Master of Public Health Applied Practice Experience

by

Caitlin Jindrich

MPH Candidate

submitted in partial fulfillment of the requirements for the degree

MASTER OF PUBLIC HEALTH

Graduate Committee:

Jennifer Hanson, PhD, RD, CSSD, LD Kevin Sauer, PhD, RDN, LD Sandra Procter, PhD, RD, LD

Applied Practical Experience Site:

Fort Riley Department of Public Health January 15, 2020 – March 13, 2020

Applied Practical Experience Preceptor:

Ben McKenna, MPH

KANSAS STATE UNIVERSITY Manhattan, Kansas

2021

Table of Contents

| Chapter 1 - Portfolio Products | 2 |
|---|--------|
| Table 1.1 Summary of Portfolio Products | 2 |
| Table 1.2 Portfolio Products and Competency Addressed | 3 |
| Chapter 2 - Competencies | 4 |
| Table 2.1 Summary of MPH Foundational Competencies | 6 |
| Table 2.2 MPH Foundational Competencies Course Mapping | 6 |
| Chapter 3 - Information Needed if Completing a Thesis Only | 8 |
| Table 3.1 Summary of MPH Emphasis Area Competencies | 8 |
| Table 3.2 Summary of Competencies Met Through Thesis | 8 |
| Appendix A - DPH 2019 Annual Report | 9 |
| Appendix B - WIC bulletin board content | 10 |
| Appendix C - Article on COVID-19 | 23 |
| Appendix D - Decision flowchart for clinics within IACH system with patients susp | pected |
| as COVID-19 person's under investigation (PUI). | 25 |

Chapter 1 - Portfolio Products

I completed my Applied Practice Experience (APE) at Fort Riley's Department of Public Health (DPH); whose mission, "is to promote health and wellness, and to prevent disease and injury of Soldiers and military retirees, their families, and Army Civilian employees at Fort Riley through workplace and community health." Fort Riley was the first military installation to earn Public Health Accreditation Board (PHAB) accreditation. During the course of my APE, I created the first Annual Report for DPH, three months' worth of bulletin board content and recipes for the Riley County and Irwin Army Community Hospital (IACH) Women, Infants, and Children (WIC) offices, wrote an article on COVID-19 for the purpose of being published in Fort Riley's newspaper and to be sent as a secure message to Fort Riley healthcare beneficiaries, and a decision flowchart for medical clinics throughout IACH's system on where/how to treat persons under investigation (PUI).

Table 1.1 Summary of Portfolio Products

| Portfolio Product | | Description | | |
|-------------------|--|--|--|--|
| 1 | 2019 Annual Report | Reviewed annual reports from four civilian public health agencies and created an annual report for 2019 for the Fort Riley Department of Public health. This was attained by meeting with and obtaining annual data from each section chief and requesting and receiving feedback for edits to the final report. | | |
| | Bulletin board with recipes for WIC | Created bulletin board content and standardized | | |
| 2 | Clients | three recipes for WIC clients utilizing foods included in the WIC packages. | | |
| 3 | Wrote newspaper article on COVID-19 | Attended numerous COVID planning meetings for Fort Riley with IACH Leadership and Fort Riley Command Team and wrote newspaper article for Fort Riley community regarding COVID-19. | | |
| | Decision flowchart for clinics within | Reviewed updated CDC, KDHE and Army policy | | |
| _ | IACH system with patients suspected | on screening for COVID-19. Drew on | | |
| 4 | as COVID-19 person under investigation (PUI) | knowledge obtained from IACH and DPH meetings attended to outline approved course of action to complete decision flowchart. | | |

Table 1.2 Portfolio Products and Competency Addressed

| Portfolio Product | | Number and Competency Addressed | | | |
|-------------------|--|---------------------------------|--|--|--|
| 1 | 5 | | Compare the organization, structure and function of health care, public health, and regulatory systems across national and international settings. | | |
| | | 21 | Perform effectively on interprofessional teams. | | |
| 2 | Bulletin Board and Recipes for WIC Clients | 9 | Design a population-based policy, program, project or intervention. | | |
| 3 | Newspaper article on COVID-19 for Fort Riley community | 18 | Select communication strategies for different audiences and sectors. | | |
| 4 | Decision flowchart for clinics within IACH system with patients suspected as COVID-19 PUI. | 22 | Apply systems thinking tools to a public health issue. | | |

Chapter 2 - Competencies

Competency five: "Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings." In order to create a cohesive and comprehensive annual report for Fort Riley's DPH, I reviewed multiple annual reports from other 2018 Public Health Accreditation Board (PHAB) accredited health departments across the United States. I took note of the types of programs highlighted and accomplishments featured. I rotated between the different sections within DPH (environmental health, industrial health, occupational health, public health nursing, Army Wellness Center, the hearing program, and WIC) to gain an understanding of each section's mission and programs. I scheduled a meeting with each DPH section chief to discuss the types of program information I was looking for to include in the annual report. Referring the section chiefs to the annual reports I had previously reviewed helped each section identify which programs and numbers the Fort Riley public would benefit from seeing in the annual report. I reviewed the content of civilian annual reports and the content included in the annual report I created with both the Health Director, LTC Salinas, and the General Program Manager, Ben McKenna, to ensure that important information was not omitted.

Competency nine: "Design a population-based policy, program, project or intervention." The Fort Riley WIC program is staffed and managed by the Riley County WIC office. After spending time with the WIC registered dietitians and the WIC supervisor, Jane Freyenberger, it was identified it would be beneficial to expand the posting of monthly WIC recipes from the Riley County office to the IACH offices as well. I created three months of bulletin board content to include recipe title, coordinating pictures and standardized recipes. Each recipe contained multiple ingredients included in the WIC food package, were nutrient dense, simple to make and likely to be accepted by young children.

Competency eighteen: "Select communication strategies for different audiences and sectors." The Fort Riley public affairs office wrote an article about the novel corona virus to be published in the post's newspaper. DPH's Emergency Preparedness officer and APRN, Wayne Darsow, requested I re-write the article to contain updated information to include current World Health Organization (WHO) and Centers for Disease Control and Prevention (CDC) information on spread and case totals and to better address primary topics of concerns we had heard voiced within the Army community.

Competency twenty-one: "Perform effectively on interprofessional teams." I performed effectively on interprofessional teams throughout the duration of my internship at DPH. I coordinated meeting times and data collection with multiple department heads and employees - Soldiers and civilian employees alike. I met with both the Health Director, LTC Salinas, and the General Program Manager, Ben McKenna, to review content included in the annual report before finalization. I maintained communication with each department throughout my APE to see if there were any valuable or beneficial experiences for me to participate in or observe that day. This included industrial health technicians, the epidemiologist, Public Health Nursing providers, occupational health providers, environmental health technician, and the water lab director. Additionally, I coordinated with the WIC supervisor on completion of additional forms to shadow with her office, and to schedule my days with her team.

CovID-19 was rapidly spreading, and Soldiers were returning to Fort Riley from overseas assignments, leadership was planning for and establishing protocols. With clinics throughout the post, and limited negative pressure rooms and testing capabilities, clear guidance was needed for the numerous individuals who may find themselves speaking with a concerned patient. I drew on information gained from various COVID-19 planning meetings, discussions with Public Health Nursing providers, and current WHO and CDC guidelines and definitions to create a decision flow chart for how to handle potential persons under investigation (PUI). There were various aspects to take into consideration – where does this person typically receive care; does the person meet criteria for potential infection; where are the trained staff and supplies to conduct COVID-19 tests; how do we minimize the number of people exposed to the PUI.

Table 2.1 Summary of MPH Foundational Competencies

| Number and Competency | | Description | |
|-----------------------|---|---|--|
| 5 | Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings. | I created the first annual report for the Department of Public Health. | |
| 9 | Design a population-based policy, program, project or intervention. | I created a bulletin board content for the Fort Riley and Riley County WIC offices. | |
| 18 | Select communication strategies for different audiences and sectors | I wrote an article about COVID-19 to be published where Fort Riley community members could read it. I created a bulletin board content for the Fort Riley and Riley County WIC offices. | |
| 21 | Perform effectively on interprofessional teams. | I scheduled and held meetings with numerous DPH employees and took part in numerous meetings with Fort Riley leadership and local health departments. | |
| 22 | Apply systems thinking tools to a public health issue | I created a decision flowchart for Fort Riley personnel to determine the course of action when receiving calls from individuals concerned about COVID-19 exposure or infection. | |

Table 2.2 MPH Foundational Competencies Course Mapping

| 22 Public Health Foundational Competencies Course Mapping | MPH 701 | MPH 720 | MPH 754 | MPH 802 | MPH 818 |
|--|--|------------|------------|------------|------------|
| Evidence-based Approaches to Public | Evidence-based Approaches to Public Health | | | | |
| Apply epidemiological methods to the breadth of settings and situations in public health practice | х | | х | | |
| Select quantitative and qualitative data collection methods appropriate for a given public health context | х | х | х | | |
| 3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate | х | x | х | | |
| 4. Interpret results of data analysis for public health research, policy or practice | х | | х | | |

| Public Health and Health Care Systems | | | | | |
|--|------------------------------|------------|---------|--------|-----|
| 5. Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings | | х | | | |
| 6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels | | | | | х |
| Planning and Management to Promote | e Health | 1 | | | |
| 7. Assess population needs, assets and capacities that affect communities' health | | х | | х | |
| Apply awareness of cultural values and practices to the design or implementation of public health policies or programs | | | | | х |
| 9. Design a population-based policy, program, project or intervention | | | х | | |
| 10. Explain basic principles and tools of budget and resource management | | х | х | | |
| 11. Select methods to evaluate public health programs | х | х | х | | |
| Policy in Public Health | | | | | |
| 12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence | | х | х | х | |
| 13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes | | х | | х | х |
| 14. Advocate for political, social or economic policies and programs that will improve health in diverse populations | | х | | | х |
| 15. Evaluate policies for their impact on public health and health equity | | х | | Х | |
| Leadership | | | | | |
| 16. Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making | | х | | | х |
| Apply negotiation and mediation skills to address organizational or community challenges | | х | | | |
| Communication | | | | | |
| 18. Select communication strategies for different audiences and sectors | DM | IP 815, FI | NDH 880 | or KIN | 796 |
| 19. Communicate audience-appropriate public health content, both in writing and through oral presentation | DMP 815, FNDH 880 or KIN 796 | | | | |
| 20. Describe the importance of cultural competence in communicating public health content | | х | | | х |
| Interprofessional Practice | | | | | |
| 21. Perform effectively on interprofessional teams | | х | | | х |
| Systems Thinking | | | | | |
| 22. Apply systems thinking tools to a public health issue | | | х | х | |
| | | | | | |

Chapter 3 - Information Needed if Completing a Thesis Only

Table 3.1 Summary of MPH Emphasis Area Competencies

| MPH Emphasis Area: Nutrition | | | | | |
|------------------------------|---|---|--|--|--|
| Nui | mber and Competency | Description | | | |
| 1 | Information literacy of public health nutrition | Inform public health practice through analysis of evidence-based policy, systems, and environmental change. | | | |
| 2 | Compare and relate research into practice | Examine chronic disease surveillance, policy, program planning and evaluation, and program management, in the context of public health nutrition. | | | |
| 3 | Population-based health administration | Critically examine population-based nutrition programs. | | | |
| 4 | Analysis of human nutrition principles | Examine epidemiological concepts of human nutrition in order to improve population health and reduce disease risk. | | | |
| 5 | Analysis of nutrition epidemiology | Describe criteria for validity in nutritional epidemiological methodology. | | | |

Table 3.2 Summary of Competencies Met Through Thesis

| Nun | nber and Competency | Description |
|-----|--|--|
| 2 | Select quantitative and qualitative data collection methods appropriate for a given public health context. | Development of survey and menu data collection methods. |
| 3 | Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate. | Descriptive statistics Thematic analysis Student's t-tests (P ≤ .05) Confidence intervals (95%) |
| 4 | Interpret results of data analysis for public health research, policy or practice. | Discussion section of thesis. |
| 15 | Evaluate policies for their impact on public health and health equity. | Discussion section of thesis. |
| 19 | Communicate audience-appropriate public health content, both in writing and through oral presentation. | Writing thesis, thesis defense. Poster sessions with recorded audio for ASN and FNCE. |

Appendix A - DPH 2019 Annual Report

FORT RILEY DEPARTMENT OF PUBLIC HEALTH

2019 ANNUAL REPORT



Department of Public Health

Health Director -LTC Peggy S. Salinas, ARNP, FNP-C

NCOIC -SSG Jamie Mosier. BS

Environmental Health

Chief - CPT Robert Sprinkle

Army Wellness Center

Chief - Kendra Seat, MS

Industrial Hygiene

Chief - Eric Coates, MBA

Occupational Health

Chief - Jenn. Avantagiato, APRN

Women, Infants & Children (WIC)

Chief - Jane Freyenberger, MS, RD

Public Health Nursing

Chief - LTC Timothy Whoolery, RN

Hearing Conservation

Chief - CPT Maggie Schad Au.D.

Add IACH crest and/or 1st ID crest here

DIRECTOR'S STATEMENT

I'm eager to share with you the 2019 Annual Report for the Department of Public Health Fort Riley, KS. We are accredited through the Public Health Accreditation Board (PHAB) agency serving 57,000 residents on Fort Riley.

During the 2019 year we had many accomplishments. Our department completed our annual PHAB report maintaining accreditation. We were successful in designing and developing a Sexually Transmitted Disease Program focused on prevention, treatment and in-depth counseling. We had a highly successful flu campaign immunizing over 1500 this past flu season. Our rabies program, to include education, was revamped. This has proven to key in on prevention and prevent unnecessary prophylactic treatments. The department has been very diligent in car seat installation and education of the community, which has ensured the proper use of car seats protecting children from injury.

Our close partnership with stakeholders and the public facilitated the ability to prevent disease, promote health and protect the community.

I hope you enjoy our annual report and encourage you to visit our facility located at the Caldwell Clinic, Fort Riley, KS.

Sincerely,

PEGGY S. SALINAS APRN, FNP-C

LTC, AN

Director, Department of Public Health



Army Wellness Center

4845

7481

10827

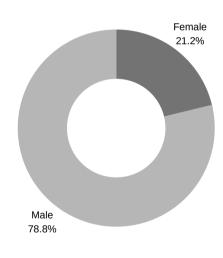
Clients served

Total Visits

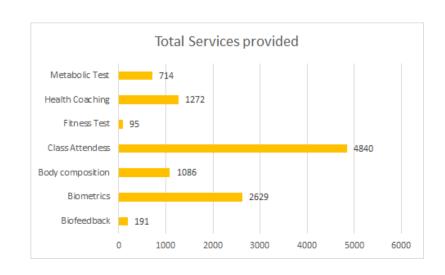
Total services provided

Client demographics:





Type of Service by numbers:





ENVIRONMENTAL

HEALTH





What is evaluated:

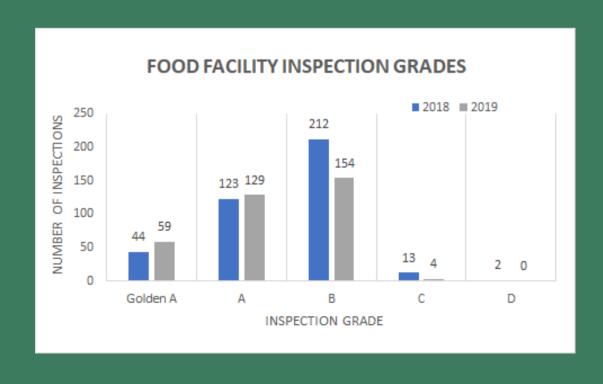
- pH
- Chlorine levels
- Bacterial monitoring

Where the samples taken from?

 Sites throughout the Fort Riley water system, on a weekly basis.

Why:

- To ensure the water system provides clean, safe water for drinking and household use
- To ensure the health and safety of the Fort Riley Community



Environmental Health

INSPECTIONS COMPLETED:

Food: 425

CDC: 107

Detention cells: 12

Barber: 16

Gym: 40

Other Public Facilities (pools, etc.): 101

Hazardous Waste: 148

Regulated Medical Waste: 148

Water Trailers: 98

100%

OF INSPECTION
GOALS MET

669

PERSONNEL TRAINED

163

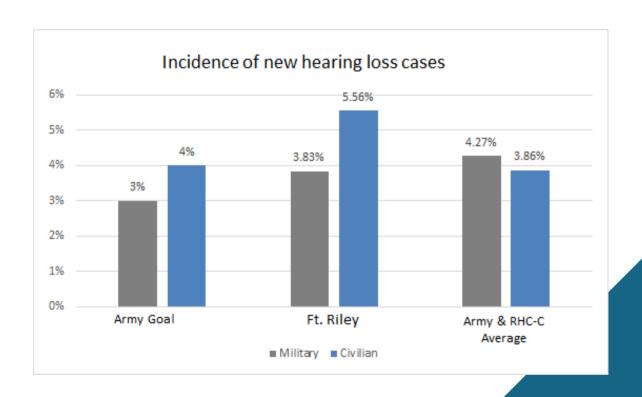
VECTOR SURVEILLANCE

Hearing Conservation

Hearing conservation supported the re-deployment and deployment of 3 BDEs and ensured hearing readiness exceeded the 90% standard.

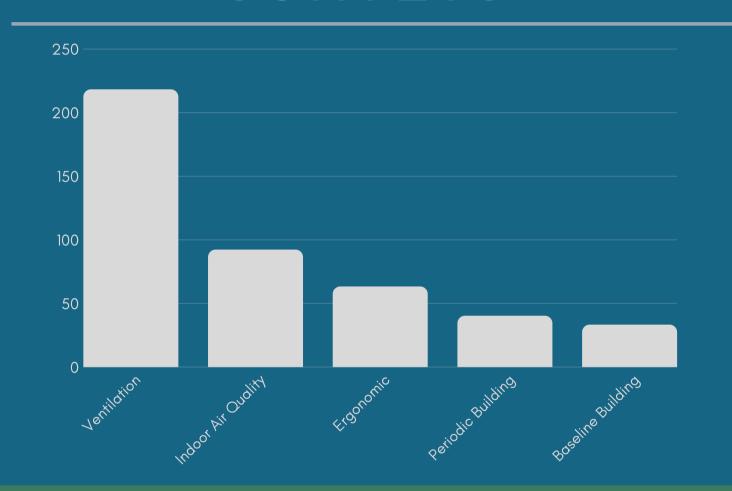
17,379 Hearing Tests • Military: 16,825 Completed

• Civilian: 554



INDUSTRIAL HYGIENE

SURVEYS



358

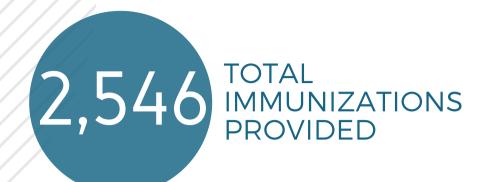
FIT TESTING FOR RESPIRATOR 27

EXPOSURE ASSESSMENTS + AREA SAMPLING 14

ASBESTOS REPORTS 3

ELEVATED BLOOD LEAD LEVELS

OCCUPATIONAL HEALTH









PUBLIC HEALTH NURSING



601

STI testing walk-ins

64

CYS inspections completed

4

Pediatric Blood

Lead Level6 yo or younger with a lead
level of 5+ mg/dL

3

Initial FCC inspections completed

PUBLIC HEALTH NURSING

2018-2019 Flu Program

- 21,200 flu vaccines given
- 30 Influenza Vaccination
 Program Events Attended

Units Supported

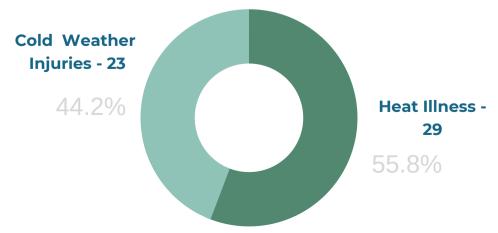
- MEDDAC
- VETCOM
- DENTAC
- Garrison HQ & HHC
 - Retirees
- Riley County Health
 Department

- Child Youth Services
 - WTB
- Fort Riley Community

Centers

- CID
- Department of Emergency Services

Climate Injuries



WIC

Women, Infants & Children

\$30,219.04

WIC dollars spent at the Fort Riley commissary

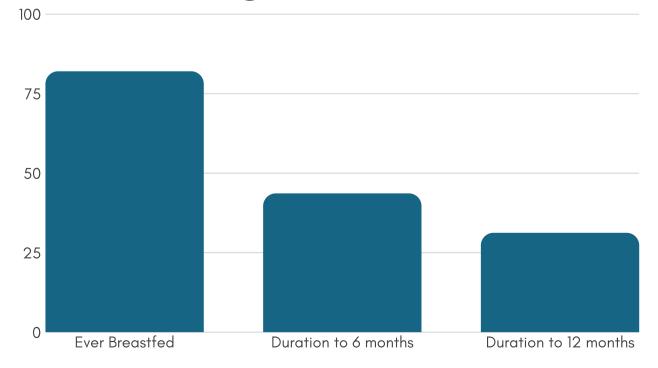
1724

More clients participated in WIC in 2019 than in 2018

1165

Average number of monthly WIC participants in 2019

Breastfeeding Duration of WIC clients



Appendix B - WIC bulletin board content

Tofu or Chicken Stir-fry with Peanut Sauce

Yield: Total Time:

WIC - Texas

Ingredients:

Stir-fry:

- 1 cup brown rice, uncooked
- 1 tablespoon vegetable oil
- 1 pound extra firm tofu (or chicken), cut into cubes
- 3 cups mixed vegetables, cut into bite sized pieces (such as 1 cup broccoli, 1 cup bell peppers, 1/2 cup mushrooms, and 1/2 cup green onions)
- ½ cup peanuts, chopped (optional)
- ½ cup peanut sauce (recipe below)

Peanut Sauce:

- 2 tablespoons creamy peanut butter
- 1 ½ tablespoons low-sodium soy sauce
- 1 tablespoon brown sugar
- 1 tablespoon fresh lime juice
- 1 teaspoon fresh garlic and/or ginger, minced
- ½ cup water

Directions:

- 1. Prepare rice according to package directions.
- 2. Prepare the peanut sauce: Place peanut butter, soy sauce, brown sugar, lime juice, garlic, ginger, and water in a microwave safe bowl. Cover, microwave 30 to 60 seconds, and then whisk until combined.
- 3. Cube chicken or tofu
- 4. In a large skillet, heat oil at medium heat.
- 5. Add chicken or tofu and sauté until golden (approximately 6 to 8 minutes for chicken, 10-12 minutes for tofu).
- 6. Add vegetables to pan and sauté an additional 3 to 4 minutes.
- 7. Add peanut sauce, stir, and cook another 3 to 4 minutes.
- 8. Serve over prepared rice and top with chopped peanuts, if desired.

https://texaswic.org/recipes/vegetable-stir-fry-tofu-or-chicken



Peanut

Sauce

Stir-fry:

Two

Ways





Lentil Sloppy Joes

Yield: 4 servings Total Time: 35 mins

Minimalist Baker

Ingredients:

If using dry lentils:

- 2 cups water
- 1 cup green or brown lentils, well rinsed

Sloppy Joes

- 2 Tbsp olive or vegetable oil
- ½ medium yellow or white onion, minced
- 2 cloves minced garlic (~1 Tbsp)
- ½ medium red or green bell pepper, diced
- Salt and pepper to taste
- 1-2 Tbsp brown sugar
- 1-2 Tbsp Worcestershire sauce
- 1-2 tsp chili powder (+ more to taste)
- 1 tsp ground cumin (plus more to taste)
- 1 pinch smoked or regular paprika (optional)

Directions:

- To a small saucepan, add liquid (I used 1 cup water, 1 cup vegetable broth for added flavor // amount as original recipe is written // adjust if altering batch size) and rinsed lentils and heat over medium-high heat.
- Bring to a low boil, then reduce heat to a simmer and cook uncovered for about 18 minutes, or until tender. The water should have a constant simmer (not boil). Drain off any excess liquid and set aside.
- Alternate to dry lentils is 2 cans lentils or black beans.
- In the meantime, heat a large skillet over medium heat. Once hot, add oil, onion, garlic, and bell pepper. Season with a pinch each salt and pepper and stir to combine.
- Sautè for 4-5 minutes, stirring frequently, or until the peppers and onions are tender and slightly browned.
- Next add tomato sauce, coconut sugar, worcestershire sauce, chili powder, cumin, and paprika (optional). Stir to combine.
- Once the lentils are cooked, add them to the skillet as well, and stir to combine.
- Continue cooking the mixture over medium-low heat until completely warmed through and thick, stirring occasionally about 5-10 minutes.



Recipe continued on back

- Taste and adjust flavor as needed, adding more chili powder and/or cumin for smokiness, salt for saltiness, coconut sugar for sweetness, or worcestershire for depth of flavor.
- Serve the mixture on toasted buns with sliced onion. Best when fresh, though leftover sloppy joe mixture will keep in the refrigerator up to 4-5 days, or in the freezer for 1 month. Reheat in the microwave, or on the stovetop, adding water or vegetable broth if the mixture has dried out.

Freezer Meal Alert!

Store in air-tight container and freeze for up to 1 month.

https://minimalistbaker.com/vegan-sloppy-joes/

Lentil

Sloppy

Joes







Italian bean burgers

Yield: 4 burgers/6 sliders Total time: 20 mins

Recipe from: Nurture and Nourish

Ingredients:

- 1 can cannellini beans drained, rinsed
- 1/4 cup breadcrumbs
- 3 tablespoons <u>Milled Flaxseed</u>
- 3 tablespoons grated parmesan or mozzarella
- 2 eggs
- 1 tablespoon garlic powder
- 1/2 teaspoon <u>Black Pepper</u>
- 2 tablespoons onion minced
- 1 tablespoon Italian seasoning
- 2 tablespoons olive oil



Directions:

- Mash beans or place in a food processor and pulse until beans are mashed but not pureed.
- In a large bowl combine the beans, breadcrumbs, flaxseed, parmesan, eggs, and seasonings.
- Shape mixture into 6 small sliders or 4 large burgers and place in a large skillet with olive oil. Cook over medium-high heat flipping occasionally. Cook for about 5-7 minutes.
- Burgers can be topped with cheese, spaghetti sauce or pesto, fresh tomato, spinach, onions, caramelized onions, etc.

Freezer Meal Alert!

These burgers can be frozen after cooking. Just wrap each one individually with plastic wrap and place in a plastic freezer bag. When ready to use pull out of the freezer a couple of hours before and reheat in the microwave or on the stovetop over medium heat.

https://nurtureandnourishnutrition.com/recipe/italian-bean-burger-sliders/

Half-veggie burgers

Yield: 8 burgers

Good and Cheap Cookbook PDF

Ingredients:

- 3 cups cooked lentils
- 1 cup finely chopped bell pepper, or other vegetable of choice
- 1 lb ground meat of your choice
- 1 egg (optional)
- Salt and pepper to taste
- 8 buns



Directions:

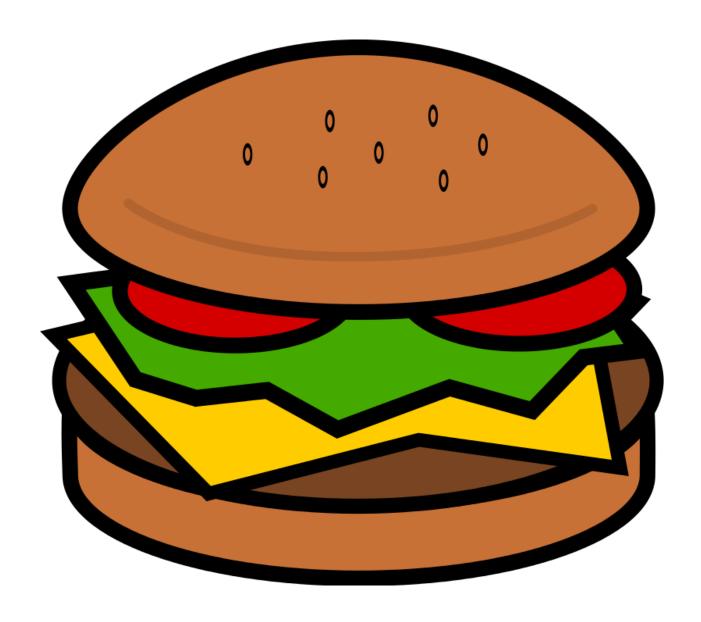
- You can use almost any vegetable to make these burger patties, except lettuce and other greens. If you pick a hard vegetable like potato, squash, or eggplant, you'll need to cook it first.
- Roughly mash the lentils. Make sure the vegetables are either small to begin with (like corn or peas) or finely chopped so that they cook evenly. I went for a bell pepper this time.
- Mix the lentils, veggies, and meat with your hands in a large bowl. If you're going to barbecue, add an egg to keep them from crumbling. Season with salt and pepper. Form into 8 patties.
- Grill the patties either on the barbecue or a pan on the stovetop over medium-high heat. Sear until dark brown on one side, then flip 'em and do the same on the other side. If you want cheeseburgers, lay cheese on the patties after flipping them once.
- Serve on toasted buns with your favorite condiments and fresh vegetables. Burgers are a great place to be adventurous!
- If you won't eat all the burgers at once, wrap the raw patties in plastic. Refrigerate for a few days or freeze for up to 2 weeks.

https://cookbooks.leannebrown.com/good-and-cheap.pdf

Burgers:

Two

Ways



Appendix C - Article on COVID-19

COVID-19 - 'CALL AHEAD, STOP THE SPREAD'

The new strain of coronavirus is being taken seriously by health officials across the globe.

Fort Riley Public Health Emergency Officer, Wayne Darsow, NP and Public Health Nurse MAJ Kimberly Moore, RN have been working tirelessly to ensure Fort Riley is prepared to support individuals with suspected exposure. Working with IACH and Garrison Command, Darsow and Moore have established policies and procedures to align with up-to-date CDC guidance to ensure public safety.

Coronavirus refers to a family of viruses that are viral zoonotic infections- where the virus originates in animals and spreads to humans. The novel [new] strain coronavirus, of most recent concern, causes COVID-19. COVID-19 is spread via droplets, similar to other viruses like the flu and common cold. It is anticipated that within the next year vaccines and medications for treatment will be available to the public.

"We are urging people to take the same precautions we take when protecting ourselves from influenza," said MAJ Moore. Preventative health measures include hand washing for at least 20 seconds, using an alcohol based hand sanitizer [at least 60% alcohol], avoiding touching your eyes, nose, and mouth, avoiding contact with people who are sick, staying at home when you are sick, covering your cough, and cleaning and disinfecting frequently touched objects. "We also encourage those who have yet to get their flu vaccine to go ahead and get it now, it's not too late," and Darsow added "as the flu vaccine is recommended by CDC up until June of 2020."

"We are encouraging those over the age of 60 or immunocompromised, to avoid crowded public places," stated Darsow.

As of March 10th, Public Health authorities have identified over 110,000 cases worldwide, and over 4,000 deaths to date. Internationally, over 64,000 patients have already recovered from the virus. In the United States (US), the Centers for Disease Control (CDC) reported over 600 cases and 25 deaths across 36 states (including the District of Columbia). Kansas currently has one case and no deaths.

Within the US, the majority of cases are due to travel related exposure. A travel health notice has been issued by the CDC for travelers coming to the US from China, Iran, Italy, and South Korea. Upon returning home from these countries, a home quarantine/restriction of movement for 14 days and self-monitoring for symptoms is required.

If you develop a fever (temperature of 100.4 degrees or greater), a cough, and/or mild difficulty breathing, please contact the TRICARE NURSING HOTLINE at 1 (800)-TRICARE. Although the 24 hour Tricare Nurse Advice Line is the preferred first option, PCMs are also gearing up to accept secure messaging from patients. Public Health is also able to field phone calls from 0800-1600 at 785-239-3799. "We are starting a new messaging campaign to help our community understand how important it is to call ahead and get guidance if they think they may have COVID 19. 'COVID 19 - Call Ahead, Stop the Spread' is our own terminology but it follows CDC guidance which is very important' Darsow said. Arriving at the IACH unannounced would cause unnecessary exposures and could actually delay care.

Appendix D - Decision flowchart for clinics within IACH system with patients suspected as COVID-19 person's under investigation (PUI).



COVID-19 Screening Procedure Decision Tree



*As of 11 March 2020

Has the Individual traveled to/from areas* under CDC Level-3 Travel Alert Locations within the last 14 Days?

* CDC Level-3

China, Iran, South Korea, Italy

OR

Been in contact with someone who has tested positive for COVID-19?



Does the patient show any signs or symptoms of illness?

**fever >100.4, Chills, Muscle aches, Runny nose, Sore throat, Cough, Shortness of breath, Nausea, Vomiting, Diarrhea



Person of concern is a dependent



- 1. Isolate patient (if present in facility)
- 2. Review information, complete PUI and contact tracing forms with patient
- 3. If they met PUI criteria, notify IACH ER of need for testing
- 4. When approved, send the patient to the IACH ER

Notify the patient to call ER staff at the (785) 239-7777 once they arrive in the parking lot.

The patient will receive instruction from ER staff on how and when to enter the building



Person of concern is a SM



- 1. Isolate patient (if present in facility)
- Review information, complete PUI and contact tracing forms with patient
- 3. Notify LTC Strobel (785) 239-8385 or (785) 250-3800

Secondary POC: DPH (785) 239-7323 or (785) 239-7042

 Once permission for testing obtained, trained staff may collect swabs
 Preferred location for treatment is
 FCC

FOR ADDITIONAL GUIDANCE

Call IACH Public Health (0800-1600) (785) 239-7042

Call Kansas Dept Health (KDHE) (24hrs SCREENERS ONLY) (877) 427-7317

TRICARE NURSING HOTLINE 1 (800) TRICARE OR Text of Video Chat: https://mhsnurseadviceline.come/home

*** If questions regarding Screening Procedures: contact 1ID DSO Office at 785-239-5504***