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JULY + AUGUST 2019

HEALTH

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HEALTH

matters™



THE OPIOID CRISIS

Kansas and Missouri Saving and Restoring Lives



Bobbi Jo Reed

Strong Weapon Against Opioid Addiction

Much has been said about how to stop the opioid epidemic that is resulting in record numbers of people dying from overdose. What we do know is people with opioid use disorders need access to quality treatment and recovery services, as soon as possible. In response to the epidemic, Missouri funds four State Targeted Response Recovery Community Centers. These Centers provide Opioid Use Disorder (OUD) support services. Healing House is the only one in Kansas City.

Ms. Bobbi Jo Reed, a former addict and alcoholic, had a vision in 2001. Reed understood the challenges faced by men and women in addiction recovery. Her experience led her to open Healing House, Inc. The mission was and remains today, to deliver caring, accountable and a safe living environment for people to focus on their new life in recovery.

KEY TO ADDICTION RECOVERY

Real transformation takes shape when people in recovery live among other men or women who have had the same experiences.

Healing House provides help and healing to nearly 700 men and women yearly. Since opening, over 7,000 individuals have been served with an extraordinary 75% success rate while in Healing House programming.

WHO QUALIFIES TO RECEIVE SERVICES?

Anyone with a drug or alcohol addiction can receive services. Families can also attend training on how to administer Naloxone, a medication designed to rapidly reverse opioid overdose.

SERVICES OFFERED:

Healing House focuses on four key areas: recovery support, transitional housing, education and employment.

HOW YOU CAN HELP:

Healing House, Inc., is a not-for-profit 501 (c) (3) public charity. For more information and to donate, visit www.healinghousekc.org or call 816) 920-7181.



4505 St. John Avenue, Kansas City, MO 64123
Phone: 816.920.7181
24 Hour Support Line: 855.770.HOPE (4673)



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Dying to Live

Families want to know more about opioid addiction, prevention and treatment. Recently an *Our Health Matters*™ reader called to thank us for approaching the topic of the opioid crisis. She shared that her 26-year-old granddaughter has an opioid addiction and just recently went into treatment in California. I could feel her pain. She wanted to know more about opioids and how she could help her granddaughter.

According to the National Institute on Drug Abuse, every day, more than 130 people in the United States die after overdosing on opioids. The misuse of and addiction to opioids — including prescription pain relievers, heroin, and synthetic opioids such as fentanyl — is a serious national crisis that affects public health as well as social and economic welfare. The Centers for Disease Control and Prevention estimates that the total “economic burden” of prescription opioid misuse alone in the United States is \$78.5 billion a year, including the costs of healthcare, lost productivity, addiction treatment, and criminal justice involvement.

In this edition, we explain what is causing increased deaths; how Missouri and Kansas are approaching the epidemic; what policies and resources have been made available and encourage families to seek help from community organizations and their medical providers for alternatives to pain management.

Get to know COMBAT director Vince Ortega. He is sounding off about edible marijuana products that can lure kids into experimenting with drugs. E-cigarettes and vaping have become a fad and a harmful one, at that.

On a lighter note it's summer.

Let's get outdoors! On page 21, we have a short list of fun places for your family to take in. Enjoy life, relax and treasure every moment you have with your family and friends.



Let's get and stay healthy.
I would love to hear from you. Email me personally at ruthramsey@kcourhealthmatters.com.

Ruth Ramsey, Publisher and CEO

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Stroke rehabilitation— Life-changing results

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E-Cigarettes or Vaping

No matter what name they call it, there's cause for concern.

Before the landmark 1964 Surgeon General report brought awareness to the detrimental effects of cigarettes, more than 40% of American adults were addicted to smoking. Today, the Surgeon General is not only addressing the health concerns of adults who smoke traditional cigarettes, but also the epidemic rise in electronic cigarette (e-cigarette) use by youth.

E-cigarette devices warm liquid into vapor that users inhale into the lungs. Liquid flavors such as bubble gum and cotton candy appeal to youth who may find the taste of cigarette smoke unpleasant.

Get the facts and know the risks!

The Centers for Disease Control states more than 3.6 million middle and high school students were e-cigarettes users in 2018. Many express concerns that the attractive packaging of e-cigarettes disguises major health consequences such as harmful effects on the brain and high rates of addiction.

The National Academies Press reports there is conclusive evidence linking the liquid in e-cigarettes to potential brain injury. People under age 25 are especially vulnerable due to lack of full brain development in areas that receive and process information. Inhaling substances found in e-cigarettes disrupt vital brain systems in young people, leading to challenges with attention, impulse control, and decision-making.

High levels of nicotine are a key ingredient in leading e-cigarette brands. Studies show 63% of 15-24-year-olds

who use these products are unaware of their exposure to nicotine. Nicotine is highly addictive. It is the link to increases in tobacco use among many middle and high school students according to a study funded by the National Institutes of Health. E-cigarettes are currently the most popular method for young people to use tobacco. Early prevention of tobacco use is essential to reducing tobacco-related illness and death for future generations.

Nicotine use and dependence often encourage users to experiment with other addictive substances such as marijuana. A 2018 report from the National Institute of Drug Abuse (NIDA) shows 13% of 12th graders use marijuana



By Tenille L. Lawson
PharmD, BCPS

PEOPLE UNDER AGE 25 ARE ESPECIALLY VULNERABLE DUE TO LACK OF FULL BRAIN DEVELOPMENT IN AREAS THAT RECEIVE AND PROCESS INFORMATION.

in their e-cigarette device. Students who use marijuana are more likely to perform poorly in school, drive unsafely, and they suffer from depression or anxiety. Furthermore, marijuana use in adolescence is linked to higher unemployment rates and lower incomes as adults.

Many young people are unaware of the harmful risks associated with using e-cigarettes. Fortunately, information is available that provides facts about the potential dangers of these devices. To learn more, visit www.e-cigarettes.surgeongeneral.gov.

Opioid Overdose Can be Reversed... If You Know How

Three Steps to Save a Life

By **Tenille L. Lawson**, PharmD, BCPS

The Centers for Disease Control and Prevention reports that over 25,000 lives have been saved using naloxone to reverse opioid overdoses between 1996 and 2014. Because naloxone effectively reduces mortality (death), pharmacies nationwide can provide it to anyone without a prescription from their physician. Let's review three necessary steps to provide naloxone appropriately.

Step 1: Stop, Look, and Listen.

Opioids, including heroin and pain medications such as fentanyl, cause breathing to STOP during an overdose. LOOK for life-threatening symptoms such as unresponsive behavior, pinpoint pupils, and abnormal breathing to occur even if the last opioid was taken hours earlier. LISTEN to your head and your heart, then act. Quick responses save lives every single day.

Step 2: Give Naloxone. Immediately!

Two to three minutes separate someone from life or death during an opioid overdose. That is how quickly naloxone blocks the effects of opioids on the brain centers that restore breathing. For over 40 years, ambulances and emergency room staff have witnessed the life-saving effects of naloxone given as an intravenous injection. These successful outcomes led to the development of two devices that are now available for take-home administration.

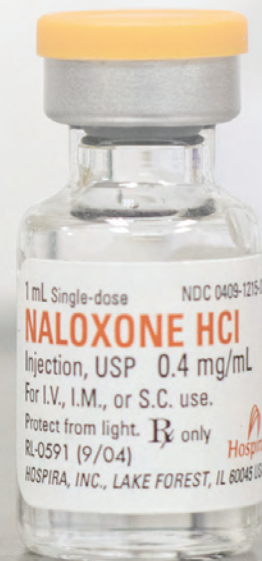
The first device is a talking auto-injector that is available for administration by family members or bystanders to at-risk individuals. Although it uses a needle to provide the medication, it offers verbal and visual aids to guide users through the stressful moments of an overdose. The injector unit dispenses naloxone into the thigh muscle through clothing, including jeans, as seconds count toward survival. Statistics show more than 5,000 lives have been saved using this innovative technology.

The second device is formulated as a single-use nasal spray that rapidly releases naloxone without using a needle. One spray into the nostril delivers the initial dose; however, a second dose should be sprayed into the other nostril if the person is not responsive in 2 to 3 minutes. Repeat this process until breathing returns to normal or emergency help arrives.

Step 3: Call 911 and Wait for Help.

Naloxone typically wears off in 30 to 90 minutes; therefore, it is critical to call 911 and wait for the emergency team. Trained professionals will give additional medication and address withdrawal symptoms. This last step is essential to increase chances of survival.

Visit drugabuse.gov and surgeongeneral.gov for more information on naloxone and opioid overdose. •





Blood Pressure Monitors Vary by Style

Which one is best for you?

American Heart Association

Many people have high blood pressure (HBP) for years without knowing it. Generally, there are no symptoms, but when elevated blood pressure goes untreated, it can damage arteries and vital organs throughout your body. That's why it is often called the "silent killer," because it can cause a stroke and possibly death.

People often make the mistake of assuming symptoms will alert them to their high blood pressure. However, HBP can only be diagnosed by using a device to measure your blood pressure. Not that long ago, this meant going to your doctor or a clinic and having a reading taken by a nurse or other healthcare professional. But today, there are accurate BP monitors at your local pharmacy and monitors you can buy to measure your blood pressure at home.

CHOOSING A MONITOR

The American Heart Association recommends an automatic, cuff-style, bicep (upper-arm) monitor. Ask your healthcare provider for advice in selecting and using one at home. Wrist and finger monitors are

not recommended because they yield less reliable readings.

MAKE SURE IT'S APPROVED

Make sure the monitor has been tested, validated and approved by the Association for the Advancement of Medical Instrumentation, the British Hypertension Society and the International Protocol for the Validation of Automated BP Measuring Devices.

MAKE SURE IT'S APPROPRIATE

When selecting a blood pressure monitor for the elderly, pregnant women or children, make sure it is validated for these conditions.

MAKE SURE THE CUFF FITS

Children and adults with smaller or larger than average-sized arms may need special-sized cuffs. They are available in some pharmacies, from medical supply companies and by direct order from companies that sell BP cuffs. Measure around your upper arm and choose a monitor that comes with the correct sized cuff.

GET IT CHECKED

When you get a new device, be sure to have it checked out by your healthcare provider to make sure the readings are accurate.

KEEP A RECORD

Managing your blood pressure can be easy thanks to the American Heart Association's Heart360® online tracking program. This tool is easy to set up and will provide you with plenty of ideas for healthy living. Through Heart360, the American Heart Association will be with you every step of the way in your march toward reaching your blood pressure goal. Create an account at Heart 360 and record your BP readings online. This is private and confidential, but you can share it with your physician as a part of treatment. If the internet isn't your thing, then write down your readings, note the blood pressure reading, the date and the time of day that you take the reading.

Source: American Heart Association

Publisher's Note: This information is provided as a resource to our readers. The tips, products or resources listed have not been reviewed or endorsed by Our Health Matters.



Walking the Walk and Talking the Talk

Faith and wellness team up.



In 2017 things changed in southeast Kansas City around 59th Street and Swope Parkway, thanks to the vision of Laura Hyland, RN, a nurse and member of Covenant Presbyterian Church. Armed with facts that there were people in their 64130 zip code who were living with chronic conditions such as high blood pressure, heart disease, diabetes, obesity, chronic pain, and depression, the church was determined to help. They developed an urban health ministry called Covenant Community Health and Wellness (CCHW). The goal was to support neighbors who wanted to live and eat healthier, increase physical active and pursue personal health goals. It's working — in the past two years CCHW has registered 1,100 neighbors in various programs.

FAITH IN ACTION

Covenant Community Health and Wellness conducts assessments of each participant, connect them to programs and monitor their progress.

CCHW is fortunate to have partners that include: University of Missouri-Extension, Primaris, Regional Arthritis Council, SE Youth Coalition, Fit Four U Exercise, KC Martial Arts Outreach and SilverSneakers-FLEX®.

WALKING CLUB ONE OF THE MOST SUCCESSFUL

CCHW's Walking Club has been operating for two years with astounding results, some of which are:

Blood pressures have decreased for all of the consistent walkers. Many have reported greater stamina, less pain, higher bone density, decreased cholesterol, increased weight loss, social connectedness and more joy, which contributes to good mental health.

Club members walk Monday through Thursday for 30-40 minutes. All levels of walkers are encouraged to join. Walking is an easy way to get started on the path to health. Other programs and activities include:

- Health Screenings.
- Referrals for medical and social services.
- Yoga and Tai Chi.
- Cardio & Strength Training.
- Diabetes Education Workshops.
- Chronic Pain Workshops.
- Cooking and Nutrition Classes.
- Computer Lab.
- Community Garden.
- Food Pantry.

CCHW is on a bus line and handicapped accessible. Hours are Monday-Thursday 8:30am - 1:00pm. Programs are free and available on a walk-in basis.

HOW YOU CAN HELP

Your donations will help CCHW continue this extraordinary work. To learn more and to make a donation visit: www.covenantwellness.org/donate or call 816-872-9301.



Have a Safe, Enjoyable and Tasty Grilling Season

These handy tips will help you do just that.

Before you fire up your grills again this summer, read these grilling and food handling safety tips from the Centers for Disease Control and Prevention, and the U.S. Consumer Product Safety Commission (CSPC).

The National Fire Protection Association states that an average of 10,200 home fires per year involve grills, hibachis, or barbecues. Following a few safety measures can help reduce fire dangers while grilling:

- **SAFETY CHECK.** Before lighting the grill, do a safety check. Visually inspect the hoses on a gas grill for cracking, brittleness, holes, and leaks.
- **CLEAN THE GREASE TRAP.** Ensure that the grease trap is clean to reduce the risk of flare-ups and grease fires.
- **USE GRILLS OUTSIDE ONLY, IN A WELL-VENTILATED AREA.** Never use a grill indoors, or in a garage, breezeway, carport, porch, or under a surface that will burn.
- **NEVER LEAVE A GRILL UNATTENDED** and keep children away from the grill area.
- **GRILL BRUSHES.** Prevent stray wire grill brush strands from ending up in your food. Clean your grill with a ball of aluminum foil or nylon brushes, instead of wire grill brushes.

FOOD SAFETY STARTS IN THE SHOPPING CART

Food poisoning peaks in the summer months when warmer temperatures cause foodborne germs to flourish. Be aware of the potential for cross-contamination.

SEPARATE. When shopping, pick up meat, poultry, and seafood last, right before checkout. Separate them from other food in your shopping cart and grocery bags. To

guard against cross-contamination, put packages of raw meat and poultry into individual plastic bags.

CHILL. Keep meat, poultry, and seafood refrigerated until ready to grill. When transporting, keep below 40°F in an insulated cooler.

CLEAN. Wash your hands with soap before and after handling raw meat, poultry, and seafood. Wash cooking surfaces, utensils, and the grill before and after cooking. Inspect. Throw out marinades and sauces that have touched raw meat juices, which can spread germs to cooked foods. Use clean utensils and a clean plate to remove cooked meat from the grill.

COOK. Use a food thermometer to ensure that your meat is cooked hot enough to kill harmful germs. When smoking, temperatures inside the smoker should be at 225°F to 300°F to keep meat safe while it cooks.

- 145°F - whole cuts of beef, pork, lamb, and veal (stand-time of 3 minutes at this temperature)
- 145°F - fish
- 160°F - hamburgers and other ground beef
- 165°F - all poultry and pre-cooked meats, like hot dogs

AFTER GRILLING.

- 140°F or warmer - until it's served

REFRIGERATE. Divide leftovers into small portions and place in covered, shallow containers. Put in the freezer or fridge within two hours of cooking (one hour if above 90°F outside).

Sources: US Consumer Product Safety Commission
US Centers for Disease Control and Prevention
National Fire Protection Association

Because everyone deserves to breathe easier this summer.

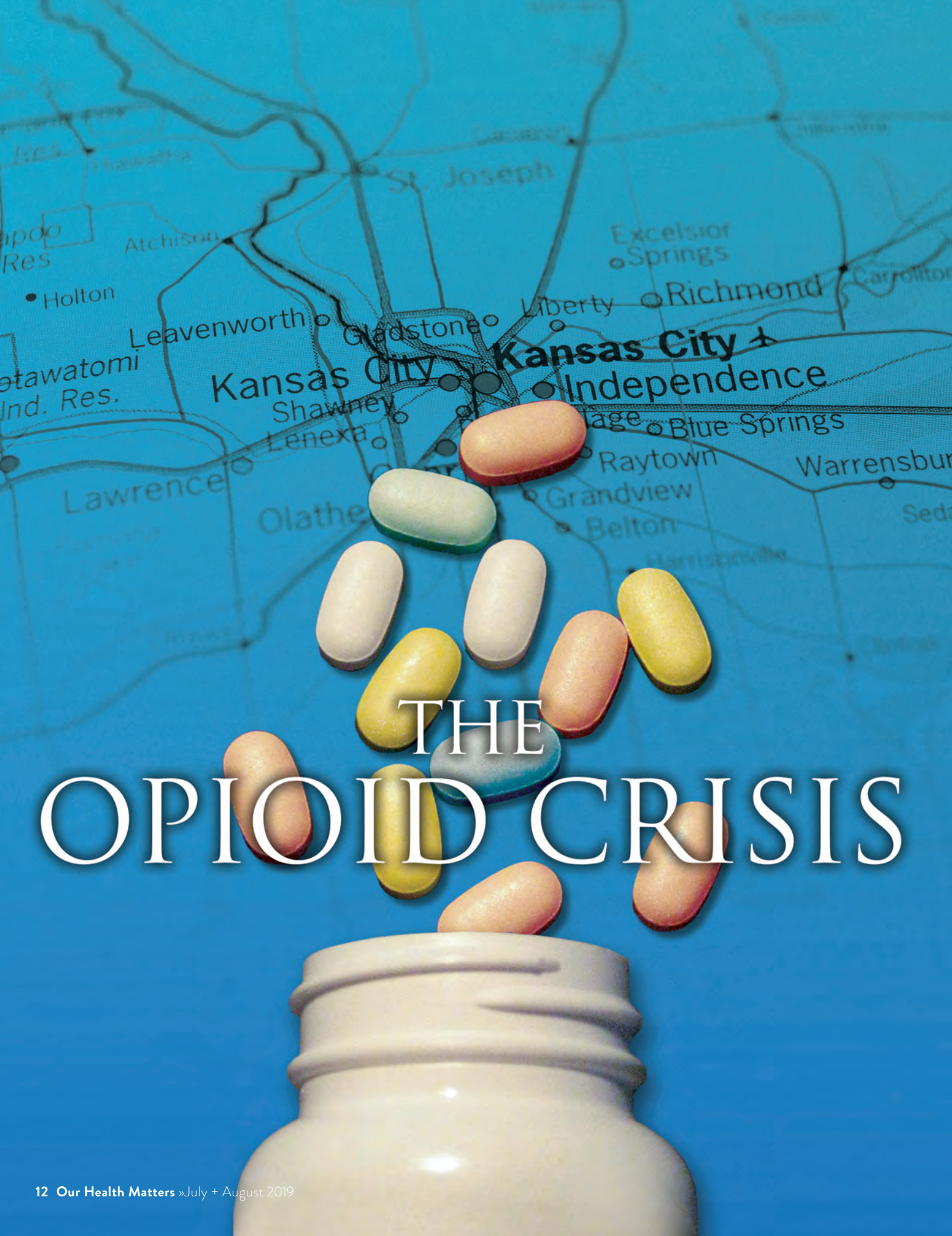
Air pollution can cause a variety of problems in healthy adults, including chest pains, coughing, nausea, throat irritation and difficulty breathing. Exposure to high levels of pollution is especially harmful to children, older adults and people with asthma and other respiratory diseases.



Help keep your family and friends healthy this summer:

- Follow the SkyCast at AirQKC.org for the daily ozone pollution forecast.
- When elevated pollution levels are predicted, consider scheduling outdoor activities before 10 a.m. or after 7 p.m.
- Tell your child's caregivers about the SkyCast and health risks of air pollution.
- Provide support to seniors, children and those with respiratory problems such as asthma or emphysema, as they are most often affected by air pollution.
- Help keep our air clean. Walk, bike, carpool or ride the bus to reduce emissions.

Clean Air • We've got this!  AirQKC.org



THE OPIOID CRISIS

Missouri Saving and Restoring Lives

WE BELIEVE ONE OUT OF THREE FAMILIES ARE SOMEHOW TOUCHED BY THE OPIOID EPIDEMIC. As the director of the Department of Health and Senior Services, I have been to every county in Missouri listening to citizens. There are some stories that stay with you forever. I vividly remember a young woman, who was in recovery for substance use, told me that while she was using opioids she just felt “like she was slowly waiting to die.” Another story was of the young women who overdosed with friends and was left by the side of the road to die because the people with her didn’t want to get arrested.

So where do we stand today in Missouri? In 2015, we had 672 people die from opioid misuse, and that drastically increased by 35 percent in 2016. Last year, the rate of increase was less dramatic at 4.7 percent, but still, we anticipate final numbers from 2018 will show nearly 1,100 fatalities. Two thirds of these fatalities occur in the St. Louis area and are driven by the availability of fentanyl and related products which are highly lethal.

The opioid epidemic is widespread

We have a problem in rural areas from oral prescription narcotics that people may initially use for back pain or dental pain, but because these drugs can be highly addictive, they often get hooked and then progress to injectable drugs like fentanyl. Sadly, 80 percent of people who use heroin or fentanyl started with prescription drugs, and 51 percent who abuse prescription drugs don’t get them from doctors, but obtain them from friends, neighbors or some other diverted source. The average time for people who die from heroin overdose is 3 years from the time of onset of abusing prescription drugs.

In the public health domain, we are big believers in prevention. Since so many people who eventually become addicted start with prescription drugs, either prescribed by a doctor or given to them illegally by a friend, we encourage people to always consider non-narcotic methods of treating pain, such as Motrin, Tylenol or physical therapy. Also, try to avoid taking opioids for chronic conditions

that last one year or more, limit your activities of daily living and require ongoing medical attention. We increasingly worry when patients get a narcotic prescription refilled more than one or two times for acute pain. Acute pain is a type of pain that typically lasts less than 3 to 6 months, or pain that is directly related to soft tissue damage such as a sprained ankle.

Remember, almost half of patients with narcotic addictions get pills from medicine cabinets of relatives or friends. Avoid the temptation to have narcotics unsecured in your house where a babysitter or child’s friend can be tempted to take them.



By Randall W. Williams
MD, FACOG, Director
Missouri Director,
Health & Senior Services

Missouri’s Good Samaritan Law

For the first time in Missouri’s history, you can now go to the drug store and get a prescription for a nasal spray, called Narcan, which saves lives by reversing the effects of an overdose. The prescription is written by me for all Missourians under the state’s universal Narcan law. Now under Missouri’s Good Samaritan Law, if you witness someone experiencing an overdose and seek help for that person, you will not be charged or prosecuted for possession of a controlled substance. Saving the life is the top priority for all.

And as I mentioned earlier, I have people come up and thank me because a loved one received Narcan from our state prescription. Someone’s life was saved so they could have another chance at living.

I will end as I started. We don’t want anyone in Missouri to face addiction or the opioid crisis alone. Let us help you identify the counseling and treatment services you need for recovery. For more information visit, www.missouriopioidstr.org. •

Kansas Saving and Restoring Lives

THE OPIOID EPIDEMIC IS CONSIDERED THE DEADLIEST DRUG CRISIS IN AMERICAN HISTORY. Prescription and illicit opioids are driving the U.S. drug overdose epidemic – accounting for more than two-thirds of the drug poisoning deaths nationwide in 2017. While Kansas has not, as of yet, faced the tremendous impact that many states have encountered, opioid abuse is a public health concern that we as a community must be proactive and vigilant in addressing.

Scope of the epidemic within Kansas

Drug poisoning remains a significant cause of injury death in Kansas, with 326 deaths in 2017 with a drug poisoning underlying cause of death at an age-adjusted mortality rate of 11.5 per 100,000 population. At least one-third of these drug poisoning deaths involved a non-heroin opioid.

Methods and programs Kansas is using to eliminate the problem

Kansas is proactively addressing the opioid crisis through federal and state-level programs, and strategic planning with stakeholders from various organizations and disciplines. The goal is to identify and implement prevention and intervention efforts around prescription drug and opioid abuse, to decrease fatal and non-fatal overdose rates in Kansas.

Various promotion, prevention, and treatment interventions have been implemented statewide. I'd like to expand on just a few of the initiatives in Kansas.

PRESCRIPTION DRUG OVERDOSE – DATA-DRIVEN PREVENTION INITIATIVE: This initiative is focused on state-level prevention of prescription and illicit opioid misuse and overdose through a three-pronged approach of planning, data, and prevention in action.

OPIOID OVERDOSE CRISIS RESPONSE COOPERATIVE (OOCR) AGREEMENT: Focused on provider community education and expanding access to substance use disorder and increasing opioid overdose surveillance in emergency departments.

STATE TARGETED RESPONSE TO THE OPIOID CRISIS – is focused on substance use disorder treatment. For

a list of grant funded treatment centers visit www.KDHEKS.gov.

PARTNERSHIPS FOR SUCCESS – Prescription drug overdose prevention sub-contracted to DCCCA (Douglas County Citizens Committee on Alcoholism), with emphasis on safe medication use, storage, and disposal for primary prevention.

Kansas has passed **GOOD SAMARITAN LAWS** with other legislative items such as the Naloxone legislation, as well as civil protections for healthcare providers or anyone who assists an individual in an emergency situation under KSA 65-289.



By Lee A. Norman
MD, MHS, MBA
Secretary, Kansas Department of Health and Environment (KDHE)
Kansas State Health Officer

What we can all do

While Kansas remains below the national average for fatal opioid overdoses, we must remain vigilant. There are things that every one of us can do to impact our community against this crisis.

TALK. If you're a parent, teacher, grandparent, foster parent, Big Brother, Big Sister, coach, pastor or someone who works with our youth – talk. Talk to the kids in your life about the opioid epidemic and outline your expectations that they not use substances. Kids listen more than we give them credit for.

GET HELP. If you have a substance problem, there are treatment and recovery options. From peer support to 12-step groups to counseling,

The SAMHSA Behavioral Health Treatment Services Locator website is a good resource. It's confidential and anonymous. Visit www.findtreatment.samhsa.gov

I encourage families to get counseling help through groups like Nar-Anon, which can be found at www.nar-anon.org/find-a-meeting.

I am pleased with the work we're doing in Kansas, Let's continue to save lives and increase awareness of this important topic. For more information visit: www.KDHEKS.gov. •

Keeping Marijuana Out of the Hands of Children

Legal marijuana products can be harmful.

Missouri recently joined more than 30 states to legalize medical marijuana. Ten states have also passed laws that no longer make it illegal to possess and use marijuana for recreational purposes. These laws can send mixed signals that make it appear to our kids that marijuana is acceptable and safe to use.

As regulations for medical marijuana dispensaries are being established in Missouri, COMBAT's partners in the community are worried about how this newly legal activity, which remains illegal in Kansas, is going to cause things to possibly heat up in current high crime areas and elsewhere in the Kansas City area.

The appeal of edibles

It should surprise no one that people are buying marijuana legally in one state and taking it illegally back to their home states. Today, high school kids are selling marijuana edibles to middle school and elementary school kids — edibles they might have obtained on a family vacation to Colorado and that come in a form appealing to a kid's sweet tooth (cookies, brownies, or gummies).

I'm sure these high school kids don't think of themselves as being "real" drug pushers. I fear all these kids believe eating marijuana in the form of a candy is "safe," especially compared to smoking a joint.



What makes edibles potentially harmful?

During my 30-year career with the Kansas City Police Department, one of my assignments was as an undercover detective in the Drug Enforcement Unit. I saw, firsthand, the

dealers' disgusting tactics to target kids, packaging their poison as if it's candy: ecstasy pills shaped like cartoon

characters, Strawberry Quick methamphetamine, marijuana-laced treats and soft drinks.

Marijuana edibles actually contain a much higher concentration of THC, the psychoactive component in cannabis that triggers the "high." The high from edibles can last as long as 10 hours but might not kick in

for about an hour. Since the effect isn't immediate — because they don't feel the high coming on — kids will tend to overindulge in the edibles, which will further stimulate the appetite.

Eaten in large doses, marijuana edibles cause anxiety attacks, paranoia and hallucinations. A major side effect among young kids is respiratory problems that make it difficult to get enough air to breathe.

Educate and talk with your kids.

Parents, guardians, teachers and anyone who interacts with youth need to start talking to kids NOW about the dangers of drug use in general, and in particular, edible marijuana. They need to know that drugs — even legal drugs — can be harmful. Make sure they understand marijuana, like any drug, has side effects and that no drug is perfectly harmless.

For more information about impact of legalized medical marijuana and concerns associated with edible marijuana visit jacksoncountycombat.com.

Vince Ortega served 30 years in the Kansas City MO Police Department, retiring as Deputy Chief in 2006. In 2018 he was named Director of Jackson County, Missouri's Community Backed Anti-Drug/Anti-Crime/Anti-Violence Tax (COMBAT) program. Ortega, holds a Master of Public Affairs from Park University.



By Vince Ortega

Director

Jackson County COMBAT

Finding Support for Opioid Use Disorder

Successful treatment leads to a healthier life

Kansas City, like so many other cities has found that it is not immune to the opioid crisis. Heroin and opiate overdoses are increasing in Kansas City with alarming numbers being reported from local hospitals. In recent years, there has been a significant increase in hospitalizations and unemployment along with a disturbing number of overdoses and deaths. The opioid crisis has created a trickle-down effect of devastation.

Heartland Center for Behavioral Change (HCBC) is committed to change how individuals with opioid use disorder receive help for their addiction and their recovery. Programs that include individual counseling and group therapy can go a long way, but for some, additional treatment is vital to their recovery. HCBC offers MAT (Medication Assisted Treatment) through its Medication Treatment Services (MTS) program. HCBC understands that addiction is a disease and for that reason, like other diseases, may need medication management. Under the direction of medical

professionals, individuals are prescribed medications to support their recovery. They also meet with the MTS Care Coordinator, where they receive ongoing education and continued reassurance that MAT can be beneficial to their recovery. Vivitrol, or Naltrexone, and Suboxone are medications that relieve individuals with opioid use disorder of their cravings and making it easier to focus on the behaviors behind their addiction.

Heartland Center for Behavioral Change has been offering MAT services for five years and in that time has seen a tremendous turnaround in consumer engagement and success. The convenience of immediate access to MAT from our onsite providers and telehealth services has made an undeniable impact on the number of consumers maintaining their sobriety and regaining a new outlook on life. The Medication Treatment Services program has been well-received by all, both consumer and staff alike.

For the consumers, MAT allows them to find balance and a sense of normalcy while providing a sense of security and stability in their everyday lives. It also helps



By Casey Spartz, CRADC

Kansas City Outpatient
Program Manager

DeLoris Robinson, LPN

Medication Treatment Services
Care Coordinator
Heartland Center for
Behavioral Change

with housing, employment, family relations and social interactions.

MAT supports consumers by engaging frequently with each individual and helping them successfully complete treatment. Consumers become re-engaged with society and most importantly, embrace the reality that they can have a healthy life of recovery.

Heartland Center for Behavioral Change takes pride in serving our community and being a positive contributor in fighting opioid crisis. •

Different Approaches to Pain Management from the Osteopathic Medical Community

The tragedy of opioid overuse in the United States that has resulted in powerful addiction, broken families and caused hundreds of thousands of deaths is real. The decision to limit opioid use, even this many years into the crisis, is an important step. But people are still in pain. Doctors must find a way to help manage it.

Opiates are medications that attach to receptors in the brain, spinal cord, and onto some nerves that let us feel pain. When an opiate attaches to a receptor, it alters how we feel the sensation of pain, but only for the time the medicine is active.

Opiates help people who have moderate to severe pain. They are sometimes life-changing in the way they can help some people who live with pain lead active lives. For example, a person suffering from bone pain due to metastatic cancer can regain some quality of life while taking these medications. But opiates should not be used for mild or some moderate pain, since long-term use — more than two weeks — can change the way our body reacts and cause it to require more of the opiate to get the same effect. Long-term use also creates a hypersensitivity to pain. When people stop taking the drug, they will feel more pain much more quickly than someone who has not taken it.

It's important to remember that opiates do nothing to affect the pain process itself. They only alter the sensation. As a physician, my goal is to always find out what is causing the pain and eliminate the source when possible.

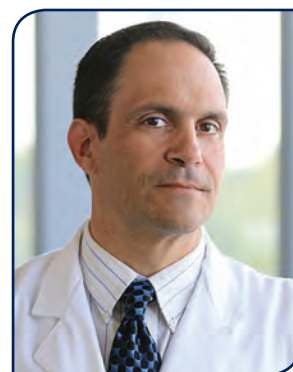
There are alternatives to opioids. They range from medi-

cations like ibuprofen or acetaminophen, to exercise, acupuncture and physical therapy, to name a few. Osteopathic manipulation can help re-establish normal function of joints, tissues and even metabolic function that often alleviates pain. As a physician trained in osteopathic manipulation, I have seen tremendous success, and relief of pain, in many of the patients I have treated. The research supporting the use of osteopathic manipulation is strong

in some areas and developing in others. Having a discussion with your physician who is trained in osteopathic manipulation can help identify the appropriate intervention for you.

Over the last decade, more people are looking for alternatives to medications because of the incredibly detrimental effects of long-term opiate use. Also, patients are often seeking alternative pain treatments and therapies so they can get off opiates and regain control of their lives.

Not everyone responds to alternative remedies, but most people get some form of benefit from them. And unless you try, you will never know. •



By Darrin D'Agostino
DO, MPH, MBA
Executive Dean, College of
Osteopathic Medicine
VP, Public Affairs





BHLI scholars visit Operation Breakthrough

Preparing the Next Generation of Healthcare Leaders

Eliminating health disparities are one of many goals.

By OHM Staff

Recently, *Our Health Matters* spoke to several scholars presenting their research on healthcare topics that public health and healthcare leaders are tackling everyday somewhere in our nation. These scholars are affiliated with the Bluford Healthcare Leadership Institute (BHLI). Universities represented by these scholars include:

- Bethune-Cookman University
- Emory University
- Fisk University
- Florida A&M University
- Morehouse College
- North Carolina A&T State University
- Rockhurst University
- Spelman College
- University of Missouri-Kansas City
- Washington University in St. Louis

We interviewed one of BHLI's rising stars, Kansas Citian Jada Large, who is well on her way to becoming a healthcare leader as she enters her junior year at Emory University in Atlanta, GA.

On May 28th, BHLI welcomed 14 scholars from universities across the country to complete Phase I (a 16-day overview to healthcare leadership) which included site visits to Cerner, Federal Reserve Bank, Kansas City Health Department, Operation Breakthrough, Swope Health, and Truman Medical Center

(TMC). Keynote speakers included Dr. Rex Archer, Director, Health Department of Kansas City; Dr. Ann Cary, Dean, School of Nursing and Health Studies at University of Missouri-Kansas City; Dr. Valerie Chow, Chair of Anesthesiology, TMC Lakewood; Dr. Roy Jensen, Director, University of Kansas Cancer Center; Richard Pollack, President/CEO of the American Hospital Association; Dr. Bruce Siegel, President/CEO of America's Essential Hospitals; and Qiana Thomason, Vice President Community Health, Blue Cross and Blue Shield of Kansas City, among others.

Our Health Matters (OHM): What is BHLI teaching you about leadership principles?

JADA: Active listening and effective communication are important components of leadership. Several speakers emphasized the importance of being present in a conversation, e.g., not being on electronic devices and asking good questions. Dr. Bruce Siegel said that effective leaders create a safe space for others' ideas and ensure that others know their ideas are being heard.

OHM: Which presentation impacted you the most?

JADA: Two statements from Qiana Thomason's Success to Significance presentation particularly resonated. First, "Show me your friends, and I will show you your future."

Secondly, “Never waste a good crisis, as from crises come great opportunities.”

OHM: What impact did the BHLI have on you personally?

JADA: I knew that I wanted to pursue a career in health to eliminate disparities in healthcare from outside the clinical realms of a physician, but I did not know exactly what my role would be. The BHLI provided clarity about leadership careers within the field. I realized the significant difference that one can make when sitting in a C-suite (corporate executive suite position). The BHLI developed my executive presence, and I feel that I am leaving the Institute a better, more confident communicator and critical thinker who can be successful in a leadership role.

OHM: What did you learn about access to care for vulnerable populations?

JADA: I learned that social determinants of health are primary factors that influence one’s health outcomes. While visiting the Kansas City Health Department, I learned about the differences in life expectancy by zip code throughout the city; there is nearly a 15 year difference between the affluent and less affluent areas of the city. Safety ‘quality’ net hospitals are valuable community assets because not only do they provide medical services for vulnerable populations, but they also work to address social determinants, such as transportation and lack of access to healthy food.

OHM: What key concept did you learn during the BHLI that you will implement immediately?

JADA: The fact that everything matters (even the smallest details) is a concept that I will implement for both myself and for organizations to which I belong.

Bluford states, “Jada is one of 32 outstanding metro Scholars who has participated in the Institute. This is the first in a series of inspiring articles as we witness her development through multiple experiences, working internships and full-time employment in the health field.”

Founded in 2013 by John W. Bluford, III, the Bluford Healthcare Leadership Institute (BHLI) develops culturally competent leaders who will serve to eliminate healthcare disparities among minority and vulnerable patient populations. The BHLI is a three-phase program that develops, mentors, and sponsors talented scholars for healthcare leadership. To date BHLI has mentored 51 alumni scholars who are serving in the health field in Kansas City and beyond. •



Jada Large, 2019 BHLI Cohort and John W. Bluford, III, President and Founder, BHLI.

These are a few examples of typical tasks performed by CNAs and course preparation. Agencies and states may have variations in these procedures. The CNA position is often the stepping stone for students to gain practical experience in the field. Many develop an increased interest in going on to nursing school.

To learn more about what CNAs do and where courses are offered visit our website at kcourhealthmatters.com

Certified Nurse Assistants (CNAs) are Important in Patient Care and Satisfaction

By Linda Kerby, RN – C-R., B.S.N., M.A., B.A.

WORDS A CNA WOULD SAY...

“Good morning, Mrs. Brown. My name is Susan and I will be helping you today with your shower, help you get dressed, make sure you have help eating, walking, and maybe some light exercise, if you are up to it. I will also be taking your pulse, temperature and blood pressure.”

Susan is working in a nursing home and she really loves her patients. She attended a 12-week, state-approved training program at a community college, spending 100 hours of classroom instruction and clinical application learning how to take care of patients. At the end of the program, she passed a state-approved competency examination which qualified her to become a Certified Nursing Assistant (CNA). The exam measures the nursing skills of the Nursing Assistants and goes by the name of Nurse Aide Assessment Examination.

“Good afternoon, Mr. Thompson. I am Tom Smith and I will be giving you your medications today.”

After Tom completed his CNA course and passed the state examination, he enrolled in a Medication Aide Program that lasted six weeks. The course is designed to prepare CNAs to administer medications under supervision and guidance. Licensed practical nurses and Registered Nurses usually provide this support. Tom is responsible for monitoring patients for reactions to medications and reporting changes to his supervisor. He obtained

Cardiopulmonary Resuscitation (CPR) certification through a local Red Cross chapter and completed the course in one day. He will be required to take a refresher course every two years. Tom was also required to pass a background check by the hospital where he applied for a job.

Tom enjoys his duties at a skilled nursing facility, where he administers medications to about 30 patients. He also does bandage changes and applies topical medications to skin wounds. He reports changes, whether improvement or decline, to his supervisor for notation in the patients' records and information for updating plans of care.

...“Good afternoon, Mr. Baldwin. My name is Patricia Jones. I am a Certified Nursing Assistant with (named home health care agency). I will be coming to your home twice a week to care for your wife's personal care needs such as, bathing and shampooing her hair....”

Patricia worked in a nursing home for two years after she completed her CNA certification and then she moved to a home health agency. She visits patients on a schedule based on their needs for care. In addition to personal care, she sometimes does family relief, so family members can have a few hours away from the home for shopping, errands, or doctor visits of their own. She likes the long-term aspect of her assignments, because she can really get to know her patients and their family members. •

SUMMERTIME IN THE CITY

YOU'LL LOVE THESE FAMILY-FRIENDLY VENUES

Kansas City is the place to be for family fun all year long, but especially in the summer. The city comes alive when the weather warms up. There is an abundance of exciting, educational, fun venues and experiences designed to cultivate a sense of wonder and discovery. Here are just a few that your family can explore.



For curious toddlers and preschoolers, one of the most popular spots in town is **Kaleidoscope**, a free, hands-on art center for children. Kaleidoscope offers a unique artistic environment where kids can design a craft item, cut, glue and decorate something on their own or with a little help from grown-ups. The takeaway is their own special works of art.



Jonathan Tasler

One of the nation's oldest and most historic landmarks is **Union Station**. Attractions here include **Science City**, an interactive science center; the **KC Rail Experience**; a planetarium; several performance theaters; traveling and holiday exhibits and a variety of dining options.



For baseball and jazz fans, grasp more of the history of this great American pastime and musical art form at the **Negro Leagues Baseball Museum** and the **18th & Vine Historic Jazz District**. The museum tells the story of the Negro National League (founded in 1920), its teams, players, innovators and more. The district is also home to the **American Jazz Museum**, whose displays celebrate the lives and music of many jazz greats.



Austin Walsh

At the **Kansas City Zoo** explore 200-plus acres where you will find more than 1,700 diverse creatures from Africa, Australia and Asia. Attractions here include a penguin plaza, tiger trail exhibit, KidZone, polar bear passage and an African Sky Safari, among many others.

MORE OPTIONS AROUND KANSAS CITY...

- ▶ The magic of puppetry takes center stage at the **Stone Lion Puppet Theatre**. Their original, full-scale productions incorporate multiple puppetry styles, including rod and shadow puppets, marionettes and more.
- ▶ For adventures in nature, visit the **Anita B. Gorman Conservation Discovery Center**. This family and environmentally friendly facility highlights wetlands, wildlife and 10 acres of gardens, smack dab in the middle of the city.
- ▶ Be sure to check out **Swope Park** for outdoor fun with the entire family. Encompassing more than 1,800-acres, it's KC's biggest and one of the largest urban parks in the country. From picnic areas to exercise and bike trails to cricket and soccer fields, playgrounds. For the athletic and sports enthusiasts there are baseball diamonds, a disc golf course, tennis courts, a pool and two golf courses—outdoor adventures have never been so much fun.



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ARE YOU PREGNANT? ... OR KNOW SOMEONE WHO IS?

Pregnancy can be a wonderful experience as a woman awaits the arrival of her baby. The first three months, or first trimester of pregnancy, is when prenatal care is most important. Regular checkups throughout pregnancy are crucial for making sure that everything is going well with the mother and baby. This is a time to ask questions and work to be as healthy as possible—for you and the baby.

Women who do not get prenatal care have more difficulty with birth and with the health of the baby. It is also during this time that an unborn baby is most likely to be harmed by alcohol, drugs, certain medications, and illnesses.

Early and consistent health care visits improves the mother and baby's chance of a healthy pregnancy and delivery. As soon as a woman thinks, or knows she's pregnant, she needs to schedule an appointment with a health care provider.

Women who do not have health insurance can find out if they are eligible to receive coverage by contacting the following:

In Missouri pregnant women who need health insurance coverage (Medicaid) can apply online at www.mydss.mo.gov or call **1-855-373-9994**. In Kansas www.kancare.ks.gov or call **1-800-792-4884, Option 2**.

A HEALTHY PREGNANCY CONTRIBUTES TO A HEALTHY BIRTH.



READERS NEAR AND FAR

We often hear from readers of Our Health Matters locally and across the country:

“Dear publisher,

I work at Johnson County Library, at the Shawnee branch (KS). I display your magazine on our bulletin board and it seems to be quite popular. I only have a few magazines of your May/June issue and wondered if you could send me another bundle of the May/June issue?”

*Thank You,
Hunter*

WHAT'S NEXT SEPT/OCT 2019

CHILDREN ARE OUR FUTURE

Children need to be loved, nurtured and prepared to tackle life as young adults. From prenatal, to birth, to adolescence, a child's physical, mental, social, educational health and family interactions play a role in raising a happy and well-adjusted child. We also know parents need resources and encouragement while preparing their children for the future. In the September-October edition we cover a series of topics including: Positive an Effective Parenting, Oral and Vision Care, Child Safety and Security, Importance of Vaccinations and Healthy Nutrition, to name a few. Join us as we address every corner of children's Mind, Body and Spirit.

NEED A DESTINATION FOR YOUR PRODUCT OR SERVICE MARKETING MESSAGE?

Contact the team at *Our Health Matters*. For nearly 15 years, we've helped business leaders reach the right people at the right time and all at the right price. Let us introduce you. To reserve your space, call 816.361.6400 or email your request to info@kcourhealthmatters.com

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