

Communiqué



PRESIDENT'S MESSAGE

Kristi Campbell

Director, Cole County Health Department

June 2022

Dear Public Health Colleagues,

I hope this letter finds you well! Thankfully, the 2022 Missouri legislative session has ended, and we can again focus on public health activities and system transformation. This is an unprecedented time with increased attention on public health and increased funding in our state. There are many working with our state partners to develop innovative solutions to our system gaps, like data systems and workforce. Hopefully, some of the increased funding will be directed towards public health and the identified gaps.

One gap that will be addressed in September is our lack of a face-to-face statewide public health conference for the last few years. I'm pleased to say that all the public health associations will be partnering together to host this year's conference on September 21st and 22nd at the Holiday Inn Executive Center in Columbia. I would like to thank the Missouri Association of Local Public Health Agencies, the Missouri Center for Public Health Excellence, the Missouri Institute for Community Health and the Missouri Department of Health and Senior Services for collaborating with the Missouri Public Health Association on this year's conference. Please make plans to attend and look for registration to be available very soon...it might be available now!

We are particularly thankful to have Paula Nickelson, Acting Director of the Missouri Department of Health and Senior Services, attending to provide the welcome for the conference. Director Nickelson will also introduce a representative of the National Association of County and City Health Officials. I'm looking forward to hearing the national perspective of current public health issues.

The conference provides a unique opportunity for all public health professionals, retired professionals, and students to get involved, learn something new and network with other public health minded people. The educational sessions this year will cover a few relevant COVID-19 topics but will also explore other nursing topics, disease prevention, vaccine hesitancy, community health workers, and addressing health disparities. Opportunities to network and get involved will be plentiful. Each association will hold a general membership meeting and there will be

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Calendar of Events

July 14, 2022

MPHA Board Meeting

MPHA Office
Jefferson City, MO

September 20, 2022

MPHA Board Meeting

MPHA Office
Jefferson City, MO

September 21-22, 2022

Joint Annual Public Health Conference & General Membership Meeting

"A Vision for a Healthier Missouri"

Holiday Inn Select
Columbia, MO

November 6-9, 2022

APHA Annual Meeting & Expo

*"150 Years of Creating the Healthiest
Nation: Leading the Path Toward Equity"*
Boston, Massachusetts

(Board Meetings are held via Zoom and will begin at
10:00 am unless otherwise noted.)

PRESIDENT'S MESSAGE

break and lunch times for mingling and catching up with colleagues that you haven't seen in person in years or have only ever seen through your computer. Please make the most of our time in Columbia and attend as much as your schedule allows.

I'm hoping to see all of you at the Missouri Public Health Conference in September and I would challenge each of you to invite one of your community partner agencies to send a representative to the conference. We should use the conference as an opportunity to further educate our partners on the breadth and complexity of public health and explore other collaboration and expansion opportunities. Ideally, as we move further out of the pandemic mode, we will be able to focus on the aspects of the public health systems and our jobs that need attention.

As always, thank you all for your tireless work. Keep your chins up and keep fighting the good fight because AMERICA NEEDS PUBLIC HEALTH!!

Respectfully,



Kristi Campbell
President, Missouri Public Health Association

2022 Legislative Session Concludes

Bert Malone



The Missouri General Assembly completed its most recent session on Friday, May 13, 2022. (Actually, the Senate adjourned a day earlier due to internal friction and lack of success.) To summarize the session, it is safe to say that it was a very unproductive session. While close to 850 bills were filed, only 66 were Truly Agreed and Finally Passed, a very low rate. Of these, 23 bills passed were budget bills that the Assembly is mandated to approve if the State is to continue its operation.

The Senate proved to be a major stumbling block for a good deal of bills, as Senators were caught up in a good deal of in-fighting, principally over the mandated Congressional re-districting. In the words of one Capitol observer, "It was the most dysfunctional (session) that I can remember in more than 50 years of covering the Statehouse." There were countless filibusters that precluded significant advancement on many critical issues that Missourians face. A group of Senate conservatives were successful in stalling action within the Senate unless they got their way on the re-districting. As it turns out, the final redistricting map is close to the original proposal within the Senate so it appears that the delays and filibusters were for naught.

There were a few success stories for health and community health issues:

- The General Assembly approved funding for the expansion of Medicaid in accordance with the

vote of the people in August 2020;

- Efforts to limit or significantly reduce Medicaid coverage were unsuccessful;
- The American Rescue Plan funding has some bright spots for Public Health in the State;
- Lawmakers approved the largest budget bill in the State's history with billions in funding for Covid-19 relief;
- HB 2116, sponsored by Rep. Black, was successful in getting his No Patient Left Alone Act which precludes hospitals and nursing homes to preclude the banning of visitors (with protective covering) to individuals with Covid-19;
- HB 2162, related to opioid addiction, was passed to allow licensed practitioners, including pharmacists to sell and distribute addiction mitigation equipment/supplies;
- Get the Lead Out; Safe Drinking Water Act (SB681) was passed to require lead concentration below 5 parts per billion (5ppb) in all schools;
- A total of an additional \$2.3 million was added to the State's budget for public health (ARP funds);
- In a state with an exceptionally high maternal mortality, the public health community is disappointed that the Assembly failed to extend postpartum coverage by Medicaid beyond the current 60 days to the proposed 12 months; while this measure received a good deal of support, it failed in the last few days of the session. Capitol watchers expect this issue to be back during the next session as it enjoyed wide bipartisan support.

So, it was not a totally unproductive session for public health. There was a great deal more that COULD have been accomplished had the Senate not been taken up with inter-party bickering. It is hoped that the next session can capitalize on a few of the positives that did occur.

Member Spotlight

Peggy L. Bowles
Henry County Health Center
Board Member at Large

May 15, 2022 marked the beginning of my seventh year with Henry County Health Center (HCHC) as the Administrator. When I was hired on to HCHC, I had 20+ years of executive management but zero years of



experience in the public health field. The learning curve was high, and continues to be challenging with each passing year. But each new day is exciting, frightening and challenging all wrapped up into one and I feel so thankful to be a part of this journey. I have an outstanding team that shares my passion for helping Henry County residents.

Prior to coming to the HCHC, my professional career started in Early Childhood education and then grew into executive management in Drug and Alcohol Treatment and Prevention. I was fortunate to work for a pilot project with Robert Wood Johnson Foundation called CASA Works and traveled to New York to learn about extended treatment aftercare. This program moved the needle with patients in treatment by reducing recidivism rates from 60% to 20%. Being able to work with the full spectrum of human development was not

only educational, but also very inspirational. I then moved on to working in Community Action and managed 13 Head Start Centers for five years with the West Central Missouri Community Action Agencies, (WCMCAA). While at WCMCAA, I moved from Head Start Director to Chief Operations Officer (COO) position after five years. As the COO, I was then able to assist program directors in managing programs and services that served clients ranging from early childhood to gerontology.

Throughout my career and continuing on today, I find that helping people is my passion. I believe that we are meant to leave this world better than the way we found it and I am determined every day to do just that. It hasn't been easy and there were times that I thought about moving to the jungle and selling coconuts for a living, but it always turns out in the end.

I have one grown child, Christopher, who is my joy and my life and two fur babies that I love beyond words. I speak my mind and, at times, this can cause some feathers to be ruffled, but when it comes to helping others and giving a voice to those who do not have one, I think feathers need to be ruffled (or plucked depending on the issue). I love to work with my plants in my yard and find a good book can be great therapy. I am young at heart and look forward to doing even more for HCHC in the near future.

MPHA Members,

Now in existence since 1925, the Missouri Public Health Association (MPHA) continues to strive to meet the needs of public health across Missouri. The COVID-19 pandemic has taken the challenge of this mission up a notch but MPHA and its members remain committed.

It is our mission to be the voice of public health in Missouri through advocacy, membership services and by investing in our members through the MPHA Education Foundation. The MPHA Education Foundation plays a key role in ensuring a resilient public health workforce by providing funding for education experiences that recipients may not have without the Foundation's monetary support.

In order to fund these educational opportunities, MPHA relies on the generosity of individuals and organizations. Cash donations are always welcome but you can also donate to the MPHA Education Foundation at no direct cost to you. In fact, I have generated over \$57 of donations and it cost me nothing. What is this magical money generating scheme you ask. It is AmazonSmile. More details are at the bottom of this page. It takes a little bit of set up but then you can buy, buy and buy really cool stuff on Amazon while knowing that you are helping MPHA. At least that is my logic. For the record, my wife does not necessarily agree with my approach.

Every dollar counts in the advancement of public health. Whether it's a cash donation or through AmazonSmile, your generosity will make a difference by allowing MPHA to continue in our work advancing public health in Missouri. ***The MPHA Education Foundation is a 501(c)3 corporation which means that cash donations to the Foundation are tax deductible.***

Thank you in advance for your generosity.

Sincerely,
Andrew Warlen, MPH
MPHA Foundation Chair

AmazonSmile

Missouri Public Health Association Education Foundation is registered with AmazonSmile. Anytime you shop on Amazon for eligible items, Amazon will donate 0.5% of the price of the eligible smile.amazon.com purchase to the Missouri Public Health Association Education Foundation.

On the website: Go to smile.Amazon.com and select the Missouri Public Health Association Education Foundation as your charity.

On the mobile app: Find settings in the main menu. Tap on AmazonSmile and follow the instructions to turn on AmazonSmile on your phone.

AmazonSmile will donate .05% of your eligible purchase to MPHA which can add up fast. Remember, only purchases at smile.amazon.com or through AmazonSmile activated in the Amazon Shopping app will support MPHA once you select it.

Missouri Public Health Association Education Foundation's unique charity link:

<https://smile.amazon.com/ch/43-1652927>

Section for Public Health Nursing

Bert Malone

The Missouri Public Health Association is very pleased to welcome a group of public health nurses into the organization through the establishment of a Section for Public Health Nursing.

Prior to 1995, the Association had active Chapters and Sections that allowed members to choose to pursue topical matters of interests to their own region of the State and their own professional discipline. Due to increased demands on the part of practitioners throughout the State and a limitation placed on State agency employees that prohibited engagement by any personnel during office hours in any organization that did lobbying or advocacy work, membership declined significantly since 1995. This prohibition limited participation from active Health Department employees in MPHA during daytime work hours. This naturally had a significant impact on participation and membership in the Sections, the Chapters and the Association at large. As a result, the MPHA Board at the time abolished the Sections and encouraged broad participation in the Association at large.

More recently, however the current MPHA Board, in response to a request by the Council for Public Health Nursing for administrative support services and incorporate a more responsive organization for nurses, re-established a Section for PH Nursing and has welcomed approximately 26 nurses into this organization. In the view of the Board, this affiliation will serve as a pilot for the re-establishment of other MPHA Sections, to ultimately include ones like Communicable Disease, Citizen Health, PH Administrators, Environmental Health, etc.

There are many advantages to MPHA, including a larger member base and the ability to generate some revenue via additional dues and via Section-sponsored programs and trainings. Benefits for the Council members include: access to a network with a broader public health practitioner base; an opportunity for leadership in the full organization; the opportunity to plan and direct annual meeting program offerings in the nursing profession reaching a broad public health base; and the availability of critically-needed association management staff to arrange meetings, training programs, program records, etc.

MPHA views this “incorporation” as a very positive step, one that reinforces the tremendous value of public health nursing and emphasizes the important roles that nurses play in the delivery of critically needed public health services through a broad-based public health organization.



Denise Strehlow

Denise Strehlow, currently the Missouri Institute for Community Health (MICH) President, is resigning her position effective June 30, 2022. Professional and personal commitments have pointed her in a different path. Denise says, “I have enjoyed my time on the MICH Board and appreciate the support of the Board as well as the local public health agencies across Missouri. I truly believe MICH has an accreditation role in Missouri and in the region.”

AMERICA NEEDS PUBLIC HEALTH

Are YOU a Member of MPHA?

**Do You Know Someone That is NOT a Member of MPHA?
Get Involved and Let's Further the Message of Public Health
in Missouri Together!**

MPHA Member Benefits:

- Three Newsletters a Year Filled with up-to-date Information
- Legislative Updates on Missouri Issues
- National Topics Impacting Missourians
- Joint Annual Meeting with Public Health Professionals from Across the State and Beyond
- Statewide Network of Public Health Professionals



If you are interested in membership in MPHA or know someone who is, please contact Dan Luebbert, Platte County Health Department, 816-858-2412, Dan.luebbert@plattehealth.com. (MPHA membership form is on the back page and can be returned it to the MPHA office.)

New MISSOURI PUBLIC HEALTH ASSOCIATION Members

FREEDOM KOLB, THE MILK BANK

ELIZABETH HARRISON, UNIVERSITY OF MISSOURI EXTENSION

SELINA WEST, COMMUNITY PARTNERSHIP OF THE OZARKS

DUSTIN GUEST, PLATTE COUNTY HEALTH DEPARTMENT - PHN

DARA COLLINS, OZARK COUNTY HEALTH DEPARTMENT - PHN

SARAH COLBY, ST. CLAIR COUNTY HEALTH CENTER - PHN

JAYMEE QUINN, ST. CHARLES COUNTY DEPARTMENT OF PUBLIC HEALTH - PHN

NATALIE DEARING, ST. CHARLES COUNTY DEPARTMENT OF PUBLIC HEALTH - PHN

JENNIFER SMITH, ST. CHARLES COUNTY DEPARTMENT OF PUBLIC HEALTH - PHN

MICHELE BILDNER, UIC SPH, FONTBONNE UNIVERSITY, CDC FOUNDATION

MARY AMANDA HASKINS, STEPHENS COLLEGE

COVID-19 Resources for Missouri Schools: Lessons Learned (2020-2021)

Linda C. Wolfe, EdD, RN, NCSN, FNASN
Janice Selekmán, DNSc, RN, NCSN, FNASN

The COVID-19 pandemic began in winter, 2020 and by the beginning of the 2020-2021 school year, states and school districts had begun developing policies and resources for school personnel; the goal was to keep the school community as safe as possible. Multiple entities in Missouri took leadership within their separate organizations to develop resources for school administrators, school health providers, and sports personnel.

The Missouri Department of Health and Senior Services (DHSS) recruited Dr. Linda C. Wolfe and Dr. Janice Selekmán to conduct multiple forms of data gathering to determine the effectiveness of the multiple resources developed by the state (Report One) and to synthesize the 'lessons learned' during the first year of the pandemic and the fall of the second year. The project consisted of four parts: review of Missouri COVID-19 resources for schools (Report One); Focus groups with Missouri Lead School Nurses (Report Two); Interviews with resource developers of key agencies in Missouri and/or distributors who had a role in developing policy recommendations and resources for school personnel and the families they serve (Report Three); and a survey of all school nurses in Missouri to evaluate resources and the impact on their role in the schools (Report Four).

The initial eight resources assessed in this study were identified by the Missouri State School Nurse Consultant (SSNC) at DHSS. An additional eight were identified during the Lead School Nurse Focus Groups.

Initial Resources:

1. COVID-19 and Kids ECHO
2. COVID-19 ECHO
3. DHSS/Department of Elementary and Secondary Education (DESE) COVID-19 webinars for Schools and Local Public Health Agencies
4. Online communication by the School Health

- Program with timely updates/announcements
5. DHSS/DESE School Reopening and Operating Guidance
6. Missouri's BinaxNOW Antigen Testing Program Guidance for K-12 Institutions
7. Kansas City Children's Mercy online publication, "Returning to School during COVID-19- Information for Educators and School Health Professionals"
8. St. Louis Children's Algorithms for when to stay in school

Six focus groups (Report Two) of Lead School Nurses helped to identify multiple resources provided to schools during the pandemic; these were used in the survey questionnaire.

Additional Resources:

9. Local public health agency (LPHA) agency direct communication, information, and partnerships
10. Johns Hopkins COVID-19 Contact Tracing program
11. Missouri State High School Activities Association (MSHSAA) Return to Play Guidelines
12. Informal group of Missouri Lead School Nurses in eight school districts in the St. Louis area
13. Centers for Disease Control and Prevention (CDC)
14. National Association of School Nurses (NASN) School Nurse Administrator Discussion Group
15. Urban League of Metropolitan St. Louis (Urban League)
16. Local pharmacy

Beyond the resources, there was a clear sense of availability and access to resources, a dedication to serving the school community, and a valuing of partnerships. There was a consistent sense of stress and frustration expressed, primarily focused on one issue: the lack of a unified approach in the state of Missouri in its COVID response in the schools. The Lead Nurses repeatedly described the need for a specific coordinated approach from the top down.

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COVID-19 Resources for Missouri Schools: Lessons Learned (2020-2021)

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Janice Selekmán, DNSc, RN, NCSN, FNASN

Local health departments gave different messages and directives resulting in confusion and stress. This was not helped by differing directions from private physicians and hospitals as well as political interference. As a result, parents were angry with the messenger: the school nurse. This anger was exacerbated in the area of school sports, with different protocols in different districts. The increased responsibility for contact tracing, testing, and other COVID-related activities, often without emotional or fiscal support, resulted in job dissatisfaction and significant attrition.

Interviews with the key stakeholders who had developed or distributed resources (Report Three) included representatives from the Missouri Chapter of the American Academy of Pediatrics, the Missouri Department of Elementary and Secondary Education (DESE), the Missouri Department of Health and Senior Services (DHSS) Section for Community Health & Initiatives and School Health, the Missouri School Board Association (MSBA), the Missouri State High School Activities Association (MSHSAA), and a Pediatric Infectious Disease Physician. There was very consistent messaging coming from all entities. They saw themselves as advocates for children with a goal of keeping children safe. They all saw themselves as experts and community-based leaders whose roles were to assist their constituents by developing resource materials that were referred to as 'guidance documents' and 'recommendations' rather than policy, as they had no authority to mandate. The agencies/organizations did not appear to collaborate with each other to ensure that the resources' messaging was consistent across agencies/organizations, especially that of the local public health agencies. All that reported their documents were based on CDC guidance; however, their nuanced interpretations differed. This forced school districts to 'choose' the recommendation they were going to follow.

The final component of the project was a statewide survey to all school nurses in Missouri (Report Four). With a 46.5% return rate, almost all counties were represented. The most useful resources for school nurses during year one of the pandemic were the 1) Centers for Disease Control and Prevention, 2) the Department of Health and Senior Services (DHSS) and the Department of Elementary and Secondary Education's (DESE) Reopening and Operating Guidance, 3) DHSS/DESE COVID-19 webinars for schools and local Public Health Agencies, 4) online communication by the School Health Program with Timely Updates, and 5) direct communication, information and partnerships with the local public health agency. Of concern was the fact that one-quarter of respondents were unaware that the resources were available, especially the ECHO programs, the publications and algorithms from Kansas City Children's Mercy Hospital and St. Louis Children's Hospital, as well as the MSHSSAA guidelines.

Resources also came for some in the form of support from individuals, most specifically the district Lead School Nurses, the State School Nurse Consultant (Marjorie Cole, MSN, RN, FASHA), their district administrator, local public health staff, informal sharing groups of district nurses, and the school Principal or Assistant Principal. School nurses expressed a need for materials that they could share with staff and parents, additional staff to assist with contact tracing, and documents with a cover page that highlighted key points. They were almost unanimous in wanting resources and programs that provided new and up-to-date information that they could trust, with the important information highlighted. They certainly needed materials where the authors understood the role of the school nurse. Some school nurses were able to form new partnerships with other professionals, which they saw

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COVID-19 Resources for Missouri Schools: Lessons Learned (2020-2021)

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as a positive, but that was not an identified outcome for 90% of school nurse respondents.

During the pandemic, school nurses were asked/mandated to assume additional responsibilities, primarily COVID contact tracing and testing, as well as all of the follow-up involved in those activities. COVID-related activities now account for over half of the school nurse's workload, and yet there was no indication that traditional school nurse responsibilities were excused. Over 50% of the nurses indicated carrying out fewer activities over the past year in health education, health screenings (with the exceptions of immunizations), and care coordination/management.

Missouri has 558 school districts that range in size from less than 500 to over 20,000 students. Just 7% of the districts serve approximately half of the school population, while 47% of the districts have 499 or less total student enrollment in their schools. Missouri is a state that values and safeguards local control. This translates to educational and health standards and decisions being made by local school boards and public health agencies at the county or city level. Each county and large city, e.g., St. Louis and Kansas City, has a local public health agency. Districts may have schools located within multiple counties. This accounts for the variances existing across the state.

Perhaps most distressing of the findings was that almost 93% of school nurses experienced significant stress during year one of the pandemic, and this stress did not abate during year two. While some were supported by the professionals around them, others were left extremely dissatisfied, frustrated, and disillusioned. This was reflected in the 150 comments written into the final question of the survey. In addition to the "overwhelming" workload, stress was exacerbated by frequently changing and inconsistent COVID prevention and mitigation guidelines within and among counties. This resulted

in parent anger and a worsening of the relationship with parents that school nurses had worked for years to develop. The need for supporting healthcare workers' mental health is not isolated to school nursing. One author described the stress of hospital nurses due to changes in interactions with families, new roles for the nurse, and moral distress ("when nurses feel powerless to take actions, they know are ethically correct").

Since its inception at the turn of the 20th century, the profession of school nursing has historically responded to the needs of the community. There is evidence that Missouri school nurses stepped up to the challenges of COVID and adapted their practice to care for the school community. Further, the role of the SSNC in advocating for and distributing information was a valued resource.

CONCLUSIONS:

This statewide evaluation of selected resources developed and provided to the schools resulted in significant findings from the perspective of the school nurse. Themes that were heard from all entities evaluated included the following:

1. There was inconsistent leadership across the state related to COVID. There was a feeling that "no one was in charge." This led to:
 - Inconsistent messaging across disciplines, media, and state/county agencies
 - Inconsistent policies and procedures between and among schools and districts
 - Inconsistent application of policy (testing and quarantine) within the school sports arena related to sports practices and games with teams in other districts
 - Significantly increased stress among school nurses as they attempted to explain protocols to parents and staff and to implement them; parental anger regarding enforcement of COVID-related policies

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COVID-19 Resources for Missouri Schools: Lessons Learned (2020-2021)

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was often directed to the school nurse.

2. There was a breadth of programs developed for school health providers and administrators, many of which were well-received and appreciated by school nurses. There was little evidence of communication between and among the programs so that a consistent and concise message was developed.

- Organizations/agencies saw their role as developing “recommendations” and “best practice”, as they had no authority to mandate. Their goal was to assure safety for students.
- With one exception, the programs developed were not evaluated for their efficacy.

3. The COVID pandemic resulted in a significantly increased workload for school nurses. At least 50% of their days were spent doing contact tracing, COVID testing, and other duties related to mitigation measures. This resulted in the need to work overtime and often was without assistance, recognition, or remuneration. It resulted in multiple school nursing responsibilities not being completed.

4. Many school nurses and school nurse leaders developed or improved a strong working relationship with their local Public Health agency. Collaboration with local and state agencies and organizations was valued by the SSNC, key resource developers and distributors, lead school nurses, and school nurses.

5. The role of the State School Nurse Consultant is a critical one in communicating and educating the school health workforce. This position has the potential to inform all schools. School health leaders and school nurses applauded the leadership of the State School Nurse Consultant Marjorie Cole for recognizing and responding to the needs of school nurses for sound, reliable information; providing a means for school nurses, who are isolated in the education system, to dialogue and network with experts and colleagues; and taking the leadership role

in having an assessment of the resources provided in order to synthesize lessons learned in preparation for the next pandemic/emergency.

RECOMMENDATIONS:

1. Develop shortened resources and communications
Lengthy resource documents should be streamlined to communicate key points easily and quickly, e.g., synopsis, bullet points. Further information should augment and support, not conflict, with other current guidelines and protocols, including athletic guidelines.

2. Provide a standardized response
There must be someone in charge of the state’s response to a pandemic or emergency in a way similar to responding to natural disasters. This will allow a consistent message from the top down so that practice and policies are consistent within the state. If the state does not assume this role, then “regional coordinating bodies” could coordinate sharing of staff and services and key stakeholders should work towards consensus guidelines and protocols for the state. The Georgetown Washington University Study, September 2021, described a similar recommendation as “harmonize policy development”.³

3. Address unsustainable workloads
Workload policies need to be evaluated and adjusted during a pandemic/emergency so that additional personnel can be deployed to areas of need (such as help doing contact tracing) and essential services can be provided, such as screening and student health education. There are multiple examples within Missouri and across the U.S. of stipends being provided to school staff for overtime. “Returning the school nurse to a focus on the whole student and traditional school health program activities that are necessary for a healthy student, in school, ready to learn” are needed.⁴

COVID-19 Resources for Missouri Schools: Lessons Learned (2020-2021)

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4. Implement mental health support

Schools and state agencies must be aware of the increased stress on all employees, especially front-line workers, that occurs during a pandemic/emergency and respond accordingly. This includes, but is not limited to: education on accessible mental health resources, increased communication⁵, a hotline for “any type of need or concern”⁵, debriefing opportunities⁵, reasonable workloads, teaching on coping strategies, enhancing peer support opportunities, and including the school nurse in decision-making related to school health.

5. Acknowledge the school nurse’s role and contributions

Recognize the outstanding performance and contribution of the Missouri school nurses as frontline providers in the pandemic. This includes consideration for “fair compensation for school nurses when regularly required to exceed normal contract hours”⁴, as well as the need to “ensure equitable public health funding across the state”.³ The role of the school nurse is unique and school nurse representation in decision-making bodies would enhance the state and local emergency or pandemic response.

*Janice Selekmán DNSc, RN, NCSN, FNASN
Professor Emeritus, University of Delaware*

*Linda C. Wolfe, EdD, RN, NCSN, FNASN
State School Nurse Consultant (retired), School Health Consultant*

February, 2022

*In Appreciation –
The researchers would like to thank all those who participated in the focus groups, interviews, and survey. Their willingness to share time with us while balancing a stressful workload is greatly appreciated. Special thanks are also extended to Jennifer Saylor,*

our statistician who supported the analysis of the survey. We are in debt to Marjorie Cole for her dedication to school health, her insights into the school nursing, her leadership and resourcefulness during challenging times, and her vision of identifying lessons learned for future school health leaders. Finally, we applaud and recognize the exemplary Missouri school nurses for putting their students’ and school communities’ needs ahead of their own, for their commitment to school health, and for their generous hearts.

References:

1. Missouri information provided in personal communication from State School Nurse Consultant.
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6. Choflet, A., Barnes, A., Zisook, S., Lee, K. C., Ayers, C., Loivula D., Ye, G., & Davidson, J. (2022). The nurse leaders’ role in nurse substance abuse, mental health, and suicide in a peripandemic world. *Nursing Administration Quarterly* 46(1), 19-24.

COVID-19'S IMPACT ON HEALTH OF THE UNSHELTERED

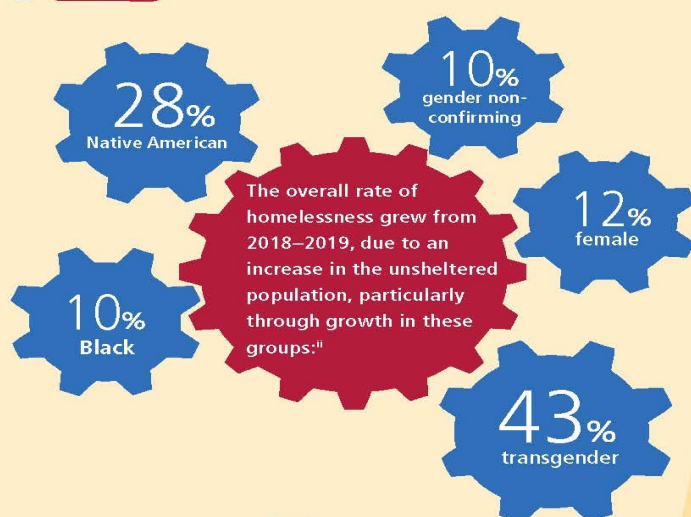


PROBLEM

PRE-PANDEMIC

People experiencing unsheltered homelessness — such as those sleeping in parks and vehicles or on streets — were at higher risk of physical and mental health issues than their sheltered counterparts.ⁱ

 **1 in 3** individuals experiencing homelessness is unshelteredⁱⁱ



NOW

Those experiencing unsheltered homelessness are at high risk of COVID-19 morbidity and mortality because they are less connected to health care and other support systems and more likely to have other health conditions. And, the groups that have increased the unsheltered population also represent those most at risk of negative health consequences of COVID-19. Despite increased risks, the true impact of the pandemic on the unsheltered is unknown, due to extremely limited data.



WHAT PUBLIC HEALTH CAN DO

SHORT TERM



- ▶ ENGAGE with local housing groups to support rapid-rehousing efforts. Check out the [Homekey Program](#) supporting Californians experiencing homelessness during the pandemic.
- ▶ ADVOCATE for local, state and federal COVID tracking systems to incorporate housing status to determine the health impact of the pandemic on those experiencing homelessness.
- ▶ SUPPORT efforts to prioritize COVID-19 vaccination of vulnerable groups, especially those experiencing unsheltered homelessness.

LONG TERM



- ▶ ENGAGE with housing groups to support Housing First approaches such as [Permanent Supportive Housing](#), which increases access to health services and housing stability.
- ▶ WORK with community-based organizations serving groups that experienced recent growth — such as BIPOC and LGBTQ+ and women-serving organizations — to identify common barriers to housing.

ⁱ Montgomery, Ann E., Dorota Szymkowiak, Jessica Marcus, Paul Howard, and Dennis P. Culhane. 2016b. "Homelessness, Unsheltered Status, and Risk Factors for Mortality: Findings from the 100,000 Homes Campaign." *Public Health Reports* 131 (6): 765–72. <https://doi.org/10.1177/0033354916667501>

ⁱⁱ Henry, Meghan, Rian Watt, Anna Mahathey, Jillian Ouellette, and Aubrey Sitler. 2020. *The 2019 Annual Homeless Assessment Report (AHAR) to Congress. Part 1: Point-In-Time Estimates of Homelessness*. Washington, DC: US Department of Housing and Urban Development, Office of Community Planning and Development. Accessible here: <https://www.huduser.gov/portal/sites/default/files/pdf/2019-AHAR-Part-1.pdf>

#HealthierMO Update: Transforming the Future of Public Health in Missouri

Emily Fessler, Project Manager
#HealthierMO

As health equity is declared a public health emergency around the nation, there is an urgent need for Missouri public health professionals to grow their understanding of health equity principles and practices in order to infuse them into the foundational public health services framework, so they are equipped to assure health and well-being for every Missourian. In partnership with Consilience Group LLC and with expertise from the Health Equity Design Team, #HealthierMO developed a capacity building program entitled, “An FPHS Approach to Improving Well-Being for All Missourians.” This multi-faceted approach equips public health agencies to operationalize Missouri’s FPHS model in order to assure health equity for all Missourians.

Baseline Training: A baseline training ensures public health professionals understand a consistent set of definitions related to health equity, health disparities, and social determinants of health. These definitions are framed in data and case studies specific to Missouri and grounded in Missouri’s FPHS model.

Facilitated workshop: A facilitated workshop walks public health professionals through a deeper self-assessment of health equity practices within their agencies. Using a step-by-step workbook, agencies will develop action plans to build capacity individually and as an organization. The process equips public health practitioners to operationalize the FPHS model, grounded in health equity, regardless of their role in the field of public health.

Technical assistance and support: Agencies will embark on an action-oriented journey to apply health equity to the FPHS model framework and transform public health in their community. #HealthierMO will provide technical assistance and support to agencies throughout the journey.

This multi-faceted capacity building program equips public health professionals in Missouri with a shared understanding of health equity and the FPHS model, guides them as they operationalize the model in their work, and empowers them to implement practices and processes that will assure foundational public health services for all Missourians.

The capacity building program was launched during a virtual Lunch n Learn on May 4th, 2022. It was attended by 72 participants, Consilience Group, and #HealthierMO staff. Following the launch of the program, #HealthierMO will be pilot testing the capacity building program until May 2023. Utilizing funds from the Statewide Health Disparities Initiative, #HealthierMO will subcontract with multiple LPHAs to walk through the capacity building program. Additionally, the online asynchronous training and FPHS workbook have been made available to all of Missouri’s public health professionals through #HealthierMO’s website and our training portal page hosted by the Heartland Center at St. Louis University.

In May, #HealthierMO also launched an academic curriculum on the FPHS Model for faculty to utilize at various universities across Missouri to better equip students to enter our public health system. The FPHS academic curriculum can be accessed from our #HealthierMO website. #HealthierMO is highly committed to continuing to provide expertise,

technical assistance, and support to Missouri’s public health professionals and system going forward in our changing public health landscape.



tobacco free Missouri

Linda Cooperstock

On Friday, May 6, the Missouri House and Senate passed the governor's proposed budget which includes \$2.5 million in new funding for a youth vaping prevention campaign and tobacco prevention and cessation programming. This is a very significant increase from the \$400,000 current budget and is more than has been allocated to Missouri's tobacco control program in over a decade bringing the total funding to \$2.9m.

In the last two weeks of the legislative session, Tobacco 21 language was added on the House floor to SB 710 as an amendment, but that amendment was removed in the conference committee. There was also an effort by Representative Lovasco to add language preempting the regulation of the "sale or use" of tobacco products to that bill. Fortunately, that amendment was held off on SB 710, but he also distributed another version of preemption as



amendments for SB 908. Once again, fortunately, he was not recognized to offer those amendments, but it appeared as if others were going to do so, before the bill was laid over and events in the Senate changed the course of the bill. So although no state Tobacco 21 ordinance was passed, we are able to avoid preemption of tobacco sales preemption.

Newsletter Articles

All members of Missouri Public Health Association are invited to submit articles for our newsletter and we will welcome submissions on any public health related topic.

Please include the following information with your article submission:

- **Name**
- **Professional Affiliation or Academic Institution (if a student)**
- **Title of Article**
- **Reference List**
- **A Headshot or Photo of You Doing Public Health Work**

Please keep your article within 300-500 words. Articles from members will be reviewed by the Missouri Public Health Association Newsletter Editor. Email your articles and any questions to Sandy Boeckman at sboeckman@mopha.org or Abi Padgett at abipadgett@embarqmail.com.

FEBRUARY, JUNE, AND OCTOBER ISSUES

**NEWSLETTER ARTICLE SUBMISSIONS ARE DUE BY THE FIRST OF THE MONTH,
FOR THAT PARTICULAR ISSUE.**

A VISION FOR A HEALTHIER MISSOURI

Presented by

MPHA, MOALPHA, MOCPHE, MICH and MODHSS

September 21-22, 2022

Holiday Inn Executive Center
2200 I-70 Drive SW
Columbia, MO

Conference Objectives

Education . Networking . Involvement

- ◆ Provide information for public health professionals and governing body members, and partnership efforts to enhance the coordination of health and human services for Missourians.
- ◆ Provide an environment for information exchange among individuals involved in and impacted by the provision, support and use of public health services.
- ◆ Increase individuals' involvement in associations with a commitment to improving the health of all Missourians.

Speakers

Rex Archer, MD, MPH
Nicole Cope, Missouri Immunization Coalition
Emily Fessler, #HealthierMO
Elizabeth Friedman, MD, MPH, Children's Mercy-KC, University of Missouri-KC
Jaci McReynolds, MHA, #HealthierMO
Paula F. Nickelson, Acting Director, MODHSS
Angela Patel, Saint Louis University-School of Medicine
Jamie Wehmeyer, MJM Consulting: Our Journeys Matter
Nicole Williams, Missouri Immunization Coalition
NACCHO Representative

Tuesday, September 20, 2022

4:30 pm MoALPHA Session for New Administrators

5:00 pm MPHA Board Meeting

Wednesday, September 21, 2022

7:30 - 10:00 am Exhibitor Set-up

7:30 am Registration Opens

8:00 am MPHA General Membership Meeting

10:00 - 11:30 am **WELCOME**

Paula F. Nickelson, Acting Director, Missouri Department of Health and Senior Services; NACCHO Representative

OPENING SESSION

Honoring Our Journey: The Challenges of COVID-19 and How We Move Forward

Speaker: Jamie Wehmeyer, MJM Consulting: Our Journeys Matter

11:30 - 1:00 pm Awards Luncheon

1:00 - 2:30 pm **BREAKOUT WORKSHOPS**

Let's Stop HIV Together

Speaker: Kwame Chery, National Partnership's Team, Centers for Disease Control and Prevention

Period Products, Resources and Needs: A Perspective from Missouri's School Nurses

Speaker: Anne Sebert Kuhlmann, Saint Louis University

Fragility

Speaker: Norbert Goldfield, Ask Nurses and Doctors

Student Session

Moderator: Lynelle Phillips, University of Missouri-Columbia

2:30 - 3:00 pm BREAK with EXHIBITORS

3:00 - 4:30 pm **GENERAL SESSION**

COVID-19 Vaccine Hesitancy Impact on Routine Vaccine Uptake

Speakers: Nicole Cope and Nicole Williams, Missouri Immunization Coalition

4:30 pm MOALPHA Board Meeting

6:00 pm MICH Board Meeting

Thursday, September 22, 2022

7:30 am	Registration Opens
7:30 - 8:30 am	Breakfast with Exhibitors
7:30 - 8:30 am	MOALPHA General Membership Meeting
8:30 - 9:30 am	GENERAL SESSION <i>Addressing Missouri's Health Disparities through Operationalizing Missouri's FPHS Model</i> Speakers: Emily Fessler, MPH, #HealthierMO; Jaci McReynolds, MHA, #HealthierMO
9:30 - 10:30 am	GENERAL SESSION <i>Pathways to Accreditation and Beyond: Building Trust, Accountability, and Innovation to Better Serve Our Residents</i> Speaker: Rex Archer, MD, MPH, Public Health Accreditation Board, Kansas City University-College of Osteopathic Medicine
10:30 - 11:00 am	BREAK with EXHIBITORS
11:00 - 12:00 noon	BREAKOUT WORKSHOPS <i>Understanding and Addressing Vaccine Hesitancy with Behavioral Science</i> Speaker: Alex Francisco, City of Kansas City, MO Health Department <i>Community Health Workers in Public Health</i> Speakers: Tiffani Muessig, MODHSS; LaReecia Carter, Family Care Health Centers; Jill Taylor, Family Care Health Centers <i>Take Back Your Voice - The Public Health App</i> Speakers: Brianne Zwiener, Jefferson County Health Department; Kevin Cummings, OCV, LLC, ThePublicHealthApp.com <i>The Use of Community/Public Health Nursing Competencies (C/PHN) During the COVID-19 Pandemic</i> Speakers: Diane L. Smith, Missouri State University-Department of Nursing; Kayla Klein, DNP, RN, Taney County Health Department; Martha Smith, MSN, RN, MODHSS
12:00 - 12:30 pm	Luncheon
12:30 pm	CLOSING SESSION <i>Climate Change and Health in Missouri</i> Speakers: Elizabeth Friedman, MD, MPH, Children's Mercy-Kansas City, University of Missouri-Kansas City; Angela Patel, Saint Louis University-School of Medicine

Attendee Registration

(Please Print)

Name _____

Agency _____

Address _____

City/State/Zip _____

Phone _____ Email _____

Registration

(Check appropriate membership category/days)

<input type="checkbox"/> MEMBER - Two Days (9/21-22)	\$150
<input type="checkbox"/> Wednesday ONLY	\$75
<input type="checkbox"/> Thursday ONLY	\$75
<input type="checkbox"/> NON-MEMBER - Two Days (9/21-22)	\$300
<input type="checkbox"/> Wednesday ONLY	\$150
<input type="checkbox"/> Thursday ONLY	\$150
<input type="checkbox"/> FULL TIME STUDENT - Two Days*	\$70
<input type="checkbox"/> Full Time Student - Wednesday Only	\$35
<input type="checkbox"/> Full Time Student - Thursday Only	\$35
<input type="checkbox"/> RETIREE - Two Days	\$70
<input type="checkbox"/> Retiree - Wednesday Only	\$35
<input type="checkbox"/> Retiree - Thursday Only	\$35

10% Late Fee (after 9.12.22) \$ _____

TOTAL AMOUNT \$ _____

*Must be a FULL-TIME student currently enrolled in a
Missouri Institution of higher education

**I am/My Agency is Currently a
Member of the following
groups.**

(Check only the ones that apply)

- ☐ MOALPHA
☐ MPHA
☐ MOCPE

Breakout Workshops

(Check only the ones that apply)

Breakout - Wed., 1:00 - 2:30 pm

- ☐ Let's Stop HIV Together
☐ Period Products
☐ Fragility
☐ Student Session

Breakout - Thurs., 11:00 - 12 noon

- ☐ Vaccine Hesitancy
☐ Community Health Workers
☐ Take Back Your Voice
☐ Use of C/PHN Competencies

Payment Options

☐ **Credit Card** (MasterCard/Visa/Discover/American Express)
 ☐ **Check**
☐ **Invoice my Agency**

Credit Card # _____

Exp. Date _____ CVV Code _____

Complete the registration form and return to MPHA, 722 East Capitol Avenue, Jefferson City, MO 65101.

Phone: 573-634-7977 * Fax: 573-635-7823 * Email: sboeckman@mopha.org

All refunds are subject to a \$25.00 processing fee - No refunds will be made after September 1, 2022

Registration Deadline is September 12, 2022

Missouri Immunization Coalition

Paloma Martinez-Crespo, MS, Communications Director
Missouri Immunization Coalition



I had the honor of joining the Missouri Immunization Coalition (MIC) as the Communications Director in February 2022. I am humbled by the opportunity of working for an organization with statewide community outreach efforts like the MIC, building awareness for all vaccines. I have been performing different roles in the communication industry for the last 16 years, developing campaigns and journalistic investigations for various organizations. As the first COVID-19 cases were discovered in the Midwest, my interest in contributing to my community and helping them confront the pandemic rapidly increased. I believe the key to any communications campaign is knowing the audience's behavior, in this case, understanding their fears and concerns caused by the pandemic. During the last two years, I have had the privilege to work very close with healthcare workers, community leaders, and health authorities for the benefit of our community, implementing communication strategies in multiple languages to decrease the spread of COVID-19 through education, advocacy, and promoting the importance of COVID-19 immunizations.

As Communications Director, I am committed to planning and executing communication strategies to benefit the health and well-being of Missourians. The MIC is dedicated to decreasing the rate of all vaccine-preventable diseases in the Show-Me State.

My deepest gratitude to Missouri Immunization Coalition, the Executive Director, and the Board of Directors for their trust in the work I perform. I am very excited about future projects and collaborations across Missouri.

Missouri Immunization Conference 2022

There is no better time to talk about immunizations. The Missouri Immunization Conference brings together a diverse group of healthcare providers, public health professionals, business leaders, parents, and community members focused on reducing the spread of vaccine-preventable diseases through immunization education, advocacy, promotion, and statewide collaborative partnerships. Be a part of the conversation and join the Missouri Immunization Coalition (MIC) during the second annual virtual conference June 20-23, 2022, from 10:30 am – 1:30 pm for daily virtual lunch and learn sessions. “The conference provides continuing education for our healthcare providers,” said Nicole Cope, Executive Director, MIC. “Join us for dynamic speakers, educational sessions, and networking opportunities.”

Register at <https://moimmunize.org/mic-conference-2022/>.



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NOTE: The Executive Committee is made up of the President, President-Elect, Immediate Past President, Vice President, Secretary, Treasurer and the ARGC Representative.

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MPHA MEMBERSHIP

I want to help fulfill Missouri Public Health Association's mission to promote health in the State of Missouri!

- ☐ Regular/Public Health Nursing Membership - \$60.00
- ☐ Full-Time Student - \$30.00
- ☐ Retiree - \$30.00
- ☐ Yes, I'd Like to make a donation to the MPHA Educational Foundation \$ _____

MEMBER CONTACT INFORMATION

Name _____

Organization/Agency _____

Address _____

City, State _____ Zip _____

Phone _____ Fax _____

Email _____

AREAS of PROFESSIONAL INTEREST

(check all those that apply)

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> Citizen Health Involvement | <input type="checkbox"/> Infectious Disease | <input type="checkbox"/> Chronic Disease | <input type="checkbox"/> Health Care |
| <input type="checkbox"/> Public Health Nursing | <input type="checkbox"/> Support Services | <input type="checkbox"/> Environmental Health | <input type="checkbox"/> Food and Nutrition |
| <input type="checkbox"/> Health Promotion | <input type="checkbox"/> Health Official | <input type="checkbox"/> Other _____ | |

MEMBERSHIP PAYMENT OPTIONS

- ☐ Check Enclosed ☐ Master Card/VISA/Discover/American Express

Card # _____ Exp. Date _____

Mail completed form to MPHA, 722 E. Capitol Avenue, Jefferson City, MO 65101.

If you have questions, Phone: 573-634-7977 or Email: sboeckman@mopha.org.

www.mopha.org
