



A PUBLICATION OF THE INDIANA STATE DEPARTMENT OF HEALTH

Racing ahead to 2024

Each year for the last six years, the ISDH Labor of Love Infant Mortality Summit has brought together people who care about Indiana moms and babies to learn how we can care for them better.

This year's summit on Nov. 14 was an amazing and informative event that brought together more than 1,300 people to join us in the "Race to 2024," the target date Governor Holcomb has set for Indiana to have the lowest infant mortality rate in the Midwest.



Dr. Kris Box

In issuing his challenge back in January, Governor Holcomb put infant mortality at the top of his agenda. He gave that agenda a big boost at this year's summit by announcing two initiatives that will create pathways for more Indiana babies to reach their first birthdays. Click [here](#) to view the video announcement.

First, Indiana will take steps to connect an obstetrical navigator to every high-risk Medicaid OB patient in the counties associated with the 13 highest-risk areas as early in their pregnancies as possible.

With our partners at the Family and Social Services Administration, we will link pregnant women in need with OB navigators to help more moms receive prenatal care in their first trimester; identify and treat other medical problems that can threaten both mother and baby, such as high blood pressure, diabetes and smoking; and break down social and economic

factors that may prevent them from seeking care.

The OB navigators are community-based healthcare providers who can meet patients where they are, at home in their community, to increase access to care in our more rural areas and improve connectivity to care already available in our more urban areas.

The governor also is calling for legislation that would require providers to use a standardized verbal screening tool to identify pregnant women with substance use disorder as early in pregnancy as possible.

We know that the opioid epidemic contributes to Indiana's high infant mortality and maternal mortality rates and that it can impact all women, regardless of their circumstances.

Legislation will be proposed in the 2019 General Assembly that would establish this universal verbal screening, making Indiana one of the first states to take such a step. Pregnancy provides us an important opportunity to identify and treat women with substance use disorder and prevent more babies from being born exposed to drugs.

You'll hear more about these initiatives as they move forward. I'm confident that by wrapping our arms around more women during and after their pregnancies, we'll celebrate more first birthdays in Indiana.

**Yours in health,
Kris Box, MD, FACOG
Indiana State Health
Commissioner**



SPECIAL EXERCISE

ISDH's Immunization and Preparedness divisions collaborated with IUPUI and the Indiana Immunization Coalition to conduct a mass immunization exercise on Oct. 3. The event was held at the IUPUI Campus Center, and 1,662 vaccinations were administered. Three vaccines were offered to the students. As a result of this event, the following vaccines were administered: 500 meningitis B vaccines, 378 human papillomavirus vaccine and 784 seasonal influenza vaccines.

Grants target opioids, school violence

By Greta Sanderson

ISDH has received two grants from the U.S. Department of Justice, one to boost the opioid crisis response and a second to help prevent school violence.

The opioid crisis response grant is \$1 million a year for three years. It has five components that build toward the overall goal of improving opioid crisis data, said Syndromic Surveillance and Informatics Epidemiologist Jeremy Funk, who leads the grant project.

First, the overdose response project that funds local health department surveillance programs and creates additional reporting and responses based on drug overdose data will be expanded.

Second, the database that supports syringe service programs will be redesigned to collect specific information about how naloxone is used. ISDH also plans to replicate the toxicology program that tests for substances in fatal drug overdoses in

hospitals to look at opioid mortality and look for trends in a specific community.

“We don’t really get much data on recovery or treatment, so that will be a new aspect,” Funk said.

To help strengthen how the data is managed, ISDH will develop a statewide media toolkit that local health departments can customize. It will include social media messaging, press releases, fact sheets and talking points.

The last component of the opioid response grant includes establishing a statewide harm reduction advisory committee and speakers bureau.

The Student, Teachers, and Officers Preventing School Violence, or STOP, grant is a \$1 million, three-year grant aimed at training school officials, educating students and improving the response to potential threats.

“This collects the data and helps direct programs,” said Morgan Sprecher, Indiana Violent Death Reporting System

(INVDRS) epidemiologist.

Included in the first year is implementation of a mobile phone app statewide for students, teachers and parents to submit tips on students who may be at high risk for suicide, mental illness, school violence or bullying. It will also provide expanded funding for other prevention education and training.

“This app will go statewide and will be free for every Indiana parent, student and teacher,” Sprecher said. She said that in many school shootings, multiple people had suspicions, and the app would quickly combine that knowledge so proactive action can be taken.

In the second year, the grants will focus on the collection and timeliness of the data, serving as a type of triage system to flag potential threats.

The grant will eventually fund a statewide campaign about mental illness and trauma for in-school programming and create a school crisis intervention team.

NBS reporting of infectious diseases starts Jan. 1

By Charles Clark

ISDH uses several systems to conduct surveillance of infectious diseases. On Jan. 1, the Infectious Disease Epidemiology, Tuberculosis, Sexually Transmitted Diseases and Viral Hepatitis programs plan to transition their individual electronic disease surveillance and monitoring systems to the centralized National Electronic Disease Surveillance System (NEDSS) Base System (NBS).

NBS will enable ISDH to meet updated reporting requirements from the Centers for Disease Control and Prevention and improve functionality. Twenty-two other states use NBS.

All updates regarding the new system can be found on the ISDH NBS website [here](#). This includes general information about the NBS system, ISDH plans for rollout and training and other information for users. Please be sure to check the website for additional resources and future training videos.

LHD Training Plan

ISDH ERC hosted general training webinars for local health departments in October. A recording of that webinar is now available on the ISDH NBS [website](#). At this time, ERC field epidemiologists are scheduling and completing inperson trainings with local health departments.

Additionally, the ERC will be hosting subject matter-specific NBS trainings. Notifications of these meetings will be emailed by field epidemiologists. Recordings of disease-specific trainings will be made available on the ISDH NBS website.

Hospital Training Plan

A training video was created for infection preventionists and other reporters and can be accessed on the ISDH NBS website. If infection preventionists or other reporters would like addition-

The screenshot shows the NBS Patient File interface for Minnie Anne Mouse, a female patient born on 01/01/1932 (85 Years). The interface includes tabs for Summary, Events, and Demographics. The Patient Summary section shows contact information: Address (Home) at 123 Eisenhower Street, Fairview, Indiana 46254; Cell at 317-423-4567; and Email at MMouse@isney.com. The Race, White, and Ethnicity, Not Hispanic or Latino, are listed. The Open Investigations (2) table shows two entries: one for Latent Tuberculosis Infection (Start Date: 02/25/2017, Conditions: Latent Tuberculosis Infection, Case Status: Suspect, Notification: COMPLETED, Jurisdiction: CARROLL, Investigator: MARGON, Investigation ID: CAS10081000901) and one for Tuberculosis (No Date, Conditions: Tuberculosis, Case Status: Suspect, Notification: COMPLETED, Jurisdiction: CARROLL, Investigator: MARGON, Investigation ID: CAS10081001901). The interface also includes a Documents Requiring Review (0) section and navigation buttons for Previous and Next.

al training, please contact your field epidemiologist.

Recorded Webinars

- [Local Health Department Training Video](#)
- [Reporter Training Video \(infection preventionists and other reporters\)](#)
- [Animal Bite and Zoonotic Disease Investigations in NBS video](#)

Training Documents

- [NBS User Guide](#)
- [NBS FAQ](#)
- [NBS Glossary](#)
- [Field Epidemiology Map](#)

NBS Questions by Program

If you have additional questions about NBS, please contact one of the following individuals:

ERC: Field epidemiologists or Charlie Clark – cclark1@isdh.in.gov

TB: Kelly White – Kewhite@isdh.in.gov

Viral Hepatitis: Brittany Gross – bgross@isdh.in.gov

ISDH offers loan grants to mental health providers

Forty-six of the state's 48 rural counties don't have enough mental healthcare providers, and 42 of them had at least one death attributed to opioids in 2016. Seven of those counties had the highest number of opioid-related deaths in the state.

Many of those same counties or their neighbors are listed on the Health Resources and Services Administration's (HRSA's) list of the top 5 percent most vulnerable for opioid use by state.

That's why the Indiana State Department of Health (ISDH) has created a state loan repayment program to increase access to services to address and prevent opioid misuse. The program will provide an incentive for psychiatrists, alcohol and substance abuse counselors and related disciplines to practice in a targeted region of Indiana that suffers from high numbers of opioid deaths. The counties included are Blackford, Dearborn, Fayette, Franklin, Grant, Henry, Jay, Randolph, Switzerland, Union and Wayne.

The project will make grants for professional loan repayments to qualifying providers in mental health and addiction-related disciplines first, followed by primary care physicians who are also in short supply. The plan calls for 30 awards every year for the four-year grant period.

HRSA will match the \$300,000 ISDH is investing in the program for a total repayment pool of \$600,000. An advisory committee will be formed to help with project development and grant awards with FSSA's Division of Mental Health and Addiction and the Indiana Hospital Association as partners.

The program will be administered by ISDH's Division of Chronic Disease, Primary Care and Rural Health.

"There is a lack of primary care and mental health/addiction counselors country-wide," said Ann Alley, director of Chronic Disease. "Not only are there too few providers in mental health, but it's particularly difficult to attract them to rural areas that lack urban amenities."

Potential mental health providers to receive the loan repayment grants will be identified through practice sites in the counties. The goal is to prevent deaths and injuries by increasing the access to mental health services.



ISDH SHARES INFORMATION AT SYMPOSIUM

State Health Commissioner Dr. Kris Box and Executive Director for Drug Prevention, Treatment and Enforcement Jim McClelland talked with participants at the Local Public Health Leadership Symposium Oct. 10 at 502 E. Event Centre in Carmel. The symposium included information on a number of Indiana State Department of Health initiatives, including the hepatitis A and opioid epidemic responses, as well as legislative, tick-borne illness and immunization updates. "The Local Public Health Leadership Symposium is a great opportunity for LHD leadership to network, share experiences and learn about the latest opportunities to further public health in Indiana," said David Hopper, director of the Local Health Department Outreach Division. "It was great to see so many local health leaders from all across the state of Indiana in attendance."



ISDH SHARES INFORMATION AT SYMPOSIUM

Photo by Katrina Boylan

Midwest Injury Prevention Alliance (MIPA) Secretary Dr. Gary Smith addresses the group's 2018 summit "Cutting Edge of Prevention: Sharing Best Practices," held Nov. 29 and 30 at the Sheraton Indianapolis Hotel at Keystone Crossing. The event included presentations on approaches to prevent violence, injury prevention in motorsports, distracted driving, addressing opioids in the workplace, and connecting data, science and action to prevent injuries.

DEATH INVESTIGATION TRAINING BOASTS BIG TURNOUT

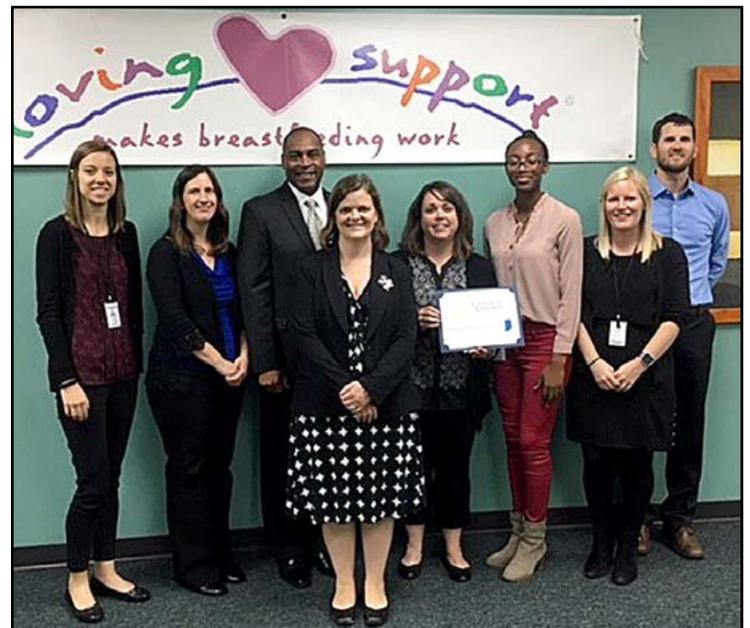
Dr. Roland Kohr, forensic pathologist and director of laboratories at Terre Haute Regional Health, speaking before a great turnout at the Sudden Unexplained Infant Death (SUID) Scene Investigation training Oct. 25 in Danville. The ISDH Division of Fatality Review and Prevention has been focused on the prevention of injuries and death in Indiana children since 2013. By understanding the risk factors and circumstances of a child's death, prevention recommendations and systems improvements can be identified and put into action. For SUIDs, often caused by unsafe sleep situations, there exists a marked need for standardization of investigation techniques and cause and manner of death identification and classification, and local review teams and investigators have requested this type of training. The Hendricks County 4H Fairgrounds & Conference Center donated the space.



WIC AWARD WINNERS



Neighborhood Health WIC (NHCI) serving Allen, DeKalb and Noble counties received the Gold Loving Support Award of Excellence for the first time. The Loving Support Award of Excellence is issued by USDA to recognize exemplary local WIC breastfeeding and peer counseling support. Recipients must meet all the required core components of the FNS Loving Support Model. This model is the basis of all Indiana WIC peer counseling programs. WIC peer counselors must be paraprofessionals hired from WIC's target population, be available to clients outside usual clinic hours and have breastfed at least one baby. NHCI WIC has made breastfeeding a priority by providing clients with accessible peer counselors to help them achieve their breastfeeding goals. NHCI WIC is the second agency in Indiana to receive this award and one of only 16 local WIC programs within the Midwest Region of the country.



USDA selected Indiana to receive the WIC Breastfeeding Performance Bonus Award in recognition of the agency's outstanding achievement in improving breastfeeding rates among WIC clients. Indiana is one of only two states nationwide (the other is Iowa) to receive this award. WIC has worked hard over the last few years to increase its presence in birthing hospitals, improve the peer counseling program, collaborate with vital community partners to promote breastfeeding and provide quality education and resources, resulting in a 2.6 percent increase in breastfed infants. The increase was a team effort by the state WIC breastfeeding team and the local agency WIC staff. Accepting the award were ISDH State Nutrition Consultant Tonya Long, Interim WIC Director Laura Chavez, USDA Branch Chief Bruce Hillman, ISDH Chief Medical Officer Dr. Melissa Collier, ISDH WIC Breastfeeding Coordinator Crystal Fowler, WIC Breastfeeding Consultant Brea Birdsong, WIC Peer Counselor Coordinator Jana Gach and ISDH Assistant Commissioner Eldon Whetstone.

Hepatitis A outbreak enters second year

By Greta Sanderson

More than a year after the first outbreak-related case of hepatitis A was confirmed in Indiana, the number of cases continues to climb as public health officials step up efforts to contain it.

Indiana is part of a national outbreak that has had more than 8,000 cases and 50 deaths. Indiana reports 723 outbreak-related cases and two deaths. Of those cases, 45 percent have required hospitalization, which is lower than most other states involved in the outbreak.

The populations most at risk are people who experience homelessness, use illicit drugs, have been incarcerated or are men who have sex with other men. More than half of the Indiana cases report illicit drug use.

Complete and timely investigation of suspected cases is key to preventing further spread of this disease. Please be sure to include complete patient information in case investigations, including



symptoms, date of onset and lab results, which are all needed for case confirmation. Quick investigation can help identify close contacts so that post-exposure prophylaxis can be administered.

So far this year, nearly 89,000 adult doses of hepatitis A vaccine have been administered in Indiana, and an Indiana State Department of Health (ISDH) immunization strike team has held clinics in 29 counties since August.

ISDH also expanded the Adult Vaccine Program to include hepatitis A now that there is adequate vaccine supply. That means vaccine may be offered to uninsured and underinsured adults who meet the financial eligibility criteria. Please continue to vaccinate high-risk individuals regardless of their financial eligibility. The busy flu season is a great opportunity to also provide hepatitis A vaccination.

ISDH can support you with a variety of resources, including a media kit with infographics, social media posts and press release templates. For help with

immunizations, including a strike team, contact Immunization Director Dave McCormick, at 317-233-7010 and DMcCormick@isdh.IN.gov. Contact Foodborne and Waterborne Epidemiologist Nicole Stone at 317-234-2898 or NStone2@isdh.IN.gov for assistance with case investigations and other hepatitis A information.

Updates will continue to be posted on the ISDH [website](#).

Maternal mortality group conducts first case reviews

The Indiana State Department of Health's (ISDH's) Maternal Mortality Review (MMR) Committee met for the first time Nov. 13 to review cases, taking another step toward improving outcomes for more Hoosier mothers.

Senate Enrolled Act 142, adopted by the 2018 Indiana General Assembly, created the committee. Its role is to review any maternal death of an individual during pregnancy through up to one year after pregnancy from any cause related to or aggravated by the pregnancy or management of the pregnancy. The law gives the committee the statutory authority to access the medical records needed to evaluate the cases.

The committee will identify trends related to maternal death that can lead to the development of programs aimed at protecting the health of new mothers. In 2016, Indiana's maternal mortality rate was 21.6 per 100,000 live births, above the 2016 national average.

"Our goal is to prevent as many maternal deaths in the future as possible," said Gretch-

en Martin, director of the ISDH Division of Fatality Review and Prevention.

The 58-member committee comprises many types of professionals who work in maternal care, including maternal-fetal medicine doctors, but also cardiologists, psychiatrists, social workers, pathologists and several ISDH and Family and Social Services Administration staff members.

The group studied four cases, chosen for review based on the diverse causes of death and available case information. The committee will meet again in February and plans to review eight cases, twice as many as the first meeting, now that the group is familiar with the process.

The committee is required to make an annual report in July, which will be posted to the ISDH website. While it will be too soon to make recommendations by the July 2019 report, Martin expects the group will share proposals for improving maternal mortality in Indiana based on its findings by 2020.

CME APPROVED

ISDH has received approval from the Indiana State Medical Association Commission on Medical Education to provide continuing medical education (CME) credits to physicians attending ISDH-hosted events.

With this approval, ISDH will streamline the process of obtaining CMEs at its events for local health department leadership symposiums.

The provisional accreditation expires Dec. 31, 2020. To receive a full four-year accreditation, ISDH will need to resubmit an application in fall 2020.

CALENDAR

LHD webcast

9:30 a.m., Dec. 14

Get an update on ISDH programs, initiatives, grant opportunities and more at these monthly webcasts.

Click [here](#) to watch live or to view archived webcasts.

Law enforcement and the opioid epidemic webcast

10 a.m., Dec. 18

ISDH is hosting a live webcast on the opioid epidemic from a law enforcement perspective. The webcast will discuss how the criminal justice community in Indiana is tackling the epidemic, drug trends in Indiana and the use of tools such as drug courts and Law Enforcement Assisted Diversion (LEAD) programs. Register [here](#).

Project ECHO webcast

Noon, Dec. 20

The Opioid ECHO project is a free partnership between local primary care providers and a team of specialists from Indiana University. It aims to improve the treatment of opioid use disorder in rural and underserved areas by educating primary care clinicians through virtual video-conferencing to provide specialty care services.

This webinar, titled “Tele-mentoring Program for the Treatment of Opioid Use Disorder,” will highlight how health care providers can get involved in the Opioid ECHO clinics. Register [here](#).

Be in the know

Make sure you’re receiving the latest ISDH updates by subscribing to one of our Listservs.

To be added to a Listserv or to ask about getting something distributed to a Listserv listed below, please contact LHDinfo@isdh.in.gov.

Current Listservs include:

- Local Health Department Administrators
- Local Health Department Health Officers
- Local Boards of Health Representatives
- Public Health Nurses
- Health Educators

Save the date

The 2019 Public Health Nurse Conference will be May 8-9, 2019, in Carmel.

FOCUSED ON MOMS



ABOVE: Drs. Kris Box and Jennifer Walthall explain two new initiatives to improve Indiana’s infant mortality rate announced at the Labor of Love Infant Mortality Summit Nov. 14 at the JW Marriott. More than 1,300 people attended the conference, which had a theme of the Race to 2024, referencing Governor Eric Holcomb’s challenge for Indiana to have the lowest infant mortality rate in the Midwest by 2024. The summit’s focus was on maternal health because “Healthy Babies Start with Healthy Moms.”

LEFT: ISDH Immunizations Director Dave McCormick served as summit emcee.

ISDH IN THE NEWS

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

[HEALTH OFFICIALS URGE HOOSIERS TO GET FLU SHOT](#)

[SMART USE OF ANTIBIOTICS LEADS TO BEST CARE](#)

[INDIANA WIC CLIENTS INSTRUCTED TO DISCARD NUTRITION EDUCATION PLATES DUE TO POTENTIAL FIRE HAZARD WHEN MICROWAVED](#)

[INDIANA RECORDS FIRST FLU-RELATED DEATH OF SEASON](#)

[STATE HEALTH DEPARTMENT AWARDED GRANT TO HELP PREVENT SUDDEN UNEXPECTED INFANT AND CHILD DEATHS](#)

Read more news on our [website](#).



Indiana State
Department of Health