From the State Health Commissioner

Like all Hoosiers, I was saddened by the recent tragic tornado outbreak in Indiana. The Indiana State Department of Health and our partners stepped up and assisted fellow Hoosiers in their time of need, including working at One-Stop-Shops in Sellersburg, Holton and New Pekin. I am thankful to all of the people who gave and continue to give their time and energy during this crisis.

As many of you are aware, there have been three measles outbreaks in a year's time. Immunizations are a huge public health issue and it is my hope that these outbreaks have shown Hoosiers the importance of getting vaccinated and how it affects others.

In other news, we recently announced the completion of our 2012-2017 State Health Department Strategic Plan. This plan is a road map for the agency as it identifies what the agency priorities are over the upcoming years, how the agency will go about meeting these priorities and how to measure our progress.

Included in this plan is a new mission and vision for the State Health Department. The mission and vision, detailed below, are crucial to our success as they allow the agency to focus all of its efforts behind one common goal.

**Mission:** Promoting and providing essential public health services to protect Indiana communities.

**Vision:** A healthier and safer Indiana.

Thank you to everyone who participated in the creation of this plan. As shown by our dedicated employees and partners in recent events, I am confident that the strategic plan will be successful.

Our employees and partners will also be crucial in assisting in the implementation of the Indiana Smoke Free Air Law, effective July 1. For more information about the law, visit [www.smokefreeindiana.isdh.in.gov](http://www.smokefreeindiana.isdh.in.gov).

Regards,

Gregory Larkin, MD, FAAFP, FACOEM
State Health Commissioner

Getting to Know . . .

**State Health Department Chief of Staff and Chief Medical Officer**

Sean Keefer, Chief of Staff, was appointed by State Health Commissioner Dr. Larkin in April 2011. Prior to his appointment, Sean served as the deputy commissioner for the Indiana Department of Labor under the Daniels’ administration. He has also served as the Director of Global Health & Science Policy for the American College of Sports Medicine. Sean graduated from Hillsdale College with a Bachelor of Arts degree in political economics and earned his Master of Arts degree in Western European Studies from Indiana University. He has also completed graduate work in international public policy and development at Georgetown University.

Joan Duwve, M.D., was appointed in April 2011 to Chief Medical Officer, in addition to her duties as Medical Director for the Public Health and Preparedness Commission. Dr. Duwve represents the State Health Department on the Association of State and Territorial Health Officials Committees and Workgroups and on the Central U.S. Earthquake Consortium. She received her Master of Public Health from The University of Michigan and earned her medical degree from Johns Hopkins School of Medicine. Dr. Duwve practiced medicine before joining the State Health Department in February 2008.
Indiana’s Death Registration System Update

Adapted from Indiana’s Death Registration System: Worth the Effort by Dr. Larkin

Since January 2010, all deaths in Indiana are required to be recorded using the Indiana Death Registration System (IDRS). The IDRS, which was mandated by State law in 2009, is an electronic filing system aimed at increasing the accuracy of death certificates, while reducing costs and improving efficiency. As any medical professional knows, filing a death certificate accurately and in a timely manner is a critical step necessary to allow family members to mourn and heal after losing a loved one. Indiana is the only state that requires 100 percent electronic records. Through the use of the IDRS, Indiana is leading the way and setting an example for states who have been trying to achieve this goal for years.

So far, the IDRS has been working as expected. Most of the calls received by the Vital Records’ helpdesk about the IDRS are PIN-related or password re-sets, but the State Health Department still get calls from first time users who have questions about moving through the record.

An average of 250 fully electronic records are processed and filed everyday in the Office of Vital Records. In 2011 alone, more than 35,000 fully electronic records were filed. A random sampling of recent records indicates that it takes 3.5 days on average from the date of death until the record is fully filed. Given all the parties involved in providing information for a death certificate, this is extremely fast. In fact, before the IDRS was created, the average length of time from date of death until the record was fully filed was 13 days.

While the IDRS is working well, we do recognize that as with any new technology, familiarity and adoption takes both time and patience. The law requiring the use of the IDRS may seem more burdensome for physicians than when paper records were used, but advances in technology now allow physicians to handle this part of their business at any time, and in any place, as opposed to interrupting their scheduled patient time. This was done to create a more accountable system for reporting.

Although IDRS is a formatted, electronic data system, it does allow for variations of implementation. Some users have indicated that they rely heavily on their support staff, just like they did when it was a paper record. Others have staff complete the three screens of information, then log in and review the information, enter their four-digit PIN and sign the record. Other feedback reveals that some physicians handle it all themselves because of how quickly they are able to enter the information.

Data collected on a death certificate is very important, not only for the family, but for public health overall. The need to provide accurate information in a timely manner was the impetus for the IDRS, a system which proves everyday to be a valuable asset to families dealing with the loss of a loved one and the professionals who help those families by completing their portion of the death certificate filing process. To learn more about the Indiana Death Registration System, visit https://myweb.in.gov/ISDH/IDRSThin/.

Updates to the Indiana Administrative Code

By Kelly MacKinnon, Transactions Chief, Office of Legal Affairs

The Lead Based Paint Program rule amendments 410 IAC 32 (LSA# 10-734) became effective January 19, 2012. The rule updates and adds definitions, adds reporting requirements for licensed lead professionals, updates licensing requirements and updates remediation procedures.

The School Building and School Sites rule 410 IAC 6-5.1 (LSA# 11-319) became effective January 19, 2012. The rule amendment removed colleges, universities and post-secondary institutions from coverage under the rule.

The State Health Department held the public hearing for rule amendments to 410 IAC 1 (LSA# 11-458). The next step will be to prepare the rule for final adoption by the Executive Board. The rule amendments clarify definitions, the information and counseling given to a pregnant patient, the provider’s responsibilities to a pregnant patient and the reasons for not offering HIV tests. It also removes information that must be noted in a pregnant patient’s medical records and adds information that must be listed in the confidentiality portion of the birth certificate. It adds the use of the rapid test and updates references to Indiana Code sections.
Super Bowl Emergency Preparedness

By Lee Christenson, ESF-8 Coordinator

As with any large event, it was the responsibility of the State Health Department to take the lead in planning and coordinating health and medical response related to the Super Bowl in the event local jurisdictions would need State assistance. In order to fulfill this responsibility, it was critical to ensure the State Health Department’s federal, state and local partners understood our capabilities, our staff understood our processes and procedures, and that all of our partners understood the means by which we communicate and coordinate our activities.

Preparations began almost two years ago with the State Health Department participation on three Super Bowl planning committees: Public Health and Medical, Recovery Management and Life/Safety/Hazmat. These committees provided the opportunity for federal, state and local partners to have input and visibility on each other’s Super Bowl plans. Through these meetings, preparedness partners discussed how to coordinate medical care and transport, the procurement and allocation of resources and support for increased lab testing and food inspections.

As the event got closer, coordination increased with the Indiana Department of Homeland Security (IDHS) to discuss resource and staffing needs to support the event. With partner input, the State Health Department developed a Super Bowl Operations Plan establishing a staffing plan, State activation levels and operational periods, and communications information.

The week of the Super Bowl, the State Health Department maintained close communication with all partners through daily conference calls. The Marion County Medical Multi-Agency Coordination Center conducted daily calls between State and Local partners to share epidemiological surveillance information, food protection activities, medical care and transport data.

By all accounts, the mission of the health and medical preparedness community was a success. This experience served as a great example as to how far we have come in the field of emergency preparedness.

State Health Department and the Super Care Clinic

By Shawn Richards, Respiratory Epidemiologist

The State Health Department provided disease surveillance and laboratory testing for the Super Care Clinic during the Super Bowl festivities.

The Super Care Clinic was an innovative full-service immediate care center and lactation station located within Super Bowl Village. It was developed by the Indianapolis Super Bowl Committee, a Medical Coordination Center which supports the healthcare system in Indianapolis and the National Football League. It required strong coordination by local hospitals and the State Health Department.

Laboratory Services at the State Health Department provided 75 specimen collection/submission kits to the Marion County Public Health Department in order to stockpile in select areas within and outside of the restricted downtown zone and were prepared to have additional kits if needed. Laboratory Services staff was on-call after hours and were prepared to handle emergencies if necessary. For example, on Super Bowl Sunday, the Virology/Emergency Preparedness Laboratory was staffed from 12 p.m. until 12 a.m.

During the Super Bowl festivities, the State Health Department also provided influenza testing and analyzed patient data daily. This was the first time a city had been able to conduct surveillance to get a picture of respiratory illnesses circulating during the Super Bowl festivities.
Ellen Whitt became Assistant Commissioner, Health and Human Services Commission in January. She previously directed Governor Mitch Daniels’ INShape Indiana health improvement initiative, which she helped create in 2005. She has also served as deputy chief of staff and senior advisor for health promotion in the office of the governor, working as a liaison to the State Health Department. Ellen earned her undergraduate degree in political science and English at Augustana College (Rock Island, IL), and her law degree from the George Washington University National Law Center.

Eric Miller became the State Health Department Budget Director in January. Eric holds a Master of Public Administration from the University of Kentucky with a concentration in Public Financial Management and a Bachelor of Science in Financial Planning from Purdue University. While earning his Master’s degree, Eric served an internship with the White House’s Office of Management and Budget office in Washington, DC. Eric’s previous position was Controller of the State Health Department.

Miranda Spitznagle became the Commission Director of the Tobacco Prevention and Cessation Commission in January. Miranda has over 10 years of experience in tobacco control program evaluation, public health policy, strategic planning, grant writing and program monitoring and evaluation. She will be responsible for overseeing the evaluation plan of Indiana’s statewide comprehensive tobacco control program and providing overall program management. Miranda earned her Master of Public Health from Indiana University and a Bachelor of Science in Biochemistry from Purdue University.

Eric Miller became the State Health Department Budget Director in January. Eric holds a Master of Public Administration from the University of Kentucky with a concentration in Public Financial Management and a Bachelor of Science in Financial Planning from Purdue University. While earning his Master’s degree, Eric served an internship with the White House’s Office of Management and Budget office in Washington, DC. Eric’s previous position was Controller of the State Health Department.

Farewell to . . .

Karla Sneegas, former Assistant Commissioner, Tobacco Prevention and Cessation, has started her new position at the U.S. Centers for Disease Control and Prevention in Atlanta. Karla is the Branch Chief for the Program Services Branch in the Office on Smoking and Health.

Vaccine Eligibility

By David McCormick, Director, Immunization Division

In February 2011, the State Health Department announced that the Immunization Program would no longer support using publicly purchased vaccine for the immunization of individuals with health insurance. This decision was based on the need to ensure that these vaccines remain available for Indiana’s uninsured and underinsured population. The implementation of that policy was delayed until 2012 to ensure that local health departments could meet the demand for “back to school” immunizations. This step was taken in recognition that local health departments were the primary provider of vaccinations in many areas to the uninsured, underinsured and insured children and there was not a suitable method established to bill insurance companies.

The State Health Department is pleased to report that local health departments have embraced this change and have taken the following actions:

• 49 percent of local health departments are referring fully insured patients to primary care physicians with the ability to vaccinate patients and bill insurance for appropriate services.
• 39 percent of local health departments have contracted with a third party, VaxCare, to provide vaccinations to fully insured individuals and submit all necessary insurance paperwork.
• 9 percent of local health departments are using local funds for vaccinating fully insured individuals but privately purchasing vaccines and billing insurance carriers.
• 3 percent of local health departments are using a combination of these options to vaccinate fully insured individuals and seek insurance for services provided.

Indiana children that are not insured or underinsured are still eligible for publicly funded vaccine through the Vaccines for Children program and Indiana state immunization funding. Individuals with insurance that cover vaccinations but have co pays or deductibles are considered fully insured and not eligible of publicly funded vaccines.

Please contact the Indiana Immunization Program at (800) 701-0704 or immunize@isdh.in.gov if you have questions or need additional clarification.
Each year, Indiana has cases resistant to one or more of the four first-line drugs used to treat tuberculosis. In 2011, there were two cases of multi-drug resistant tuberculosis (MDR TB). One case died before treatment could be started. The other case was resistant to all first-line drugs, requiring treatment with second-line drugs. So far in 2012, there is already a MDR TB case. On March 24, World TB Day, with the theme, “Stop TB in My Lifetime,” called for a world free of TB, and urged the public to make an effort to raise awareness about TB and why it continues to be a serious public health concern.

What is tuberculosis?
Tuberculosis (TB) is a disease caused by germs that are spread from person to person through the air. TB usually affects the lungs, but it can also affect other parts of the body, such as the brain, kidneys, or spine. A person with TB can die if they do not get treatment.

What are the symptoms of TB?
The general symptoms of TB disease include feelings of sickness or weakness, weight loss, fever, and night sweats. The symptoms of TB disease of the lungs also include coughing, chest pain, and the coughing up of blood. Symptoms of TB disease in other parts of the body depend on the area affected.

What is multidrug-resistant tuberculosis?
MDR TB is resistance to at least two of the best anti-TB drugs, isoniazid and rifampicin. These drugs are considered first-line drugs and are used to treat all persons with TB disease.

For more information about TB, visit www.cdc.gov/tb/.

The State Health Department Food Protection Program

The State Health Department Food Protection Program was heavily involved with the Super Bowl festivities food safety and defense planning for the last two years in cooperation with the Marion County Public Health Department (Marion CPHD). The State Health Department served as a resource for the Marion CPHD food inspection activities and assisted with the planned coverage of the myriad events that would occur.

The State Health Department requested two separate training programs for all the affected local health departments and the State Health Department staff to help with preparations for the big event. The Food and Drug Administration (FDA) provided a three day food safety training program that was designed specifically for the Super Bowl host state and that will now be offered to each host state in the future. The second training program was through the Department of Homeland Security and the National Center for Biomedical Research and Training. Titled “A Coordinated Response to Food Emergencies: Practice and Execution,” this training was offered to people that would have a variety of responsibilities if there was a food emergency.

Marion CPHD hosted a table top exercise on a food borne illness outbreak at the Super Bowl that involved several partners at the local and state level. All of these trainings greatly assisted staff from multiple jurisdictions to get to know one another ahead of time, rather than during an actual emergency. FDA provided a subject matter expert to be stationed with the State Health Department for the duration of Super Bowl week to assist the inspectors with questions or concerns.

The State Health Department Food Protection Program provided food defense vulnerability assessments at the credentialed hotels and Lucas Oil Stadium. The assessments were aimed at raising awareness and educating on the potential for an intentional contamination of food event, such as tampering.

The Food Protection Program staff were involved in overseeing food safety practices at several Super Bowl events, including the Taste of the NFL.

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State Health Department Legislative Update  
By Brian Carnes, Director of Legislative Affairs

The 2012 legislative session is finished and the Governor has signed all of the bills that made their way to his desk. Two of those bills were initiated by the State Health Department, Senate Enrolled Act (SEA) 223 and Senate Enrolled Act (SEA) 249. SEA 223 will expand the list of people who are able to input data into the Children and Hoosiers Immunization Registry (CHIRP), and SEA 249 will allow the State Health Department to accept Records of Marriage from counties either by mail or electronically.

Most notably this session was House Enrolled Act (HEA) 1149, a statewide smoking ban. For six years in a row, the House has passed a version of a smoking ban, only for it to be tabled and no action taken in the Senate. The reason for the Senate not taking action on the previous smoking ban bills has been due to the lists of exemptions placed in the bill by the House. The only difference this year was the commitment from many legislators to pass a more lenient version of the statewide smoking ban. Under the agreed upon version, advocates believe that 90 percent of Hoosiers will still be protected at work and in public places.

Until this year, advocates for a statewide smoking ban had held on to the hope that a comprehensive statewide smoking ban would pass that did not give casinos, bars, clubs or any other organizations an exemption from the law. This year was the first time that a bipartisan group came together with a proposal to exempt only those organizations that they believed would be necessary to get the bill through the Senate.

The exemptions in the final act are:
- The entire “footprint” of a casino or racino. This includes casino hotels, bars, gaming floors and anything else on land that is owned and operated by a casino.
- Bars and taverns.
- Private clubs and fraternal organizations who vote every two years to remain a smoking establishment.
- Existing cigar and hookah bars.
- Cigar manufacturers.

For questions or more information regarding these bills, contact Brian Carnes at bcarnes@isdh.in.gov.

The CSHCS Division has recently formed a partnership with another Indiana family organization, Family Voices (FV) of Indiana, and currently provides funding to create a web-based learning network to foster leadership development in family members of children or youth with special healthcare needs. FV of Indiana created Family-to-Family Health Information Centers statewide that provide information, support, training, outreach and peer support to families and the professionals who serve them. For more information about ASK, call (317) 257-8683 or visit their website at www.aboutspecialkids.org.

The CSHCS Division has a long standing partnership with About Special Kids (ASK), formally known as the Indiana Parent Information Network, and currently provides funding to their IN Parent Education and Care Coordination Projects. ASK is a parent led Indiana statewide nonprofit organization and assists families in navigating the myriad of systems encountered when caring for a child who has a disability or chronic illness. Those systems include school-based programs, health insurance options, community-based services, state and federal programs. ASK provides information, education and support to these families and the professionals who serve them. For more information, call FV at (317) 944-8982 or email at info@fvindiana.org.

FAMILY VOICES®

By Kimberly Minnicear

Director, Children’s Special Health Care Services Division

The State Health Department’s Maternal Child Health Title V program aims to improve the health of all mothers and children, including children with special healthcare needs. This program and the Children’s Special Health Care Services (CSHCS) Division continue to build partnerships with family organizations and support their efforts that provide needed services to families.

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FAMILY VOICES®
Awards

On March 14, Ron Reitenour, MT (ASCP), Area Coordinator, Riverview Hospital, Microbiology/Hazmat/Preparedness, District 5 Hospital Chair-Elect, received the State Health Commissioner Award for his instrumental role in containing the measles outbreak in Hamilton County earlier this year.

On March 26, Indiana State Health Commissioner Gregory Larkin presented the State Health Commissioner Award for excellence in public health to the Indiana University (IU) Health’s “Garden on the Go” program. The award was for outstanding contributions in promoting, protecting and providing for the health of people in Indiana.

April

25 Cardiovascular and Diabetes Coalition of Indiana (formerly known as the Diabetes Advisory Council) quarterly meeting, (seeking new member organizations), theinri@isdh.in.gov

25 Indiana Environmental Health Association Spring Educational Conference (open to local health departments, academia and private industry), tbarrett4898@sbcglobal.net

27 Indiana Cancer Consortium Annual Meeting (open to medical and public health professionals), kwright@isdh.in.gov

May

16 - 17 State Health Department Public Health Nurse Conference (open to public health nurses), jtrimble@isdh.in.gov

18 Sexual Violence Primary Prevention Council meeting (open to the public), kajones@isdh.in.gov

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

Public Health Happenings

From left to right: Ron Stiver, SVP of Engagement and External Affairs for IU Health; Maureen Weber, VP of Customer Experience for IU Health; Lisa Cole, Manager of Indianapolis Community Outreach for IU Health; Dr. Larkin; and Robin Eggers, Director of Community Outreach and Engagement for IU Health.

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

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.