

HEALTH FIRST INDIANA



Lake County Health Department
2900 West 93rd Ave., Crown Point, IN 46307 | Phone: 219-755-3655

HEALTH FIRST INDIANA GRANT APPLICATION

Under Indiana law, the Lake County Health Department (“LCHD”) is empowered to grant money from their allocated Health First Indiana (“HFI”) funds to external organizations which agree to complete Core Public Health Services (“CPHS”) and work toward completion of the required Key Performance Indicators (“KPIs”).

Health First Indiana Website: <https://www.in.gov/healthfirstindiana/>

Public health services are most effective when provided by local health departments (LHDs) that are positioned to meet the needs of their communities. These core services outline the initiatives and activities at the heart of public health that are the critical framework of any local health department. Some are required by law, and some are offered by many health departments. Every Hoosier deserves access to these foundational public health services no matter where they live.

LHDs, with support from partners and community stakeholders, determine needs of the community, and implement accessibility strategies, including addressing social determinants of health, in all aspects of planning, operations, and core services. The Indiana Department of Health surveyed each local health department to determine how these core services are provided across Indiana. Click below to see a snapshot of each core service.

Please fill out the attached proposal in its entirety and include any necessary and appropriate documents.

- The KPI’s listed throughout this proposal application are not comprehensive. They are current guidelines and metrics that have been enumerated by the Indiana Department of Health (IDOH), however, they are in flux.
- If your program fills the purpose as enumerated in the “Purpose” chart of Section 2 below, but the deliverables from Section 5 do not match up directly with your program metrics, list them separately under the “Deliverables” section of this application.

1. ORGANIZATION

1.1 Name of Organization: IUSM Northwest Center

1.2 Contact Name and Title: Tatiana Kostrominova, Ph.D., Associate Professor, and Amy Han, Ph.D., Assistant Professor

1.3 Address: 3400 Broadway, Gary, IN 46408

1.4 Phone: 219-981-5681 and 219-980-6561

1.5 Fax: 219-980-6566

1.6 Email: tkostrom@iu.edu and amyhan@iu.edu

2. PROGRAM

Name of Program Proposal: Educating Lake County residents on disease prevention and

2.1 improving health through health screenings and referrals.

2.2 Target Population: Teenagers at local schools, adults at food pantries and churches, and seniors at nursing facilities.

2.3 Objective: Improving health education and screening for chronic diseases.

2.4 Program Goal: The goal of the current proposal is to design, organize, and conduct activities and improve health disparities that are currently present in the Lake County communities.

2.5 Program Scope: We will organize presentations on health-related topics and disease prevention. IUSM NW medical students under the supervision of faculty will develop and conduct hands-on educational activities in Lake County. We will focus our efforts on two populations:

a) Presentations for adults at nursing homes, food pantries, and churches.

b) Presentations for children at local schools and summer camps.

3. **FINANCIALS**

3.1 Total Program Amount Requested: \$102,710.00

3.2 Breakdown of Total Program Amount Requested.

Sample Chart

Item Description	Price	Quantity	Total
TBD / Supervising MD		For entire project	\$21,084.00
TBD /Project Coordinator		For entire project	\$31,626.00
SUPPLIES: InBody970 Bioelectrical Impedance Analysis (BIA) device (\$27,000), two medical professional blood pressure monitors, two glucose monitors and strips, one MyotonPRO, and one handgrip device.		For entire project	\$35,000.00
OTHER EXPENSES: Participants' incentives cost (giveaway health promotional items, etc.)		For entire project	\$10,000.00
EDUCATIONAL MATERIALS (Brochures, health cards, referral cards, etc.)		For entire project	\$5,000.00
Total Direct Cost			\$102,710.00

3.3 Proposed Schedule of Payments.

Sample Chart

Payment #	Due Date	Description	Amount
1	07/01/2024	First payment	\$35,000.00
2	12/01/2024	Second payment	\$20,000.00
3	03/01/2025	Third payment	\$20,000.00
4	07/01/2025	Fourth payment	\$20,000.00
5	12/01/2025	Fifth payment	\$7,710.00
Total Direct Cost			\$102,710.00

The first payment of \$35,000.00 is required to buy the medical equipment needed for the optional health screening.

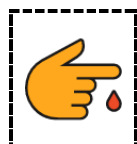
4. PERFORMANCE AND DELIVERABLES

Program and Scope for Selected Core Service - check one or more:

X	Item	Name	Scope
	A.	Tobacco and Vaping Prevention and Cessation	Preventing and eliminating risk of disease due to tobacco use and vaping.
	B.	Trauma and Injury Prevention	Preventing harm due to injury and substance use and facilitating access to trauma care.
X	C.	Chronic Disease Prevention	Preventing and reducing chronic diseases such as obesity, diabetes, cardiovascular disease, and cancer.
	D.	Maternal and Child Health	Services focused on the health and well-being of mothers, children, and families, including prenatal care.
	E.	Fatality Review	Analysis of data and potential causes of child deaths, fetal and infant mortality, and suicide/overdose fatality.
	F.	Lead Case Management and Risk Assessment	Ensuring all children have access to blood lead level testing and appropriate clinical and environmental services if necessary.
X	G.	School Health Liaison	Assisting schools with resources to promote whole student health.
X	H.	Access and Linkage to Clinical Care	Facilitating access to essential healthcare services for all members of the community.
	I.	Infectious Disease Prevention and Control	Monitoring and managing the spread of diseases within a community.
	J.	TB Prevention and Case Management	Preventing the spread of tuberculosis and ensuring appropriate access to care and resources for those who have TB.
	K.	Immunizations	Providing vaccinations to children and adults to prevent the spread of infectious diseases.
	L.	Health-Related Areas during Emergencies or Disasters	Planning and coordination for responding to public health emergencies and disasters.
	M.	Vital Records	Providing accurate documentation of births, deaths, stillbirths, fetal deaths, adoptions, and biological parentage.
	N.	Food Protection	Ensuring safety of food at the grower, wholesale, and retail levels.
	O.	Environmental Health	Ensuring the safety of the physical environment to protect public health.

- 4.1 Project Work Plan – attach a separate document, which includes an outline of how the program is created/adopted, implemented, and executed, and any relevant timelines, if applicable
- 4.2 Deliverables – attach a separate document, see Section 5.
- 4.3 Reporting Format – attach a separate document, see Section 5 and sample below.
- 4.4 Reporting Frequency: **Every 6 months**
- 4.5 Note: Reports go to Michelle Arnold at arnolml@lakecountyin.org.

5. **DELIVERABLES, METRICS AND REPORTING**



C. Chronic Disease Prevention

Indiana ranks 12th highest in the US for adult obesity, with 2/3 of adults being overweight or obese. In Indiana, 1/3 of children are overweight or obese. Obesity is a common risk factor for many chronic diseases, including heart disease, cancer, and diabetes. A key step in addressing chronic disease and obesity prevention is building and maintaining a healthy community coalition that represents the whole community.

KPI

Number of counties that through a healthy community coalition have a comprehensive, evidence-based program to address obesity and obesity-related disease prevention.

LCHD is seeking a comprehensive, evidence-based program and/or promising practice(s) to address obesity and obesity-related disease prevention within our community.

DELIVERABLES AND REPORTING

Program name:		
Item	Name	Scope
C.	Chronic Disease Prevention	Preventing obesity, diabetes, cardiovascular disease, hypertension, hyperlipidemia, kidney disease, hepatitis C, and cancer.
Deliverable	Metric	Value
Presentations for adults at nursing homes, food pantries, and churches.	The number of people attending presentations on health-related topics and disease prevention, and optional health screening/referrals.	[The number of presentations and the number of people.

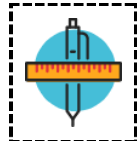
CHRONIC DISEASE PREVENTION METRICS

Metrics

- The number of presentations organized for adults at nursing homes, food pantries, and churches.
- The number of people attending presentations organized for adults at nursing homes, food pantries, and churches.
- The number of people participating in optional health screening after the presentations organized for adults at nursing homes, food pantries, and churches. Optional blood pressure tests, glucose tests, BIA screening tests, and handgrip tests will be offered after every educational activity.
- The number of people participating in the optional Depression screening test (Patient Health Questionnaire-9; PHQ-9) after the presentations organized for adults at nursing homes, food pantries, and churches.
- The number of people participating in Focused Group Interviews and Motivational Interviews after the presentations organized for adults at nursing homes, food pantries, and churches.

Lake County Health Department

- The results of the pre-and post-surveys of the participants of presentations organized for adults at nursing homes, food pantries, and churches.
- The results of the pre-and post-surveys of the participants of presentations organized for adults at nursing homes, food pantries, and churches will be evaluated, organized, and presented at scientific meetings and published as research papers in high-ranking journals.
- The number of people offered for the referrals after the presentations organized for adults at nursing homes, food pantries, and churches.
- The number of people offered educational brochures and lists of available Lake County health resources developed by students/faculty and distributed during the presentations organized for adults at nursing homes, food pantries, and churches.



G. School Health Liaison

Over 1 million students attend K-12 schools in Indiana, and school health liaisons support schools across the state. Research shows that healthier students learn better and have greater academic success, leading to a lifetime of better health outcomes. Providing access to health services, such as vision, hearing and dental screenings, while limiting youth risk behaviors, supports community, physical, and intellectual development that can continue into adulthood.

KPI

Number of counties partnering with schools, based on community need, to implement wellness policies and comprehensive strategies to promote student health.

LCHD is seeking to partner with schools, based on community needs, to support school wellness policies and promote comprehensive strategies to improve student health.

DELIVERABLES AND REPORTING

Item	Name	Scope
G.	School Health Liaison	Assisting schools with resources to promote whole student health.
	Deliverable	Metric
	Presentations for children at local schools and summer camps.	The number of children attending presentations on health-related topics and disease prevention activities.
		Value
		The number of presentations and number of children.

SCHOOL LIAISON METRICS

Metrics

- The number of Healthy Lifestyle presentations organized for children at IUN Kids College, local schools, and summer camps.
- The number of children attending Healthy Lifestyle presentations organized at IUN Kids College, local schools, and summer camps.
- The results of the pre-and post-surveys of the participants of Healthy Lifestyle presentations at IUN Kids College, local schools, and summer camps.
- The results of the pre-and post-surveys of the participants of Healthy Lifestyle presentations at IUN Kids College, local schools, and summer camps will be evaluated, organized, and presented at scientific meetings and published as research papers in high-ranking journals.
- The number of Healthcare Career Options presentations organized for children at IUN Kids College, local schools, and summer camps.
- The number of children attending Healthcare Career Options presentations organized at IUN Kids College, local schools, and summer camps.

- The results of the pre-and post-surveys of the participants of Healthcare Career Options presentations at IUN Kids College, local schools, and summer camps.

- The results of the pre-and post-surveys of the participants of Healthcare Career Options presentations at IUN Kids College, local schools, and summer camps will be evaluated, organized, and presented at scientific meetings and published as research papers in high-ranking journals.



H. Access to and Linkage to Clinical Care

Some communities, such as those in rural areas, often face higher rates of chronic disease and limited access to health care. Access to public health services in all counties will enhance the health and well-being of all Hoosiers, reduce disease, and improve health outcomes.

KPI

Number of local health departments providing accessible, equitable clinical services, such as those related to communicable diseases, to meet the needs of the community.

KPI

Number of local health departments engaging with the local and state health delivery system to address gaps and barriers to health services and connect the population to needed health and social services that support the whole person, including preventive and mental health services.

LCHD is seeking to engage with local and state health partners to address gaps and barriers to health services in our community and connect the population to needed health and social services that support the whole person, including preventive and mental health services.

LCHD is seeking to provide accessible, equitable clinical services, such as those related to communicable disease, to meet the needs of the community.

DELIVERABLES AND REPORTING

Item	Name	Scope	
H.		Access to and Linkage to Clinical Care	Facilitating access to essential healthcare services for all members of the community.
	Deliverable	Metric	Value
	Referrals after the presentations on health-related topics and disease prevention.	The number of people obtaining referrals after the presentations on health-related topics and disease prevention.	The number of people that obtained the referrals.

SCHOOL LIAISON METRICS

Metrics

- The number of optional health screenings organized for adults at nursing homes, food pantries, and churches.
- The number of people attending optional health screenings organized for adults at nursing homes, food pantries, and churches.
- The number of people screened for high blood pressure and glucose tests at optional health screenings at nursing homes, food pantries, and churches.

- The number of people identified with undiagnosed high blood pressure and elevated glucose tests at optional health screenings at nursing homes, food pantries, and churches.
- The number of people screened for BMI/Body Composition (BIA) at optional health screenings at nursing homes, food pantries, and churches.
- The number of people referred to a weight treatment or obesity prevention program at optional health screenings at nursing homes, food pantries, and churches.
- The number of people screened for handgrip tests at optional health screenings at nursing homes, food pantries, and churches.
- The number of people referred to exercise programs to improve muscle strength at optional health screenings at nursing homes, food pantries, and churches.
- The number of people screened for depression screening tests at optional health screenings at nursing homes, food pantries, and churches.
- The number of people referred to mental health programs at optional health screenings at nursing homes, food pantries, and churches.