



Welcome from the State Health Commissioner



State Health Commissioner
Gregory Larkin, M.D.

thank each health care professional, local health department, public health professional, as well as each partner and stakeholder of this agency for contributing to the many successes we have achieved together.

Tobacco control efforts are a prime example of some of the good work that has recently been done. The past two years have seen the passage of a statewide smoke free air law, the lowest adult smoking rate in State history and the further integration of tobacco prevention and cessation efforts in the state. In our continued efforts to educate Hoosiers about the dangers of tobacco use and secondhand smoke, we have completed another successful year of the Quit Now Indiana Contest. Check out the story and profiles of your fellow Hoosiers who have proven that quitting tobacco can pay off in more ways than one on page 6.

We can also be proud of Indiana's demonstrated leadership in public health information technology. Indiana recently implemented an electronic death registry system which has vastly improved the accuracy of death certificates and the speed at which they are obtained. In addition, the creation of MyVaxIndiana has improved Hoosiers' access to immunization records. To learn how many Hoosiers have used MyVaxIndiana to date, look on page 3. And, thanks to increased school immunization

As 2012 comes to a close, I am reminded of the challenges and successes of not only this year, but the past two years since I have had the honor of serving as Indiana State Health Commissioner.

As you may be aware, I will be leaving the Indiana State Department of Health in January to move on to another venture. However, I would like to take this opportunity to personally

requirements, Indiana students are now some of the best protected in the nation from infectious diseases.

Improved access to health information continues to be a priority. One way we at the State Health Department have tried to make this happen is by taking a practical look at our website and redesigning it to make it more user-friendly for Hoosiers. For more information about that process, check out the story on page 6.

The creation of the Division of Trauma and Injury Prevention here at the State Health Department and the subsequent statewide trauma listening tour spurred important conversations about trauma care in our state, marking the first step to achieving a statewide trauma system. For more on Trauma Care, see the article on page 2.

Together, we have successfully contained outbreaks of several infectious diseases, supported disaster victims, published significant state health improvement plans, and made great strides toward public health accreditation, among many other accomplishments. Though the challenges of public health will persist and there is much work to be done, it is with great pride and humbleness that I reflect upon the achievements which have positively impacted so many Hoosiers.

Lastly, I would like to thank the dedicated public health professionals here at the State Health Department who every day put their hearts and souls into achieving our mission of promoting and providing essential public health services to protect Indiana communities.

Regards,

Gregory Larkin, MD, FAAFP, FACOEM
State Health Commissioner

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Agency social media links

www.socialmedia.isdh.in.gov



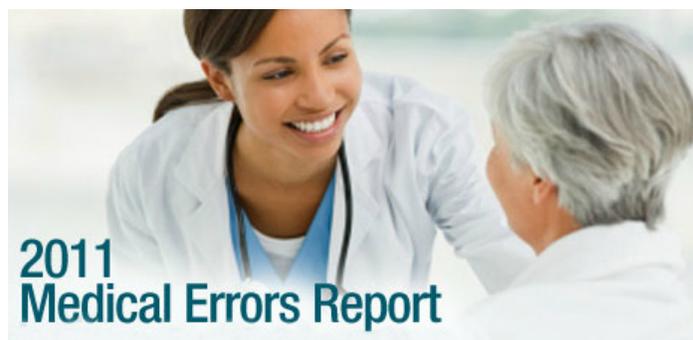
Surgery Errors Decrease in Indiana

Reports of retention of a foreign object after surgery decreased in the past year, according to the 2011 Medical Errors Report released by the State Health Department. Seventeen incidents of retention of a foreign object following surgery were reported in 2011, down from 33 incidents in 2010. The 17 incidents were the fewest number of foreign object retentions in the six years of the Medical Errors Report.

Stage three or four pressure ulcers acquired after admission continue to be the most reported error. Pressure ulcers, also known as bedsores, have been the most reported incident in five of the six years the Medical Errors Report has been compiled. In 2011, 41 incidents of pressure ulcers were reported, up from 34 in 2010 and the highest number of incidents in the six years of reporting.

The annual report is based on the National Quality Forum's 28 Serious Adverse Events. A total of 291 hospitals, ambulatory surgery centers, abortion clinics and birthing centers were surveyed.

A total of 100 incidents were reported in 2011, down from 107 reported in 2010. The most reported incidents in 2011 were:



- 41 stage 3 or 4 pressure ulcers acquired after admission to the hospital
- 18 surgeries performed on the wrong body part (15 in hospitals, 3 in ambulatory surgery centers)
- 17 incidents of a foreign objects retained in a patient after surgery (15 in hospitals, 2 in ambulatory surgery centers)
- 12 falls resulting in a death or serious disability
- 3 incidents of death or serious disability associated with a medication error

For more information and to read the 2011 Medical Errors Report, visit www.StateHealth.in.gov.

Statewide Trauma Tour Shows Need for Trauma System

State health officials set out on a statewide Trauma Listening Tour from June to September to build on existing knowledge of trauma care in Indiana and to strengthen relationships that could serve to further improve it. Dr. Larkin and members of the Trauma and Injury Prevention Division invited medical professionals, emergency responders, members of the public and other stakeholders to participate in informal discussions about trauma care in each of the state's 10 public health preparedness districts.

Traumatic injuries are the No. 1 killer of Hoosiers under age 45 with more than 32,000 Hoosiers hospitalized each year due to injuries. The burden of trauma is particularly felt in rural areas of the state where lifesaving trauma care may not be available. Indiana currently has eight Trauma Care Centers verified by the American College of Surgeons. They are in Indianapolis (3), Fort Wayne (2), South Bend (1) and Evansville (2).

The tour provided health officials more information regarding challenges and opportunities with achieving a statewide trauma

system. Some lessons learned during the tour include:

- Although Indiana has many elements of a trauma system, such as injury prevention experts, professional EMS providers, trauma centers, hospital emergency departments and rehabilitation providers, creating a statewide trauma system will take some time.
- Indiana needs more trauma centers. Only 58 percent of the population lives within 45 minutes of one of Indiana's eight trauma centers.
- Best practices suggest combining the EMS program, currently at the Indiana Department of Homeland Security, with the trauma program at the State Health Department, as other states have done.
- The Indiana Trauma Registry, which records incidents of trauma around the state, can be maximized to drive and evaluate performance improvement, as well as guide injury prevention/education efforts.



Part of the crowd at the District 6 summer trauma listening tour event in Muncie.

Learn more about the Trauma Tour at www.in.gov/isdh/19537.htm.



State Health Department Administrative Updates



Art Logsdon became the Assistant Commissioner of Health and Human Services in October. He has a long history with the State Health Department, beginning in 1979. His previous positions include serving as Communications Director, Deputy Director of the Office of Legal Affairs and as Assistant Commissioner of the Health

Care Quality and Regulatory Commission. After eight years as President and CEO of the Indiana Health Care Association and several years consulting in the area of long-term care, Art returned to the State Health Department in 2011 as the Director of Trauma and Injury Prevention. Art graduated from Indiana University with his J.D. and Master's degree in Public Administration. He received his Bachelor of Science from Butler University.



Brian Carnes became the Director of Trauma and Injury Prevention in October. He previously held the position of Director of Legislative Affairs. Prior to joining the State Health Department six years ago, he was the Deputy Communications Director at the Family and Social Services Administration. Brian graduated from Ball

State University with Bachelor of Science degree in both Political Science and Public Relations and holds a Master's degree in Public Administration from Indiana State University.



Scott Zarazee became the Director of Legislative Affairs in October. He previously held the position of Deputy Director of Legislative Affairs for the past four years. Prior to joining the State Health Department, he served as Director of Constituent Services in Governor Daniels office. He also worked as Deputy Legislative Director

at the Family and Social Services Administration. Scott graduated from DePauw University with a Bachelor of Arts degree in Political Science.

Farewell to . . .



Ellen Whitt, former Assistant Commissioner, Health and Human Services, left the State Health Department in October to pursue opportunities outside of state government.



Meenakshi Garg, M.D., former Medical Director, Health and Human Services Commission, left the State Health Department in November to serve as the Health Officer for St. Mary's County, Maryland.



EMPOWERING COMMUNITIES. ADVANCING HOOSIER HEALTH.

Check out this FREE data resource for current health related data for Indiana counties!

www.IndianaIndicators.org



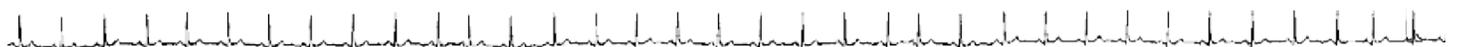
As of December 12, 2012,

2,894 individual records have been accessed

and 16,969 PINs issued by providers!



Learn how to access your vaccination records at www.MyVaxIndiana.in.gov





Spotlight on...

Office of Primary Care and Rural Health

By Ann Alley, Director, Office of Primary Care and Rural Health

The Office of Primary Care and Rural Health (OPCRH) is responsible for paving the way for rural health entities and individuals to receive the federal health care subsidies they rely on to operate. This is done by defining the State's Medically Underserved Areas and Populations and Health Professional Shortage Areas. OPCRH uses statistics and mapping to make a standardized, weighted argument that includes: the percent of population at 100 percent of the federal poverty level, infant mortality, population over 65 years, and physician-to-population ratio. The findings are then sent to the Office of Designation for review and approval.

Indiana has 97 designated Medically Underserved Areas and Populations. Health Professional Shortage Areas are structured a little differently. They are also based on professional-to-population ratios, but are further defined according to primary care, mental health or dental health. Indiana has 104 Primary Care, 57 Mental Health and 46 Dental Health Professional Shortage Areas. If an area cannot be defined in terms of its health professional scarcity, then it may be defined according to the percent of low income residents. Being designated as a Health Professional Shortage Area allows direct federal funding and/or subsidies for area providers.



The State Health Department Office of Primary Care and Rural Health supports community health centers in Indiana.

In addition to setting the stage for federal assistance, OPCRH also distributes state funding to 46 community health centers serving 500,000 people, of whom 80 to 90 percent lack health insurance. OPCRH has also focused on the community health worker and has formed a Community Health Worker Coalition. Read the article below for more information about the community health worker and recent survey results.

Flu Vaccine Finder Find flu clinics near you
Everyone six months of age and older needs a flu vaccine.

Have you received your flu vaccine yet?

If not, use the flu vaccine finder to find a location near you at <http://1.usa.gov/TDQiAo>.

Community Health Workers Play a Vital Role in Health Care

Results from the first statewide assessment regarding community health workers (CHW) were released in October by the State Health Department and the Indiana Community Health Worker Coalition.

A community health worker is a "frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served," as defined by the American Public Health Association. This relationship enables the CHW to serve in a unique position as a link, liaison and intermediary between health services and people in the community.

The statewide assessment focused on the needs of CHWs, their employers, providers and third-party payers. The results will be used to help define a clear path of action toward fully integrating CHWs into the health care delivery system.

Highlights from the survey results include:

- More than half of survey respondents have worked as a CHW for more than five years with almost one third having more than a decade of experience.
- CHWs and employers alike rated health, education, promotion, assuring access to care, as well as informal counseling and social support, as CHWs' most important roles.
- 80 percent of employer respondents support the notion of CHW certification.

In an effort to help reduce the economic burden of chronic diseases and improve the quality of health care in Indiana, the State Health Department has been working to integrate CHWs into the health care delivery system, as they can help facilitate chronic illness prevention, management and treatment.

For more information on CHWs and highlights from the survey, visit www.bit.ly/QLNMtM.



Ask THE EXPERT



with Pam Pontones
 State Epidemiologist
 Indiana State Department of Health

The State Health Department has been working with the Food and Drug Administration (FDA) and the Centers for Disease Control and Prevention on investigating a multistate outbreak of fungal meningitis, spinal infections and joint infections among patients who received contaminated steroid injections manufactured at a compounding pharmacy in Massachusetts.

What is fungal meningitis?

Fungal meningitis occurs when the protective membranes covering the brain and spinal cord are infected with a fungus.

The cases of fungal meningitis associated with this outbreak were caused by injection of contaminated steroid into the epidural or paraspinal areas. Symptoms associated with this outbreak include headache, fever, stiff neck, sensitivity to light, dizziness and upset stomach/vomiting.

What other infections besides meningitis are related to this outbreak?

An increasing number of people are being diagnosed with infections in the area of the spine or joint where the injections were given. Symptoms may include increasing pain or pressure, swelling or redness and are diagnosed by MRI.

Are other injectable medications, like vaccines, safe?

The fungal meningitis outbreak from contaminated steroid medication is completely unrelated to vaccines. Vaccines available in the U.S. are held to the highest quality standards and each batch (called “lot”) of vaccine must be approved by the FDA before it is available to the public. U.S. vaccine manufacturing facilities are inspected to ensure that the highest standards are met and that no contamination of vaccines occurs.

For more information about the outbreak, visit www.cdc.gov/hai/outbreaks/meningitis.html.

2012 Palisades Power Plant Exercise

By Lee Christenson, ESF-8 Coordinator

Just north of the Indiana state line in Covert, Michigan is the Palisades Nuclear Power Plant, providing power to millions of homes, thousands of businesses, and hundreds of critical transportation, health and municipal systems throughout Michigan. The safety of this and other power plants and the emergency-response community’s ability to respond to an incident involving power plants has become a major priority since the infamous 1979 Three Mile Island incident in Pennsylvania.

In October, federal, state and local emergency management and response officials from Michigan and Indiana participated in a preparedness exercise where a mock nuclear incident was to have occurred at the Palisades Plant. Officials carried out existing emergency response efforts with the goal of evaluating emergency response procedures and then indentifying areas for improvement to ensure the public’s safety in response to a real-world release of radiological material from the facility.

Three Indiana Counties (LaPorte, St. Joseph and Elkhart) are within a 50-mile radius of the Palisades Plant, placing them in a response area called the Ingestion Emergency Planning Zone. Jurisdictions within this zone must plan for the possibility that radiological materials carried by a plume from the plant may settle onto their food and water sources, potentially posing a health risk. This potential hazard is referred to as the

Jane Smith, Chemist and Cpt. JD Cash, Science Officer for the 53rd CST of the Indiana National Guard, prepare a prescreened sample for gamma analysis during the exercise.



Ingestion Pathway. Indiana’s part of the exercise was testing the State Ingestion Pathway Plan.

In this type of incident, the State Health Department is responsible for coordinating a sample collection of food items such as fruits, vegetables and milk and then analyzing these samples in the State Laboratory. (The Indiana State Police are responsible for transporting the samples.) Based on sample results, State Health Department evaluates the data, identifies appropriate protective actions, makes decisions regarding the need for further sampling and supports the State in public messaging.

Many lessons were learned during the Palisades exercise and Indiana continues to make strides in emergency preparedness.



State Health Department Website is Easier to Use

Now, it's easier than ever to find information about outbreaks, immunizations, birth certificates, long term care facilities, and more on the State Health Department website. Over the Thanksgiving Holiday weekend, the State Health Department unveiled a completely overhauled home page, neatly laid out in a user-friendly format. The website redesign was chosen as part of the Lean Six Sigma Quality Improvement Initiative the agency is participating in to improve efficiency and effectiveness in both operational efforts and public health outcomes.

Highlights include:

- Improved left bar navigation
- Information grouped into user category (health care professional, consumer, local health department)
- A to Z index

The newly designed page is the result of several months of research by the project team and the Office of Public Affairs. Websites of other Indiana State agencies and other state health de-



Preston Black, director, legal affairs, at his computer. Staff were surveyed to get feedback for the webpage redesign.

partments were evaluated, internal and external users of the website were surveyed and web analytics were reviewed. The findings and feedback were used to determine what information should be included on the home page and how to best organize it.

Check out the new website at www.StateHealth.in.gov!

Quitting Literally Pays Off for Hoosiers

(L-R) Quit Now Indiana Contest winners Mary Stackhouse, Carla Reel and Sean Terrell.



Three former smokers have a little extra spending money this holiday season after being randomly selected as winners of the 2012 Quit Now Indiana Contest. Mary Stackhouse of Kokomo received \$2,500, Sean Terrell of Jasonville received \$1,500, and Carla Reel of Lafayette was awarded \$1,000 for staying tobacco-free for 31 days during the month of October. All three winners participated in the Quit Now Indiana Contest designed to encourage Hoosiers using tobacco products to make an attempt to quit.

The quit contest is an annual promotion from the Tobacco Prevention and Cessation Commission at the State Health Department and INShape Indiana as part of the tobacco preven-

tion program for the state. The prizes were donated by St. Vincent Health and MDWise Hoosier Alliance.

The three winners received cash for quitting, but the biggest rewards they receive will be improved health, as well as the money they will save over time. According to the latest Surgeon General's Report on smoking (2010), there is biological evidence that suggests each cigarette is doing immediate damage and the sooner the smoker quits the better.

About 10,000 Hoosiers die each year from tobacco use and exposure to secondhand smoke. For every smoking-related death, another 20 Hoosiers live with a smoking-related disease. Those who stop smoking dramatically reduce their risk for heart attacks, asthma attacks, cancers and other diseases.

Research shows that about 80 percent of Hoosier smokers want to quit, but they may not know where to get the help needed. As part of this year's contest, more than 4,600 eligible Hoosiers registered and over 120 employers made the commitment to help their employees quit tobacco use.

Hoosiers can access free resources, including a personal Quit Coach to help a person quit successfully. Call the Indiana Tobacco Quitline at 1-800-QUIT-NOW or visit www.quitnowindiana.com.





For the past nine years, the State Health Department has partnered with the Indiana Family and Social Services Administration, the Indiana Minority Health Coalition and other community organizations to present the Statewide HIV Awareness Program. The event was held this year on November 8 at Crispus Attucks Medical Magnet School. The event's theme, "It's your turn to prevent HIV/AIDS: Individual Call to Action," focused on HIV prevention and early intervention.

The event was free and open to the public, and was widely attended by students from several area high schools, including Warren Central, Shortridge and Herron.

Jamar Rogers, finalist on the television show *The Voice*, was the keynote speaker. While on *The Voice*, Rogers announced he was HIV positive. At the event, Rogers talked about the importance of self respect, self love and having a purpose in one's life. He also encouraged attendees to know their self worth and inspired them to take control of their lives.



Keynote speaker Jamar Rogers talks to the audience about self respect and taking control of their lives. It's time to love yourself," said Rogers. "You will not be the new faces of HIV."

"This event gives youth in our community the opportunity to see the real faces of HIV," said Lynn Smith, Bureau Chief of Critical Populations for the Indiana Division of Mental Health and Addiction, Family and Social Services Administration.

According to the Centers for Disease Control and Prevention, every nine-and-a-half minutes, another person becomes infected with HIV in the United States. Youths, ages 13 to 29, accounted for 39 percent of all new HIV infections in 2009. More than 10,000 Hoosiers are currently living with HIV/AIDS, a pandemic that has ended the lives of almost 6,000 Hoosiers since 1981.

Other performers at the event included HIV activist and poet Devin T. Robinson, and singers Nicole Michelle and Mariano Lantigua. "Healthy decisions last a lifetime," said Smith. "If the event empowered one youth and prevented one HIV infection, it was a success."

2012 America's Health Rankings

Indiana is ranked 41st overall in the nation in health according to the 2012 America's Health Rankings report. This report is conducted annually and is published by the United Health Foundation, the American Public Health Association and Partnership for Prevention. It considers several factors, such as environment, behavior and statistics, in determining the state-specific rankings from one to 50 across various health benchmarks. Major national challenges noted in the report include obesity, smoking, children living in poverty, lack of health insurance coverage and diabetes.



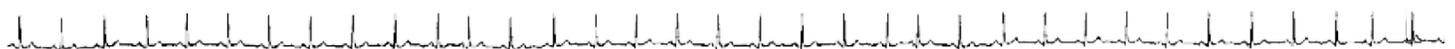
Vermont was ranked the healthiest state and Louisiana and Mississippi tied for last place. Indiana was ranked 37th overall in 2011.

Indiana's strengths include low prevalence of binge drinking

(ranked 19th), low rate of uninsured population (ranked 14th) and low geographic disparity (ranked 11th). Indiana's challenges and rankings include high rate of smoking (ranked 44th), obesity (ranked 42nd) and sedentary lifestyle (ranked 42nd).

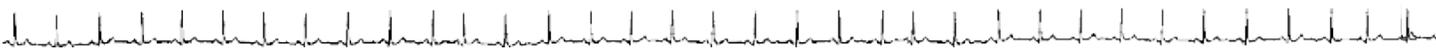
Indiana will work to expand on its strengths and address its challenges. Last year, the State Health Department released the five year *State Health Improvement Plan*, a blueprint for improving the health of Hoosiers. This plan focuses on several health priorities such as assuring food safety and reducing health-care associated infection. It also focuses on reducing the prevalence of obesity and decreasing tobacco use.

For more information about America's Health Rankings, visit www.americashealthrankings.org.





*Farewell Dr. Larkin...
Thank you for your service!*





Awards

Meenakshi Garg, M.D., former Medical Director, Health and Human Services Commission, State Health Department, received the State Health Commissioner's Award in October for her vision and leadership on integrating community health workers in the primary care setting.

Columbus Regional Health/Reach Healthy Communities received the State Health Commissioner Award in November for their successful collaboration in the Communities Putting Prevention to Work Initiative.



(L-R) Dr. Garg and Dr. Larkin.

January

9 State Health Department Executive Board meeting, tbarrett@isdh.in.gov

February

8 Indiana State Trauma Care Committee, tbarrett@isdh.in.gov

15 Sexual Violence Primary Prevention Council meeting, kajones@isdh.in.gov

March

13 State Health Department Executive Board meeting, tbarrett@isdh.in.gov

13 Cardiovascular Health and Diabetes Coalition of Indiana meeting, cadicoordinator@gmail.com

Public Health Happenings

(For more information about a specific event, please use the specific email address listed).

For more information on these and other state events, visit the State of Indiana events calendar at <http://www.in.gov/core/calendar.html>



Indiana State Department of Health

The Indiana State Department of Health promotes and provides essential public health services to protect Indiana communities.

Public Health Matters is a free publication that is published electronically every quarter by the State Health Department Office of Public Affairs. For questions, to submit an article or topic, contact Amanda Turney at aturney@isdh.in.gov.

To subscribe or unsubscribe to the newsletter, visit <http://bit.ly/publichealthmatters>. For more information about the State Health Department, visit www.statehealth.in.gov.

