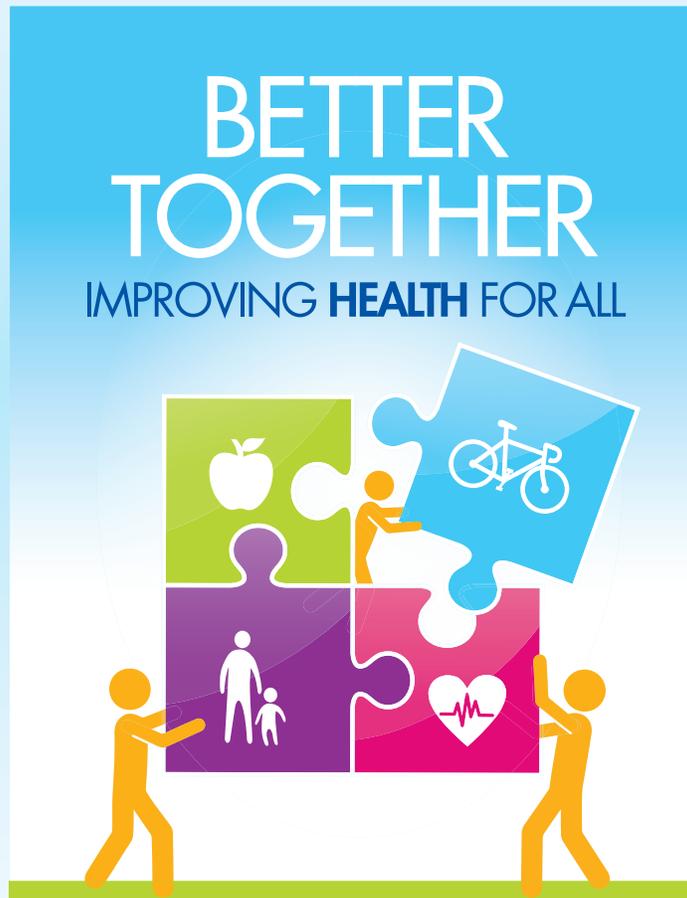


Good & HEALTHY

SOUTH DAKOTA

**Chronic Disease Partners Meeting
October 16-17, 2018**

Agenda



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Chronic Disease Partners Meeting October 16, 2018 – Day 1

Agenda

12:00 – 1:00

Registration

Highland Conference Center Lobby

1:00 – 1:15

Welcome

Ballroom A

COLLEEN WINTER, RN, Family & Community Health Division Director

KILEY HUMP, MS, Office of Chronic Disease Prevention and Health Promotion Administrator

LORI OSTER, Better Choices, Better Health® SD Program Coordinator

South Dakota Department of Health

1:15 – 2:15

Keynote Address – Advancing Health Equity

Ballroom A

ROBYN TAYLOR, MBA,

National Association of Chronic Disease Directors Health Equity Consultant

Common terms and concepts used to promote health equity within public health will be introduced. Participants will explore social determinants of health and the skills needed to apply a health equity lens.

2:15 – 3:15

Breakout Sessions

Building a Culture of Health for Your Community

Browning Room

MARY MICHAELS, Public Health Prevention Coordinator

Sioux Falls Health Department

CHRISSEY MEYER, Communications Director

American Heart Association of North and South Dakota

Increasingly, research is showing that our zip code is a better predictor of health than our genetic code. In some areas of the country, life expectancies can vary by 25 years from one side of a community to the other. South Dakota is not immune to this trend. This presentation will discuss how communities, partnerships and individuals can identify the barriers to good health and begin to develop and implement meaningful changes to address them.

Pursuit of 80% by 2018: Incorporating Colorectal Cancer Screening into an Employee Wellness Strategy

Remington Room

DANIEL J. HEINEMANN, MD, FAAFP, Vice President and Medical Officer

ABBY KUPER, RN, BSN, CMSN, Nurse Manager

JACKIE NEWCOMB, Employee and Patient

JENNIFER WEISS, BS, Improvement Advisor

Sanford Health

Sanford Health accepted the national challenge to screen 80% of patients due for colorectal cancer screening by 2018. As of July 2018, the entire health system screened 75.4% of 136,000+ eligible patients, up 6.7% since 2015. Sanford is committed to detecting cancer early by diversifying strategies. Employee Health Services launched an aggressive Health and Wellness Program recognizing healthy employees who promote a safe and efficient work environment, so they adopted a plan to reach unscreened hospital employees during the flu shot season. Jackie Newcomb, an employee with a positive screening, will share her experience.

Growing Healthy Food, Families, and Communities in South Dakota Utilizing Community Wellness Coalitions

Weatherby Room

MEGAN ERICKSON, Nutrition Field Specialist

HOPE KLEINE, Health Education Field Specialist

LAUREN PIERCE, Health Education Field Specialist

SDSU Extension

SDSU Extension has successfully facilitated wellness coalitions in South Dakota communities. These eleven communities have implemented interventions to improve the nutrition and physical activity environment. Community leaders will present the overall community successes. Some of these successes include securing funds and partnerships to install outdoor fitness equipment, implement the Stock Healthy, Shop Healthy program and transform school nutrition environments.

Health Information Exchange: Leveraging Data to Manage Chronic Conditions

Ballroom A

STACIE DAVIS, BSN, RN, Clinical Engagement Consultant

SD Health Link

Chronic condition management and value-based care are top priorities for many healthcare organizations. Some providers do not have access or ways to properly use information to support care decisions and care coordination. One of the biggest gaps in event notifications are *admit, discharge* and *transfer* (ADT) data. Providers need to know when patients are admitted to a hospital, transferred to another care facility, or discharged to return home. With gaps in data, these often become missed opportunities. Learn how health information exchanges (HIEs) can help providers move forward to achieve better chronic condition management by providing timely clinical event notifications and access to clinical data. This vital information can help providers make better care decisions and deliver proactive care coordination.

Better Choices, Better Health® SD Healthcare Integration Panel: How Health System Partners See BCBH Impact

Beretta Room

KERRI LUTJENS, RN

Avera St. Benedict-Parkston

MICHELLE ROY, RN

Regional Health

DANA OLSEN, RN, Health Coach

Sanford Health

DENISE KOLBA, RN, Program Manager

Great Plains Quality Innovation Network

This is a unique opportunity to hear how health systems in SD have used innovative strategies to integrate BCBH into their workflow and community. This panel of professionals will share their personal experiences and their organizations' collaboration with BCBH as a resource to the people they serve.

3:15 – 3:30

Physical Activity

Ballroom A

3:30 – 3:45

Poster Session

Highland Conference Center Lobby

3:45 – 4:45

Breakout Sessions

Better Choices, Better Health® SD Participant Panel: How BCBH Helped Me Manage My Health

Beretta Room

LOIS K., JEANNIE M., KENNY M., AND MELVIN W.

BCBH offers a suite of self-management workshops that bring people with different physical and/or mental health conditions together to learn new ways to problem solve, create action plans, and manage multiple health conditions. Hear four different perspectives as panelists share about their experiences in their respective BCBH workshop and their journey taking charge of their health.

Enhancing Quality of Life for Cancer Survivors in South Dakota

Weatherby Room

LEXI PUGSLEY, BSN, RN, Comprehensive Cancer Control Program Coordinator

South Dakota Department of Health

CHAMIKA HAWKINS-TAYLOR, MHA, PHD, Assistant Professor

SDSU College of Pharmacy and Allied Health Programs

JENNA COWAN, BS, Project Lead

SDSU Population Health Evaluation Center

Through a three-year cooperative agreement with the Centers for Disease Control and Prevention, the SD Department of Health established the South Dakota Survivorship Program (SDSP) in 2015. The program aims to address the public health needs of cancer survivors in the state, to increase duration and quality of life. The SDSP supports cancer survivors through the expansion of cancer survivorship surveillance systems, facilitation of community/clinical linkages, education to survivors and healthcare providers on best practices and enhancement of the evidence related to survivorship practices. The SDSP provided the mentorship and funding needed to develop and/or expand cancer survivorship services throughout SD, partnering with five cancer treatment centers and registries to promote statewide adoption of sustainable practice- and evidence-based survivorship activities. Content will provide program highlights and key findings regarding: patient navigation programs, the navigation network, delivery of survivorship care plans (SCP), a patient level pre/post SCP evaluation, and program publications.

The Developmental Origins of Chronic Diseases: How Early Should Prevention of Adult Diseases Start?

Browning Room

CRISTINA LAMMERS, MD, MPH

SDSU College of Nursing

This presentation focuses on the Life Course Theory of health and the fetal origins of chronic adult diseases. Presenter will discuss the connection between these theories and preconception health among reproductive age women as a prevention and health promotion strategy to improve birth outcomes and reduce additional developmental risks of chronic diseases in adulthood.

Cultural Competency and Implementing the National CLAS Standards

Remington Room

ROBYN TAYLOR, MBA

National Association of Chronic Disease Directors Health Equity Consultant

This session will define cultural competency and share the Department of Health and Human Services' Culturally and Linguistically Appropriate Standards. The standards serve as a critical guide to developing policies and strategies that improve the quality of health care services and meet the needs of an increasingly diverse population. The attendees will be challenged to think about how to apply CLAS standards in their daily work.





Chronic Disease Partners Meeting *Agenda* October 17, 2018 – Day 2

8:00 – 8:15

Opening Remarks

Winchester Room

8:15 – 9:15

Keynote Address – Harmonies of Community Health

Winchester Room

GEORGE RUST, MD, MPH, Professor
Florida State University College of Medicine

Achieving optimal and equitable health outcomes for free-range humans (especially in diverse communities or high-disparity patient populations) will require a blurring of the boundaries between clinical practice and community-based interventions. Effective practitioners will be patient-centered and culturally-attune, and will organize their practices to help patients achieve success in their home, family, and community. The patient-centered clinical practices that achieve the best health outcomes will integrate medical care with behavioral health, community context, and population health perspectives. Meanwhile, health leaders must expand efforts to integrate public health and medical care across the entire spectrum from primary prevention to tertiary prevention and treatment, addressing social, behavioral, and clinical complexities all at the same time. This session will present five levels of integration and harmonization needed to achieve the best possible health outcomes for diverse communities, and the teamwork needed to pull it off.

9:15 – 10:15

Chronic Disease Partner Talks

Winchester Room

Making the Connection: The Expanding Services of the SD QuitLine

JENNY KERKVLIT, MA, LPC, South Dakota State University
CHERYL PITZL, BS, NBC-HWC, Wellness Programs Manager, Avera McKennan Corporate Health Services Department

Breaking Down Barriers with the Karen, Hispanic, and Hutterite Populations to Educate and Increase Screening Rates

DEBBIE LANCTO, Well-Being Specialist, Avera Health Plans
LORI FIEDLER, RN, BSN, CWC, Disease Management Nurse, Dakotacare

Effects of Policy, Systems, and Environment Change in Child Care Facilities to Reduce the Burden of Skin Cancer: Outcomes of the Child Care UV Protection Project

SANDRA MELSTAD, MPH, SLM Consulting, LLC

Strengthening Partnerships between the Dental and Medical Communities to Improve Oral Health

JEAN GROSS, RDH, Delta Dental

10:15 – 10:30

Physical Activity

Winchester Room

10:30 – 10:45

Poster Session

Highland Conference Center Lobby

10:45 – 12:00

Open Space

Winchester Room

DR. PAM LANGE, Deputy Executive Director
Black Hills Special Services Cooperative

The Open Space concept is a simple process for bringing people together around ideas, questions, and themes that they are thinking about and have passion for. The process sets the perimeters for all voices and ideas to emerge using four principles, one law, and a process to harvest the rich discussions of the group. It doesn't matter who the people are – the process always works. It works because all people can work well together, and can be creative, caring, and insightful when they're engaged in meaningful work that they care about. The Open Space structure will serve as an inviting opportunity for people to engage deeply and creatively around issues of concern to them.

The session will be framed using four simple principles to assist participants with a balance between creative chaos and productive order. Principles include:

- Whoever comes to the space are the right people
- Whenever it starts is the right time
- Whatever happens is the only thing that could have
- When it's over, it's over

Participants will find their way to conversations they feel passionate about. These working conversations will be written down to capture the brainstorming ideas, main points, action steps, and take away thoughts.

12:00 – 1:00

Luncheon

2018 Chronic Disease Partner of the Year

2018 BCBH Champion Award

2018 Healthy Hometown Community Awards

Benelli Room

1:00 – 2:15

Breakout Sessions

Building on Community Strengths: Community Health Workers in Chronic Disease

Remington Room

DR. GEORGE RUST, MD, MPH, Professor

Florida State University College of Medicine

KILEY HUMP, MS, Office of Chronic Disease Prevention and Health Promotion Administrator

South Dakota Department of Health

This session will present best-practice examples of the use of community health workers and peer counselors in achieving more optimal and equitable outcomes for chronic disease. Key decision points such as training, certification, career paths, caseload, intensity, and boundaries will be explored, and the group will discuss strengths and challenges of different models in enhancing health behavior change and chronic disease self-management self-efficacy.

South Dakota Farmers and Ranchers:

Preliminary Data on Stress, Depression and Physical Activity

Browning Room

NIKKI PROSCH, Physical Activity Field Specialist

SDSU Extension

DR. ANDREA BJORNESTAD, Assistant Professor

South Dakota State University

DR. LACEY MCCORMACK, Assistant Professor

South Dakota State University

SDSU Extension conducted a pilot study to acquire preliminary data regarding the impact of physical activity on stress levels and depression symptoms in farmers and ranchers. Farmers and ranchers in South Dakota completed a survey to determine physical activity participation, perceived levels of stress, and depression symptoms. Initial findings will be shared as well as potential interventions or partnerships that may exist.

Color coded titles represent the four tracks: **Purple**–Health Equity **Orange**–Epidemiology/data **Green**–Partnerships **Blue**–Prevention

Guiding At-Risk Patients: Navigating the Healthcare System, Community, and Life

Winchester Room

MEGAN PHILLIPS, LSW, MSW, Health Guide

AMY RADKE, MSW, CSW, Health Guide

Sanford Health

Creation of the Sanford Health Guide role supports the Triple Aim approach to healthcare by targeting quality, cost and population health. Through interviews with patients, physicians, and other members of our community, Sanford concluded that oftentimes at-risk patients do not come to members of their team or the system when they need care. They do not feel connected to their own care, have a lack of trust of healthcare, suffer from disconnected care due to multiple specialty providers, and have not engaged with a health insider that can assist them in navigating the system. At-risk patients can feel discouraged by unrealistic expectations and recommendations. The Health Guide walks alongside the patient to improve communication between members of the healthcare team, to empower patients to have a voice in their care, and promote a trusting relationship.

Building Capacity for Healthcare Collaboration in Community: Tackling Chronic Conditions When Resources are Scarce

Weatherby Room

DEBORAH LETCHER, PhD, RN, Senior Director, Learning and Development

RICH PREUSSLER, MA, Director, Learning and Development

SHELLY CLAUSON, BSN, Lead Learning and Development Specialist

CARLEY SWANSON, BS, RN, Program Manager, Bridging Health and Home

LIBBY KYLLO, Learning and Development Specialist, Bridging Health and Home

Sanford Health

Managing chronic conditions and maintaining quality of life in a rural setting can be complex requiring medical, educational, and financial considerations. The Bridging Health and Home (BHH) program was conceptualized based on the desire to improve the ability of rural older adults to remain in their homes safely, with dignity and vitality. The Quadruple Aim framework was adopted to guide efforts to enhance the experience of older adults in rural settings, strengthen the management of chronic conditions, lower cost of care, and elevate collaboration within limited rural healthcare and community resources. Advisory Councils comprised of key community members were established to guide BHH to focus on meaningful, non-duplicative interventions, as well as implementation of Better Choices, Better Health workshops. Participants will explore the Strengths, Weaknesses, Opportunities, and Threats in their own communities for capacity building, creating inter-professional care delivery models of their own, and identification of key stakeholders to support novel model execution.

2:15 – 3:00

Chronic Disease Data and State Plan Updates

Winchester Room

ASHLEY MILLER, MPH, Chronic Disease Epidemiologist

AMANDA NELSON, MPH, Injury Prevention Epidemiologist

South Dakota Department of Health

BROOKE LUSK, BS, RN, Division Director

Black Hills Special Services Cooperative

3:00 – 3:15

Wrap-up and Evaluation

Winchester Room



Speaker Bios

Keynote Speakers

Robyn Taylor, MBA, is an alumna of Ohio State University. Robyn has worked for CHOICES for Victims of Domestic Violence as the Outreach Coordinator where she raised awareness about the cycle of violence and family violence dynamics. During her seven years working at the Ohio Department of Rehabilitation and Correction, she was a Social Worker for the Magellan Sex Offender program, the Director of the Domestic Violence Education Programs for women and a Recovery Services counselor. While at North Central Correctional Institution, Robyn established an inmate NAACP chapter that represented the varied groups with over 90% of all inmates regardless of race and ethnicity. Robyn served as the President of the Columbus Council of PTAs from 2006 to 2010. Robyn also worked with the Ohio Department of Health's Office of Health Policy & Performance Improvement, which includes the Office of Health Equity. She leads the Cultural Competency project among many other projects, including sitting on the Health Policy Institute of Ohio's (HPIO) Equity Workgroup and the Population Health Planning Advisory Group. Robyn is national first past chair of the Health Equity Council for the National Association of Chronic Disease Directors. Robyn also serves as the Vice President of the Board of Directors for Columbus Area Integrated Health Services, Inc., founded in 1965 during Ohio's efforts to develop community-based mental health & behavioral services. Robyn is a widowed mother of three children.

Dr. George Rust, MD, MPH, FAFP, FACP, is a Professor at the FSU College of Medicine in Tallahassee, FL, where he also directs the Center for Medicine and Public Health. He is board-certified in both Family Practice and Preventive Medicine. Dr. Rust began his career serving six years as Medical Director for the West Orange Farmworkers Health Association in Central Florida, where he led the effort to achieve JCAHO accreditation and developed innovative community programs such as the Diabetic Promotora Project. He then served for 24 years on faculty at the Morehouse School of Medicine, where he was founding director of the Morehouse Faculty Development Program as well as the National Center for Primary Care. He also served as lead author for the Georgia Health Disparities Report. In 2015, he was senior scientific advisor to the US Agency for Healthcare Research and Quality (AHRQ). Dr. Rust is the author of over 100 peer-reviewed publications, and is the recipient of numerous local, state, and national awards for teaching and service. His career as a family physician and scholar has consistently focused on primary health care and community health for those in greatest need, and on charting a path to health equity.

Presenters & Partners

Dr. Andrea Bjornestad is an Assistant Professor and Extension Mental Health Specialist in the Department of Counseling and Human Development at South Dakota State University (SDSU). She is a licensed professional counselor with areas of expertise in school counseling and marriage and family therapy. Dr. Bjornestad's research has focused on the health and wellness (e.g. PTSD, secondary trauma) of military service members, veterans, and their families. Her research and outreach efforts have pertained to the mental health of farmers and ranchers. Dr. Bjornestad has presented to various agricultural groups on how to identify and manage farm stress.

Shelly Clauson RN, B-C, CRRN, is a Lead Learning and Development Specialist at Sanford Health. Shelly has over 35 years of experience as an RN with certifications in Rehabilitation and Geriatric Nursing. She has experience as a nurse consultant for BARD urology and clinical instructor for the USD Nursing Program. She is a Master Trainer for the Chronic Disease Self-Management Program/Better Choices, Better Health (BCBH) with cross training in Diabetes and Workplace. Shelly's role at Sanford Health is to build infrastructure and sustainability within the evidence-based health promotion programs across South Dakota, North Dakota, and Minnesota.

Jenna Cowan, BS, is a Project Lead at the Population Health Evaluation Center of SDSU. She has worked in a variety of research and evaluation settings over the past 5 years, with recent work primarily focused on community and health system partnerships. Ms. Cowan is currently an evaluator for the South Dakota QuitLine, South Dakota Cancer Screening Programs, and the South Dakota Survivorship Program.

Stacie Davis BSN, RN, is the Clinical Engagement Consultant at SD Health Link. Stacie has 12 years of clinical experience in OB/Gyn, Public Health, Internal Medicine and Family Practice. Stacie currently works with clinical end users providing member users with individualized training specific to their current workflows and clinical initiatives/needs.

Megan Erickson is a Nutrition Field Specialist with SDSU Extension. As a Registered Dietitian Nutritionist, she provides leadership for healthy nutrition and physical activity practices to help prevent and manage chronic disease.

Lori Fiedler RN, BSN, CWC, has been with DakotaCare for 7 years as a disease management nurse. Lori attended SDSU and obtained a bachelor's of science degree in nursing. In her spare time, she likes to travel and spend time with family and friends.

Jean Gross, RDH, is currently working for Delta Dental of South Dakota as a regional educator. Jean is a member of the American Dental Hygiene Association, the Sioux Falls Hygiene Component, and the South Dakota Dental Association. She is an Advisory Board member for the March of Dimes Mission Committee, and the Inter-lakes Community Action Head Start program. She is a member of the South Dakota Oral Health Coalition, Set Free Coalition, and the South Dakota Diabetes Coalition. Jean and her husband live in Sioux Falls with their two daughters.

Chamika Hawkins-Taylor, MHA, PhD, has been an Assistant Professor in the College of Pharmacy and Allied Health Programs, SDSU for three years. In this role, she teaches topics in social epidemiology, cultural health disparities, and complementary and alternative medicine. Her research focuses on chronic disease management and social and cultural influences on individual and population health. She frames her research around social, ecological theories. She completed her PhD at the University of Minnesota, Twin Cities, in Social and Administrative Pharmacy.

Dr. Dan Heinemann, FAAFP, received the SD Comprehensive Cancer Control Program 2018 Colorectal Cancer Champion of the Year Award in recognition of his exemplary efforts to break down barriers for patients who are due for colorectal cancer screening. Dr. Heinemann is a Vice President and Medical Officer at Sanford with a background in primary care.

Jenny Kerkvliet, MA, LPC, is the Director of the Population Health Evaluation Center at SDSU. For the past fifteen years, she has led evaluation of health promotion programs in both clinical and community settings. Ms. Kerkvliet is an evaluator for the South Dakota QuitLine and the SD Survivorship Program, and currently leads assessment projects with the SD Tobacco Control Program and the Office of Child and Family Services in the SD Department of Health. Ms. Kerkvliet earned a bachelor's of science degree in Family and Consumer Sciences from SDSU, a Master of Arts in Counseling Psychology from Saint Mary's University, and is a licensed Professional Counselor.

Hope Kleine is a Health Education Field Specialist with SDSU Extension. She is a certified Exercise Physiologist and has the Exercise is Medicine credential. Hope works with South Dakota communities to implement healthy living interventions and serves as the coordinator for the statewide Stock Healthy, Shop Healthy program.

Denise Kolba, RN, is a Program Manager for Great Plains Quality Innovation Network and Regional Task lead for Every Diabetic Counts. Denise works with stakeholders to improve clinical outcomes for Medicare beneficiaries with diabetes or pre-diabetes. This includes collaborating with providers, health systems, health agencies, and various chronic disease coalitions to promote monitoring of key clinical indicators and encourage participation in self-management education. Denise is a Master Trainer for the Chronic Disease, Diabetes, and Chronic Pain Self-Management Programs and is promoting and facilitating BCBH workshops in SD.

Abby Kuper, RN, BSN, CMSN, a nurse manager with Sanford Health Employee Health Services, has been with Sanford for 15 years. A graduate of USD, Abby is currently in pursuit of a Master's degree in Nursing Administration.

Libby Kylo is a Learning and Development Specialist for the Bridging Health and Home Program in Mayville. In this innovative role, she works to connect participants with resources in the community as well as assisting the RN with managing the Bridging Center and implementing this program into the community. She is a Master Trainer in the Chronic Disease Self-Management Program/BCBH. Libby has an associate's degree in Respiratory Care. She worked for Sanford Health as a Respiratory Therapist for 3 years before transitioning to this role.

Dr. Cristina Lammers, MPH, graduated as an MD and did her Residency in obstetrics and gynecology in Montevideo, Uruguay. She received her MPH degree on maternal and child health from the University of Minnesota. She became more interested in women, children and adolescent's health, and worked at a Pan American Health Organization Center for Perinatology in Montevideo as a consultant for Latin American countries, where she did research and taught medical students, before coming to SD. At SDSU College of Nursing, she teaches public health and continues her research focusing in preconception healthcare and inter-professional education, publishing the results in peer reviewed journals.

Debbie Lancto has been with Avera Health Plans for 7 years as a Well-Being Specialist. Debbie obtained a bachelor's degree in Wellness/Fitness from the University of Sioux Falls (USF), and was part of the USF track team. In her spare time, she enjoys spending time outside with family and friends.

Dr. Pam Lange received her doctorate in Education Administration from USD and Master's of Science in Human Resources. Lange was named Deputy Executive Director of Black Hills Special Services Cooperative (BHSSC) in January 2018 and serves as the Director of the Family, Community, and Special Services Division. She works closely with the six BHSSC Division Directors to coordinate efforts, build capacity, develop programs, and identify funding sources for extensive projects that span the state of South Dakota. Lange is considered a change agent among South Dakota's education community.

Deborah Letcher, PhD, RN, is Senior Director in Learning and Development at Sanford Health with responsibility for onboarding, continuing development, simulation and patient and community education. As a nurse of over 35 years, Deb has been committed to the learning and development of nursing and clinical teams within healthcare. She has participated in several novel academic-service partnerships. Deb holds leadership experience in academia, healthcare and community. She serves as an active contributor in the visioning as well as ongoing guidance for the Bridging Health and Home program.

Kerri Lutjens, RN, has a BS in health – healthy lifestyle coaching from Arizona State University. Kerri has 15 years experience as an RN and works as a visiting colony nurse for Avera St. Benedict Hospital - Parkston, providing on-site services to seven Hutterite colonies in the region. The Centers for Disease Control and Prevention named Kerri a 2015 Childhood Immunization Champion for her work on immunization rates in the colonies. In a four-year span, Kerri administered more than 600 childhood vaccinations and brought the vaccination rates from 13 percent to more than 90 percent. Kerri became a BCBH Lay Leader in 2017; she recently co-led a diabetes self-management workshop at the Grass Roots Hutterite Colony.

Dr. Lacey McCormack is an Assistant Professor in the Health and Nutritional Sciences Department at SDSU. She currently teaches Public Health Nutrition and Interprofessional Obesity Prevention at the graduate level. Dr. McCormack's research focuses on examining how the environment shapes food and physical activity behaviors among rural populations. Additionally, she contributes to the development and evaluation of several interventions and programs targeting changes that impact health behaviors in South Dakotans.

Sandra Melstad, BS, MPH, is a Public Health Consultant and owner of SLM Consulting, LLC, based out of Sioux Falls. Sandra has worked in public health for over a decade, focusing on health promotion and chronic disease prevention and control initiatives. Sandra provides consultation to health departments, health systems, universities, and non-profit organizations, focused on providing data driven public health solutions to improve population health. Sandra has led cancer prevention efforts for the SD Cancer Coalition for the past four years.

Chrissy Meyer is the Communications Director for the American Heart Association (AHA) in North and South Dakota. She holds an undergraduate degree in Journalism and English from Iowa State University and an MBA from USD. In her role, Chrissy is responsible for helping the AHA achieve its mission to build lives free of cardiovascular diseases and stroke through public relations, communications, marketing and media relations strategies and tactics.

Mary Michaels is the Public Health Prevention Coordinator for the Sioux Falls Health Department, helping lead Live Well Sioux Falls, a community-based health promotion effort. Mary brings experience in marketing, communications and advocacy to her work from previous roles with the American Heart Association in South Dakota, Avera McKennan Hospital & University Health Center, the Sioux Falls Area Chamber of Commerce and the South Dakota Governor's Office. She holds a bachelor's degree in political science from USD.

Jackie Newcomb is semi-retired, yet sometimes walks up to 20,000 steps in a day as she greets and escorts radiology patients! In her 14 years at Sanford, she served as an administrative assistant.

Dana Olsen has been an RN Health Coach at Sanford Health for seven years. She is a graduate of Bryan School of Health Sciences and has 34 years of experience as an RN. She has extensive training in motivational interviewing and uses these skills to engage patients in improving their chronic health conditions. Dana enjoys supporting several philanthropies like American Cancer Society, American Diabetes Association, Relay for Life, Back Pack Program, Food Bank Food to You program, 4-H and FFA.

Megan Phillips, LSW, MSW, is a Health Guide at Sanford Health and has been employed at Sanford for three years. After graduating with her bachelor's degree from USD in 2013, she worked for a community support provider until 2015 when she joined the Sanford Health Plan Corporate Wellness team as a Social Worker, promoting holistic wellness to Sanford patients. In 2017, she received her Master's degree in Social Work from USD, also interning at Sanford Health. Upon graduating, she transitioned into the role of the Health Guide within Enterprise Clinic Services.

Lauren Pierce is a Health Education Field Specialist with SDSU Extension. Lauren facilitates Community Wellness Coalitions in the Lower Brule and Crow Creek/Fort Thompson communities. She works alongside these groups to increase health and wellness in their communities through policy, systems, and environmental change approaches.

Nikki Prosch is a Health & Physical Activity Field Specialist with SDSU Extension. She is a certified Exercise Physiologist and a Physical Activity in Public Health Specialist. She is also a physical activity consultant for the South Dakota Department of Health. Prosch works with South Dakota worksites and communities to implement physical activity interventions and is the program coordinator for the South Dakota Park Prescription project. She provides statewide leadership on physical activity programming, intervention implementation and resource development for a variety of sectors.

Rich Preussler, MA, is the Director of the Patient and Community Education Department at Sanford. He holds the highest level of trainer status as a T-Trainer for the Chronic Disease Self-Management Program/BCBH. He has been involved in implementing and growing the program in several communities, including statewide efforts in South Dakota. Rich earned a Master's degree in Psychology from Illinois State University. He is a Licensed Professional Clinical Counselor in North Dakota. Rich has served the Bridging Health and Home program as a consultant regarding implementation of evidence-based health promotion programs and community advisory council leadership.

Lexi Pugsley, BSN, RN, is the Comprehensive Cancer Control Program Coordinator for the South Dakota Department of Health and has been with the department for the past six years. In this role, she oversees the SD Survivorship Program, which aims to increase quality and duration of life for cancer survivors through the implementation of evidence-based survivorship interventions.

Amy Radke, MSW, CSW, started as a Health Guide with Sanford Health in September 2017. She graduated from Wartburg College with a Bachelor of Social Work in 2009. After graduating, she worked as a Target Case Manager for individuals with developmental disabilities and severe mental illnesses. Amy moved to Sioux Falls in 2011 to become an Adult Protection Specialist and Ombudsman for the State of South Dakota. While working for the Department of Social Services, she attended the University of Iowa Master of Social Work program and graduated in 2017.

Michelle Roy, RN, has over 28 years' experience in healthcare. Michelle currently works for Regional Health System in Case Management, Diabetes Education, and Ambulatory Nurse Management. Michelle also serves as a BCBH Master Fellow for healthcare integration. Michelle has a passion for population health and feels her involvement in BCBH is an opportunity to support community members to live their most healthy life.

Carley Swanson, BS, RN, is a Program Manager for Bridging Health and Home at Sanford Health. As program manager, Carley is responsible for the day-to-day operations of the Bridging Health and Home program. This includes facilitating communication between the community and Sanford, leading Advisory councils, supervising staff and implementing and assessing strategies that align with the overall objectives of this pilot program. Carley earned a Bachelor of Nuclear Medicine Technology followed by a research career developing innovative imaging technology for breast cancer. Through this work, she sought a degree in nursing and has held positions in both large inpatient units and a Critical Access Hospital giving her a unique inter- and intraprofessional viewpoint.

Jennifer Weiss, BS, supports Sanford's clinics as a quality improvement advisor. She holds a Bachelor of Science in Biology from SDSU and is a member of the SD Colorectal Cancer Task Force.