activity: D.4.3.3 - Physical Activity

Status: 0% Complete

Strategy: D.4.4 - Adolescent Health

Status: 0% Complete

Describe progress/activities towards reaching program objectives this quarter: During this grant period we served a total of 37 adolescents in the age group 12-22 (primarily for immunization services). Of this number 35 clients/caregivers indicated they had a medical home and resource information was given regarding medical providers and insurance options to the remaining two clients/caregivers. We did not measure BMIs for any adolescents during this reporting period. The primary reason is that during flu vaccination season, we basically provide immunization services and do not try to provide additive services for individual seeking immunizations only during flu vaccination season such as taking height/weight due to lack of staff and time.

Our agency does not include immunization services in the MCH grant activities, but we do obtain information regarding medical home on all clients served through basic public health programs.

Activity: D.4.4.1 - Adolescent Well Visits

Status: 0% Complete

Activity: D.4.4.2 - Bullying

Status: 0% Complete

Activity: D.4.4.3 - Injury

Status: 0% Complete

Activity: D.4.4.4 - Physical Activity

Status: 0% Complete

Strategy: D.4.5 - Children with Special Health Care Needs

Status: 0% Complete

Describe progress/activities towards reaching program objectives this quarter: We do not have a mechanism in place to designate children with special health care needs separately from the rest of population we serve. Staff are familiar with resources to assist parents/caregivers with obtaining information and support for special health care needs and do make referrals when appropriate.

Activity: D.4.5.1 - Medical Home

Status: 0% Complete

Activity: D.4.5.2 - Transition

Status: 0% Complete

Strategy: D.4.6 - Cross-cutting/Life Course

Status: 0% Complete

Describe progress/activities towards reaching program objectives this quarter: Employees do provide referral information for oral health, smoking cessation and medical home (adequate insurance coverage) in the course of service provision.

Describe progress/activities towards reaching program objectives this quarter: Employees do provide referral information for oral health, smoking cessation and medical home (adequate insurance coverage) in the course of service provision.

Activity: D.4.6.1 - Oral Health

Status: 0% Complete

Activity: D.4.6.2 - Smoking

Status: 0% Complete

Activity: D.4.6.3 - Adequate Insurance Coverage

Status: 0% Complete

Goal: D.5 - Service Provision

Status: 0% Complete

Goal: D.6 - Education

Status: 0% Complete

Number of instances education was provided to clients this quarter

Alcohol/Substance Abuse: 0

Behavioral Health (other than Postpartum Depression): 0

Breastfeeding: 5

Bullying: 0

Child Development: 0

Car seat safety/installation: 0

Family Violence: 0

Father Involvement: 0

Health Care Coverage/Medicaid: 14

Immunizations: 2

Infant Care: 0

Injury Prevention/Safety: 0

Labor/Childbirth: 1

Lifestyle Risk Factors/Prenatal Exposure: 5

Medical Home: 14

Nutrition: 3

Oral Health: 0

Parenting: 0

Postpartum Care: 0

Postpartum Depression: 0

Preconception/Interconception: 0

Prenatal Care: 1

Preterm Labor: 0

Reproductive Health/Family Planning: 2

Safe Sleep: 0

Smoking Cessation/Second-hand Exposure: 5

State/Local Resources: 5

Suicide Prevention: 0

Teen Pregnancy Prevention: 0

Weight Management: 0

Well Child/Adolescent: 0

Well Woman/Man: 0

If specific # of instances is not known, list topics covered: We currently do not have a system to accurately capture data requested so data reported is only from documented information. Staff address a lot of issues during client visits, but do not have a good system for recording the information provided. The HSHV also provides a lot of written material regarding different issues that is left with the client.

Goal: D.7 - Home Visitation Services

Status: 0% Complete

Goal: D.8 - MCH Referrals

Status: 0% Complete

Number of Referrals this quarter

CRISIS/EMERGENCY SERVICES:

Child Protection: 0

Domestic Violence: 0

Rape/Sexual Assault: 0

Suicide Prevention: 0

EDUCATION SERVICES:

Early Childhood Services (Head Start, PAT): 0

GED/High School Completion: 0

Parenting Education: 0

Prenatal Education: 0

HEALTH SERVICES:

Behavioral Health: 0

Breastfeeding: 3

Cancer Treatment/Diagnosis: 0

Dental: 0

Developmental Assessment/Screening: 0

Diabetes Management: 0

Early Childhood Intervention (Part C, Tiny-K): 0

Follow-up for Abnormal Pap Test: 0

Follow-up to Clinical Breast Exam: 0

Hearing: 0

HIV Treatment: 0

Immunizations: 3

Nutrition, including WIC: 3

Out of County MCH/HSHV: 0

Prenatal: 3

Postpartum: 2

Reproductive Health/Family Planning: 2

Smoking Cessation: 1

Special Health Care Needs: 0

Speech/Language: 0

Vision: 0

Weight Management: 0

Other Medical: 1

SOCIAL SERVICES:

Cash Assistance: 1

Child Care Subsidy: 0

Employment Resources: 0

Food/Food Stamps, excluding WIC: 2

Health Care Coverage: 14

SUPPORT SERVICES/SYSTEMS

Adoption Counseling: 0

Alcohol/Substance Abuse: 0

Child Care: 0

Clothing: 5

Housing Assistance: 1

Legal Assistance: 0

Transportation: 2

Utilities Assistance: 1

Youth Services: 0

List any Referrals this quarter not listed above (include Medical Home): We currently provide a lot of referral services through the agency, but do not systematically track the referrals as they are made except what has been required for CVRs and HSHV.

Goal: D.9 - MCH Challenges/Barriers

Status: 0% Complete

Describe challenges encountered this quarter: Not having a system in place to collect and track the data required for the new grant reporting format.

What steps are you taking to address the identified challenges this quarter?: Evaluating what changes need to be made in our collection system for KIPHS to import data into DAISEY.

Grouping E - Communications and Promotions

Goal: E.1 - Increase Public Awareness of Services and Generate Buy-in

Status: 0% Complete

Outreach activities this quarter

Check all that apply: Community Needs Assessment; Health Fairs; Distribution of Agency Brochures; Immunizations Outreach

Other outreach activities provided this quarter that are not included above: During this quarter we participated in a Women's Fair on October 31, 2015 that served over 200 women and provided information on public health services/topics including agency brochures with MCH information. We continue to maintain an absenteeism reporting system with local schools and have provided a number of outreach flu vaccination clinics in the local community. We assisted both Anthony Medical Center and Harper Hospital District Number 5 in the completion of a community health needs assessment completed in December. We continue to make referrals to local and state assistance programs and other resources available in the community and work to maintain relationships with those resources. We do not have a tracking mechanism in place for the information requested below.

Total Served in all Outreach Activities above:

Prenatal/Pregnant Woman: 0

Post-Partum Woman: 0

Woman (18-44 years): 0

Infant (<1 year): 0

Child (1-11 years): 0

Adolescent (12-22 years): 0

Strategy: E.1.1 - Promote Services to Community

Status: 0% Complete

Strategy: E.1.2 - Planned Outreach Activities

Status: 0% Complete

Strategy: E.1.3 - Target and Recruit Clients

Status: 0% Complete

Grouping F - Partnerships

Goal: F.1 - Develop Key Collaborative Partnerships

Status: 0% Complete

Describe collaborative work with partners including new partnerships to fill gaps in services this quarter: We continue to work with school personnel, child/day care providers and other local agencies in our community. We completed a CHNA with both local hospitals during this reporting period.

Goal: F.2 - Engage Schools and Boards of Education in Service Provision

Status: 0% Complete

Describe any school collaboration this quarter: We have good communication with both school districts and have provided outreach flu clinics for school personnel that have difficulty taking time to get to our office during working hours. We continue to monitor absenteeism rates with all schools in our county. School nursing personnel continue to work with our staff to ensure students are appropriately vaccinated.

Goal: F.3 - Develop Referral Sources for Related Services

Status: 0% Complete

FINANCIAL STATUS REPORT
Aid To Local FY16

1. Grant Name Assigned By Funding Agency	2. Recipient Organization
Public Health Emergency Preparedness 2015-2016	Harper County Health Department

3. Federal Employer Identification Number	4. Recipient Identifying Number	5. Funding/Grant Period		6. Report Period	
486005267	1578	Start: 7/1/2015	End: 6/30/2016	Start: 10/1/2015	End: 12/31/2015

7. Submitted By	8. Date Report Submitted	9. FSR #	10. Final Report
	1/1/0001	1067	No

11. Transactions:	I Previously Reported	II This Period	III Cumulative
a. Total Obligated (Sum of lines b and c)	**N/A**	**N/A**	**$12,084.65**
b. Payer Obligated (Award)	**N/A**	**N/A**	**$10,125.00**
c. Recipient Obligated (Match)	**N/A**	**N/A**	**$1,959.65**
Expenses:			
d. Total Payer Share of Expenses	**$2,531.00**	**$2,531.25**	**$5,062.25**
• Benefits/Grant Expenditure	$332.00	$445.67	$777.67
• Capital Equipment/Grant Expenditure	$0.00	$0.00	$0.00
• Contract Personnel/Grant Expenditure	$0.00	$0.00	$0.00
• Other/Grant Expenditure	$0.00	$788.31	$788.31
• Salary/Grant Expenditure	$2,199.00	$1,224.82	$3,423.82
• Supplies/Grant Expenditure	$0.00	$0.00	$0.00
• Travel/Grant Expenditure	$0.00	$72.45	$72.45
e. Total Recipient Share of Expenses	**$1,358.26**	**$2,286.61**	**$3,644.87**
• Benefits/Local core support, funding match	$469.00	$0.00	$469.00
• Benefits/Maintenance of Effort	$0.00	$0.00	$0.00
• Benefits/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Benefits/Revenue Expenditure	$0.00	$0.00	$0.00
• Capital Equipment/Local core support, funding match	$0.00	$0.00	$0.00
• Capital Equipment/Maintenance of Effort	$0.00	$0.00	$0.00
• Capital Equipment/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Capital Equipment/Revenue Expenditure	$0.00	$0.00	$0.00
• Contract Personnel/Local core support, funding match	$0.00	$0.00	$0.00
• Contract Personnel/Maintenance of Effort	$0.00	$0.00	$0.00
• Contract Personnel/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Contract Personnel/Revenue Expenditure	$0.00	$0.00	$0.00
• Other/Local core support, funding match	$800.70	$2,286.61	$3,087.31
• Other/Maintenance of Effort	$0.00	$0.00	$0.00
• Other/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Other/Revenue Expenditure	$0.00	$0.00	$0.00
• Salary/Local core support, funding match	$0.00	$0.00	$0.00
• Salary/Maintenance of Effort	$0.00	$0.00	$0.00
• Salary/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Salary/Revenue Expenditure	$0.00	$0.00	$0.00
• Supplies/Local core support, funding match	$0.00	$0.00	$0.00
• Supplies/Maintenance of Effort	$0.00	$0.00	$0.00
• Supplies/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Supplies/Revenue Expenditure	$0.00	$0.00	$0.00
• Travel/Local core support, funding match	$88.56	$0.00	$88.56
• Travel/Maintenance of Effort	$0.00	$0.00	$0.00
• Travel/Non cash: In-Kind Contribution	$0.00	$0.00	$0.00
• Travel/Revenue Expenditure	$0.00	$0.00	$0.00

f. Unliquidated Total Obligated (Line a minus lines d and e)	**N/A**	**N/A**	**$3,377.53**
g. Unliquidated Payer Obligated (Line b minus line d)	**N/A**	**N/A**	**$5,062.75**
h. Unliquidated Recipient Obligated (Line c minus line e)	**N/A**	**N/A**	**($1,685.22)**
Income:			
i. Total Income From Payer	**$0.00**	**$0.00**	**$0.00**
j. Total Income From Recipient	**$0.00**	**$0.00**	**$0.00**
• Fees/Medicaid/KanCare	$0.00	$0.00	$0.00
• Fees/Other Public Health Insurance	$0.00	$0.00	$0.00
• Fees/Patient/Client Fees	$0.00	$0.00	$0.00
• Fees/Private Health Insurance	$0.00	$0.00	$0.00
• Fees/SCHIP	$0.00	$0.00	$0.00

2015-2016 Public Health Emergency Preparedness
Local Health Department Work Plan

WORK PLAN PROGRESS REPORTS WILL BE SUBMITTED TO PREPAREDNESS@KDHEKS.GOV

Progress Period (Check One)	Contact Information
☐ Period 1 covers July 1, 2015 – September 30, 2015 and is due October 15, 2015.	County: Harper
☒ Period 2 covers October 1, 2015 – December 31, 2015 and is due January 15, 2016.	Contact Person: Sherry Vierthaler
☐ Period 3 covers January 1, 2016 – March 31, 2016 and is due April 15, 2016.	Contact E-mail: harperhealth@harpercountyks.gov
☐ Period 4 covers April 1, 2016 – June 30, 2016 and is due July 15, 2016.	Contact Phone: 620-842-5132

	Description of Tasks	Progress
1	A local health department representative will attend healthcare coalition meetings at least quarterly. The Regional Public Health Preparedness Coordinator may attend in the local health department's place as its designee. *(Capability 1: Community Preparedness)*	Quarter 1 Attendee: Virginia Downing, Regional Coordinator Quarter 2 Attendee: Virginia Downing, Regional Coordinator Quarter 3 Attendee: _____ Quarter 4 Attendee: _____
2	Provide input for the HPP Program Measures, the Healthcare Coalition Developmental Assessment, and submit information for the Joint Performance Measures during healthcare coalition meetings. *(Capability 1: Community Preparedness)*	Date Input Provided:
3	Participate in at least one **annual** exercise at the regional- or county-level as defined below: ***Budget Period*** ***Capability*** ***Type*** *BP 4 (2015-2016): Capability 6 or 11 and/or 12 Tabletop, Functional, or Full-Scale* *BP 5 (2016-2017): Capability 5 or 7 and/or 14 Tabletop, Functional, or Full-Scale* • Serving in an observer role does not meet the participation requirement. • CRI counties (health department and hospitals) must participate in **the full-scale exercise** once during the five-year grant cycle. • PHEP and HPP grantees (not within a CRI) must participate in a **functional exercise** once during the five-year grant cycle. The functional exercise should be planned and conducted in collaboration with hospitals and other community partners. • Exercise activity should be aligned with the HSEEP process. • The functional and full-scale exercise must demonstrate objectives in: o Capability 3 – Emergency Operations Coordination o Capability 6 – Information Sharing o Capability 10 – Medical Surge o Continuity of Healthcare Operations ▪ Capability 1 – Function 3 ▪ Capability 2 – Function 2 o All exercises must address the needs of at-risk individuals To the extent possible, local health departments are encouraged to conduct and plan jointly with additional health and medical stakeholders/supporting organizations, emergency management, and other partners to meet community exercise requirements. To complete this requirement, an After Action Report/Improvement Plan (AAR/IP) for the exercise must be uploaded as an attachment via Catalyst following the exercise. The BP 4 (2015-2016) exercise must be completed by May 13, 2016. Real events may count for exercise credit as long as they are approved by KDHE prior to submission of an AAR/IP.	Capability(ies) Exercised:_____ Type: ☐Tabletop ☒Functional ☐Full-Scale ☐Real Event Date of Exercise/Event: 2/11/2016 Date of AAR/IP: Functional Exercise scheduled for 2/11/2016
4	A local health department representative will assure local ESF 8 or LEPC planning meetings are held at least twice per year to work with health and medical partners in order to strengthen community preparedness and response activities to include Fatality Management, Mass Care, and Responder Safety & Health. A. Develop or review and update Community Mass Fatality plans and submit to assigned Hospital and Public Health Regional Coordinators and KDHE by June 30, 2016. *(Capability 5: Fatality Management)* B. Explore and identify training needs and gaps for mass fatality incidents. Local health departments will submit documentation of needs and gaps to KDHE for future planning and also provide a copy to Hospital and Public Health Regional Coordinators for information	Date Mass Fatality Section Submitted in Bold/Catalyst: _____ Date Gaps/Needs Submitted to KDHE & RCs:

	sharing purposes by June 30, 2016. *(Capability 5: Fatality Management)* C. Review and discuss the Mass Care Health and Medical Toolbox. Local health departments will submit feedback to their assigned Public Health Regional Coordinator and copy the assigned Regional Hospital Coordinator by May 1, 2016. *(Capability 7: Mass Care)*	_____ Date Mass Care Resource Guide Reviewed & Discussed: _____ Date Feedback Shared with RC: _____
5	A. Participate in CHEMPACK and CESSL training either in person at Healthcare Coalition meetings or online via KS-TRAIN. Healthcare coalition agendas and sign in sheets will be submitted to KDHE by the Healthcare Coalition coordinators. *(Capability 14: Responder Safety & Health)* B. Review ESF 8 Annex to ensure information on how to request and access CHEMPACK and CESSL are included. Updated ESF 8 Annex should be uploaded to Bold by June 30, 2016. *(Capability 14: Responder Safety & Health)*	Date Training Completed: _____ Date ESF 8 Annex Submitted in Bold: 12/15/2015
6	Local health department will continue to: A. Participate in periodic Regional Public Health Preparedness meetings. *(Capability 1: Community Preparedness)* B. Keep contact information on KS-HAN up to date. *(Capability 6: Information Sharing)* C. Respond to quarterly KS-HAN drills. *(Capability 6: Information Sharing) 11/19/2015 & 12/7/2015* D. Assure 24/7 epidemiological contact information is kept current and is shared with KDHE. *(Capability 13: Public Health Surveillance & Epidemiological Investigation)* E. Assure designated staff complete ICS 100, 200, 300, 400, 700 and 800b classes per ICS training requirements. *(Capability 1: Community Preparedness; Capability 3: Emergency Operations Coordination)* F. Ensure that priority communication services are available in an emergency, including maintaining an always-on high-speed internet connection *(Capability 3: Emergency Operations Coordination)* G. Have available signed shared resource agreements. *(Capability 1: Community Preparedness)* H. Maintain a website where information can be posted and accessed by members of the public. *(Capability 4: Emergency Public Information & Communication; Cross-Cutting)* I. Assure that annual fit testing for PPE for local health department staff is completed per KDHE guidance and in compliance with the revised OSHA respirator standard, 29 CFR 1910.134, adopted April 8, 1998. *(Capability 14: Responder Safety & Health)* J. Retain copies of expenditure reports, including invoices for each capital equipment purchase, for a period of at least three years. Capital equipment includes purchases of $5,000 and above and/or with a lifespan of greater than a year. *(Administrative)* K. Take or renew packaging and shipping certification class, available on KS-TRAIN, every two years [*Packaging and Shipping Division 6.2 Materials 2015*, Course #1058172 & *KHEL: Preparing Clinical Specimens Related to Chemical or Biological Exposure Using Evidence Control Measures*, Course #1050287]. *(Capability 12: Public Health Laboratory Testing)* L. Maintain an inventory control system for tracking capital equipment and electronic devices. *(Administrative)* M. Document through job descriptions and employee time and attendance records that all staff members paid with preparedness funds are performing activities related to preparedness. *(Administrative)* N. Annually review and submit any changes or updates to the Mass Dispensing SOG. If no updates are warranted, submit a "No Update" letter to KDHE. *(Capability 8: Medical Countermeasure Dispensing & 9: Medical Materiel Management and Distribution)*	a. Dates of Meetings: 7/10/2015;8/7/2015;9/4/2015;10/2/2015;11/6/2015;12/11/2015 b. Date of Last KS-HAN Update: 12/15/2015 c. Responded to Q1 Drill: ☒ Yes ☐ No Responded to Q2 Drill: ☒ Yes ☐ No Responded to Q3 Drill: ☐ Yes ☐ No Responded to Q4 Drill: ☐ Yes ☐ No d. 24/7 Epi Contact Up to Date with KDHE? ☒ Yes ☐ No e. ICS Trainings Completed? ☒ Yes ☐ No f. Priority comms. services available? ☒ Yes ☐ No g. Signed resource agreements available? ☒ Yes ☐ No h. Public website maintained? ☒ Yes ☐ No i. Annual fit testing completed? ☐ Yes ☒ No j. Reports and invoices available? ☒ Yes ☐ No k. Certified in packaging & shipping? ☒ Yes ☐ No l. Inventory control system available? ☒ Yes ☐ No

		m. PDs/time/attendance records available? ☒ Yes ☐ No n. Mass Dispensing SOG up to date or "No Update" letter submitted? ☐ Yes ☒ No

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
PUBLIC HEALTH EMERGENCY PREPAREDNESS - EBOLA SUPPLEMENT
April 1, 2015 - September 30, 2016

AFFIDAVIT OF EXPENDITURES

Agency Name and Phone Number: Harper county Health Department 620-842-5132

Reporting Period: Period 3 (October 1, 2015 - December 31, 2015)

EXPENDITURE CLASSIFICATION	Local Match Amount	Line Totals
Salaries (including fringe benefits) - List name and percentage/hours paid out of Preparedness Funds		
S. Vierthaler, .02 FTE		$ 346.54
Salary Total	$ -	$ 346.54
Travel (mileage, hotel, tolls, parking, per diem)		
Travel Total	$ -	$ -
Supplies (list office and medical supplies separately)		
Supplies Total	$ -	$ -
Equipment (list total cost of each item)		
Equipment Total	$ -	$ -
Contractual		
Contractual Total	$ -	$ -
Other (list each item/cost)		
Other Total	$ -	$ -
Affidavit Total	$ -	$ 346.54

The local agency administrator below certifies that this report is in agreement with the agency official accounting records and that individual employee time reports are maintained documenting time charged to this program and that any match claimed, was not provided with Federal funding.

Administrator: Sherry Vierthaler, Admin. Date: 1/6/2016

Public Health Emergency Preparedness
Local Health Department Ebola Supplemental Work Plan

WORK PLANS SHOULD BE SUBMITTED TO PREPAREDNESS@KDHEKS.GOV

Progress Period (Check One)	Contact Information
☐ Period 1 covers April 1, 2015 – June 30, 2015 and is due July 15, 2015. ☐ Period 2 covers July 1, 2015 – September 30, 2015 and is due October 15, 2015. ☒ Period 3 covers October 1, 2015 – December 31, 2015 and is due January 15, 2016. ☐ Period 4 covers January 1, 2015 – March 31, 2015 and is due April 15, 2016. ☐ Period 5 covers April 1, 2016 – June 30, 2016 and is due July 15, 2016. ☐ Period 6 covers July 1, 2016 – September 30, 2016 and is due October 15, 2016.	County: Harper County Contact Person: Sherry Vierthaler Contact E-mail: harperhealth@harpercountyks.gov Contact Phone: 620-842-5132

	Description of Tasks	Progress
1	Local health departments will conduct a tabletop exercise to test their Ebola preparedness and response capabilities. *(Note: If an Ebola exercise already took place during the 2014-2015 grant period, that exercise will count toward this requirement as long as an AAR/IP showing substantial effort can be produced.) (Capability 1: Community Preparedness)* *Plan to participate in 19 County Region TTX on January 20, 2016.*	Date of Exercise: Planning after 7/1/2016 _____ Date AAR/IP was submitted to KDHE: _____
2	Purchase personal protective equipment (PPE) for localized use. Local health departments should purchase PPE based upon CDC guidelines. *(Capability 14: Responder Safety & Health)*	Date PPE was added to CRMCS: _____
3	Local health department clinicians or those who will have direct patient contact will participate in KDHE hosted regional PPE trainings. TEEX Course PER-320 – Personal Protective Measures for Biological Events will also count for work plan credit. *(Capability 14: Responder Safety & Health)*	Training certificate or sign in sheet? Kim Bauer, RN; Jennilee Wedman, RN; Sherry Vierthaler, Admin. attended 7/15/2015 at Pratt. Certificates on file.
4	Local health departments will participate in KDHE provided refresher training on proper cleaning and disinfecting procedures related to disease control and prevention. Clinicians and/or any health department staff that would be responsible for providing direct patient care should take this training. The training will be offered on KS-TRAIN, however, there is not a Course # at this time. *(Capability 14: Responder Safety & Health)*	Training certificate or sign in sheet? Waiting on course to become available.
5	Local health departments will participate in KDHE hosted regional Ebola Risk Communications trainings. Local health departments should send their Administrator and/or PIO to these trainings. Other trainings will not be accepted in lieu of this KDHE Ebola Risk Communications Training. These trainings will take place in the Spring of 2016. *(Capability 4: Emergency Public Information & Warning/Information Sharing)*	Training certificate or sign in sheet? Waiting on course to become available.
6	If a local health department hires a new staff member that will be engaged in patient monitoring, the staff member must undergo the active monitoring training module for EpiTrax (KS-TRAIN Course #1054335). *(Capability 13: Public Health Surveillance and Epidemiological Investigation)*	Name(s) of Employee(s) trained and date of training, as applicable No new employees engaged in patient monitoring this report period.

Ebola (EVD) Table Top Exercise

Sponsored By The

South Central Kansas Health Care Coalition

Wednesday, January 20th, 2016
10:00 a.m. to 2:00 p.m.
Sedgwick County Extension Center
7001 W. 21st North, Wichita, Ks 67205

Register on KS-TRAIN Course # 1060046

Target Audience:
Hospital, Public Health, Emergency Management, EMS, Behavioral Health, Fatality Management, Long Term Care & Other ESF 8 Response Partners

County Team Participation Is Strongly Encouraged!

Participants Are Encouraged To Bring KDHE's EVD Plan & Their County's Community Disease Containment Plan

A CHEMPACK & CESSL Presentation Will Take Place At 10:00 Before The Start Of The Exercise

Exercise Objectives:

- Discuss how agencies will coordinate and implement emergency response activities to manage patients diagnosed with EVD.
- Discuss how agencies will coordinate with local and state agencies to share and disseminate EVD incident related information.
- Identify the factors that affect the ability to deliver non-pharmaceutical interventions– focusing on disease containment & surveillance.
- Discuss how agencies will protect employees during monitoring and providing care of EVD patients.

Exercise working out of your county EOC

To Recover after your community is hit by a tornado

All responder agencies will be kept busy during this exercise; Hospital, Public Health, Emergency Management, EMS, Fire, Law Enforcement, Public Works, VOADS, Animal Health.

SAVE THE DATES

Barber County .....February 11

Harper County.....February 11

Edwards County.....February 11

Pratt County.....February 12

Kiowa County.....February 12

Kingman County.....February 12

Disaster Recovery Exercise

Functional Exercise working out of an EOC

County Wide for all Responders

All county ESF8 partners invited to attend

HSEEP Compliant Meets All Grant Guidance

FOR MORE INFORMATION CONTACT:
VIRGINIA DOWNING
COATS1960@
GMAIL.COM

Harper County Health Department/Harper County Home Health Agency
Advisory Board Meeting Agenda
Tuesday, January 26; Noon to 1:00 p.m.
HCHD Conference Room

I. Introductions
II. Review January 26, 2016 Agenda
III. Review October 27, 2015 Minutes
IV. Guest – Angela Bentley – Harper County Community Hope
V. 2016 Community Health Needs Assessment
VI. 2016 Public Health/In-Home/Home Health Stats
VII. Current Business:
    a. Public Health Program updates
        i. WIC
            1. NSP for BF plan to involve other businesses to develop lactation policies for the workplace.
        ii. Family Planning
            1. Grant requiring additional data entry on clients – planning to import data as opposed to dual entry.
        iii. Immunizations
            1. Immunizations updates
        iv. Maternal Child Health/Healthy Start Home Visitor Service
            1. Planning to complete this grant through June 30, 2016 but do not plan to apply for 2016-2017 due to increased grant requirements.
        v. Disease Investigation/Animal Bites
            1. Epi Trax system issues
        vi. Public Health Emergency Preparedness
            1. Completed regional Ebola TTX at WMC on 1/20/2016
            2. Functional exercise planned for Thursday, February 11, 2016 from 10am – 2 pm at the Westview Conference Room in Harper – please attend if you are able to do so.
            3. Emergency Manager update
        vii. Basic PH services – continue blood pressure clinics & basic services in office settings in all three communities.
        viii. Environmental Services Update
            1. Environmental Service Technician update
            2. Health Department collects fees for services and makes deposits
    b. In-Home Service Program Updates - No longer providing IIID service
        i. HCBS
        ii. SCA
        iii. IIIB
        iv. Private Pay
    c. Home Health Program Updates
        i. Quality Assurance activities
        ii. Physical Therapy

d. Purpose of Advisory Board
    i. Review agency by-laws
    ii. Advice on professional issues
    iii. Evaluation of professional service program
    iv. Assistance in maintaining liaison with other community groups
e. Personnel updates
    i. Staffing updates
f. Budget information

VIII. Schedule next meeting: Tuesday, April 27, 2016 at noon.

Harper County LEPC ANNUAL Meeting
Local Emergency Planning Committee – LEPC
Wednesday, January 27, 2016
3:00 – 4:00 p.m.
Harper County Health Department Conference Room
Agenda

I. **Introductions**
II. **Review January 27, 2016 Agenda**
III. **Review October 28, 2015 Minutes**
IV. **Election of Officers for 2016** (Chair & Vice Chair) as per by-laws
V. **Ebola PHEP Grant** - review PPE needs - Sherry
VI. **Update TEPW/Review TEPW progress**
   a. **Active Shooter training/exercise with USD 361** – Doug Murphy
   b. **EOC Activation** -EM
   c. **County Functional Exercise** - scheduled for 2/11/2016 10am – 2 pm – Sherry/Virginia
VII. **South Central Kansas Health Care Coalition activity update** – Virginia
VIII. **Regional Homeland Security Council Update** - EM
IX. **EOP/COOP/HMP (Emergency Operations Plan/Continuity of Operations Plan/Hazard Mitigation Planning)**
   a. **Review ESF roles and responsibilities** –
      i. **ESF – 8** – Review ESF8 Disaster Recovery TTX Exercise conducted March 18, 2015: Review AAR - HCHD/HH#5/AMC – most actions have been addressed during prior LEPC meetings for the 3/18/2015 TTX Exercise. A new AAR will be developed following the 2/11/2016 functional exercise.
      ii. ESF – 8 Ebola TTX on Wednesday, January 20, 2016 - review
      iii. **2015-2016 PHEP Grant Requirements**
         1. Review MFM SOG & training needs and gaps (BOLD)
         2. Review Mass Care Resource Guide
         3. Review Responder Health & Safety (CHEMPACK/CESSL training and how to request/access for ESF8 -BOLD)
      iv. **ESF** updates – EM
      v. Agency COOP plan reviews for Kansas Planner Website
   b. **Hazard Mitigation Plan & EOP** current & approved– EM
   c. **Review Harper County EOP assignments & plan** – EM
X. **County Wide Action Areas**
   a. **911 Communications Update** – Trish Glover
   b. **Increase Private Sector/Volunteer Involvement in LEPC** –EM
   c. **2016 Community Health Needs Assessment**
XI. **Set Next Meeting** Wednesday, April 27, 2016 at 3:00 pm
XII. **Adjourn**

Southcentral Kansas Coalition for Public Health

Serving Barber, Comanche, Edwards, Harper, Kingman, Kiowa, and Pratt Counties

Working Together for Healthy People and Strong Communities

712 S. Main
Pratt, KS 67124
Phone 620-672-4135
Fax 620-672-1129
Email pchd@health.kscoxmail.com

President: Debra McGraw
Secretary: Sherry Houston
Women's Health Coordinator: Cindy Chrisman-Smith
WIC Coordinator: Mitzi Hesser

Executive Board Meeting Agenda
Friday, February 5, 2016; 9:00 am – 11:00 am
Pratt City Fire Department, 201 S. Jackson, Pratt, KS 67124

9:00 am	Call meeting to order; review /approve minutes from 10/2/2015 meeting; review approve 2/5/2016 agenda. Election of Executive Board officers for 2016.	Steve Garten
9:30 – 9:45	FP report	Cindy
9:45– 10:00	WIC report	Mitzi
10:00-10:15	PHEP	Virginia
10:15 – 10:30	County reports	All
10:30 – 11:00	Breakout between Health Departments and Commissioners to network on current issues. Other board members welcome to join either group for discussion or leave if they need to.	

Executive Board Meetings for 2016:

Friday, **February 5**, 2016 (Pratt)
Friday, **May 6**, 2016 (Barber)
Friday, **July 1**, 2016 (Pratt)
Friday, **October 7**, 2016 (Pratt)