# Iowa Department of Public Health













2009



Annual Report & Budget Summary

Promoting and protecting the health of Towans



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## **Iowa Department of Public Health – Contact Information**

#### **Department Director's Office**

Thomas Newton, Director 515-281-7689

- State Board of Health
- Dental Board
- Board of Medicine
- Board of Nursing
- Board of Pharmacy
- Office of the State Medical Examiner

#### **Division of Acute Disease Prevention and Emergency Response**

Mary Jones, Deputy Director, Division Director 515-281-7996

- Center for Acute Disease Epidemiology
- Bureau of Communication and Planning
- Center for Disaster Operations and Response
- Bureau of HIV, Sexually Transmitted Diseases, and Hepatitis
- Bureau of Immunization and Tuberculosis
- Bureau of Emergency Medical Services (EMS)

#### **Division of Administration and Professional Licensure**

Marcia Spangler, Division Director 515-281-4955

- Bureau of Finance
- Bureau of Health Statistics
- Bureau of Information Management
- Bureau of Professional Licensure

#### **Division of Behavioral Health**

Kathy Stone, Division Director 515-281-4417

- Bureau of Disability and Violence Prevention
- Bureau of Gambling and Substance Abuse Treatment Program Regulation and Licensure
- Office of Gambling Treatment and Prevention
- Bureau of Substance Abuse Prevention and Treatment

## **Iowa Department of Public Health – Contact Information**

#### **Division of Environmental Health**

Ken Sharp, Division Director 515-281-5099

- Bureau of Environmental Health Services
- Bureau of Lead Poisoning Prevention
- Bureau of Radiological Health
- Office of Plumbing Code

#### **Division of Health Promotion and Chronic Disease Prevention**

Julie McMahon, Division Director 515-281-3166

- Bureau of Chronic Disease Prevention and Management
- Center for Congenital and Inherited Disorders
- Bureau of Family Health
- Bureau of Health Care Access
- Bureau of Local Public Health Services
- Office of Multicultural Health
- Bureau of Nutrition and Health Promotion
- Oral Health Bureau

#### **Division of Tobacco Use Prevention and Control**

Bonnie Mapes, Division Director 515-281-8857

- Community Partnerships
- Enforcement
- Evaluation and Research
- Just Eliminate Lies (JEL) (A youth-led anti-tobacco campaign)
- Quitline Iowa and Other Cessation Services

#### Legislative Liaison

Lynh Patterson 515-281-5033

Go to <u>www.idph.state.ia.us</u> for more information about the department, including health statistics, publications, and program information.

## A Message from the Director



In the final weeks of 2009, I tried a little experiment. I searched the Google News archives for the phrase "public health" in articles published in the first 11 months of 2009. With approximately 92,400 results, it's clear that public health has been getting quite a lot of attention lately. This is good news for the Iowa Department of Public Health (IDPH), as it likely means that people have a greater awareness of what we do to promote and protect the health of Iowans.

#### Pandemic Influenza

This year, Iowa and the world responded to the first pandemic since 1968. Cases of 2009 H1N1 influenza—an entirely new influenza

strain—were so numerous and widespread in Iowa this fall that student absences due to illness were more than three times higher than is typically reported for that time of year. As part of Iowa's response, enhancing Iowa's surveillance capacity ensured that we were able to accurately track and report disease spread and monitor the severity of illness. We have also developed an H1N1 Web site—complete with an interactive vaccination clinic locator map—and opened up two call centers for health care providers and the public. As of December 15, those call centers have received nearly 7,000 calls.

Flexible processes were developed across all levels of public health and among health care providers to allow the most at-risk Iowans to receive the critical H1N1 vaccine. As of this writing, more than 903,000 doses of vaccine have been distributed in our state. Also, nearly 77,000 courses of treatment medications (i.e., antiviral medicines such as Tamiflu and Relenza) and other critical medical supplies have been distributed to health care providers around the state.

#### **Budget Challenges**

I should point out that public health partners at the state and local levels exceeded my expectations this year in their ability to stay focused on Iowa's H1N1 response—not to mention their day-to-day duties—despite greater-than-usual budget challenges. Due to a shortfall in state revenue, the department had to make some very tough decisions in carrying out a 10 percent budget cut. To say this could have been distracting is an understatement. After considering how this cut would affect our ability to promote and protect the health of Iowans, I am happy to say that Governor Culver decided to restore a portion of the department's proposed \$6 million reduction. Without this restoration, many critical public health services would not have been available to Iowans who needed them.

## A Message from the Director

#### **Stimulus Funding**

While budget cuts certainly had an impact, the 2009 American Recovery and Reinvestment Act (ARRA) presented public health in Iowa with a number of unexpected funding opportunities. The Communities Putting Prevention to Work (CPPW) noncompetitive grant program will provide funding for several two-year initiatives that promote physical activity, improve nutrition, prevent tobacco use and support tobacco cessation. Additional competitive CPPW grants will, if awarded, allow the department to provide incentives for schools to implement the Healthy Kids Act, support a policy requiring healthy choices in vending machines on state property, work with child care centers to promote physical activity, and carry out enforcement of FDA regulations to restrict tobacco marketing.

Also thanks to ARRA economic stimulus funding this year, the department is better prepared to meet some tough workforce challenges and enhance Iowa's existing health information technology project. Using a dollar-per-dollar match from partners across the state, IDPH will be able to offer approximately 50 percent more loan repayment scholarships to health professionals in areas of the state where they are needed most. ARRA funding also will allow IDPH to help modernize communication between providers and patients and the sharing of potentially life-saving medical information among providers. Additional resources will be necessary to make e-health in Iowa a reality, but the ARRA funding has gotten us off to a great start.

#### **Health Care Reform**

Speaking of health initiatives that drew attention both nationally and in Iowa in 2009, this year was also an exciting one in terms of health care reform. Since 2007, the department has coordinated the activities of several key advisory councils that were established by the Iowa Legislature. The councils consist of private and public stakeholders and consumers who are dedicated to improving health care for Iowans. This year, the councils made important recommendations regarding a statewide patient-centered medical home system, prevention and chronic care management, electronic health information technology, health and long-term care access, a credentialing system for direct care workers, physical fitness and nutrition, and end-of-life care. To ensure that the work of Iowa's health care reform councils aligns with any future developments at the national level, IDPH continues to pay close attention to proposals related to enhancing the delivery of primary care, prevention, and public health.

## A Message from the Director

#### **Public Health Modernization**

Finally, 2009 was also the year Iowa took a giant step forward in an unprecedented initiative to implement a voluntary accreditation program for Iowa's governmental public health system. This year I had the honor of welcoming the members of two newly formed committees charged with implementing the Public Health Modernization Act passed by the Legislature in May. The first of these, the Public Health Advisory Council, will make recommendations on the implementation and administration of the Iowa Public Health Standards—which form the backbone of Iowa's Modernization efforts—to be applied to public health practice at both the state and local level. The second, the Public Health Evaluation Committee, will evaluate Iowa's governmental public health system and voluntary accreditation program to assess the impact on population health outcomes. The work of the two committees will provide a strong foundation necessary to build public health infrastructure in Iowa.

Given the developments of the past year, 2010 is sure to provide public health in Iowa with a number of challenges and opportunities. As we move forward, I hope that you will find this Annual Report and Budget Summary a helpful resource in learning more about how IDPH's programs and services promote and protect the health of Iowans.

Sincerely,

Tom Newton, MPP, REHS

#### Vision

Healthy Iowans living in healthy communities.

#### Mission

Promoting and protecting the health of Iowans.

#### **Guiding Principles**

We strive for INNOVATION and CONTINUOUS IMPROVEMENT in our activities to promote and protect the health of Iowans.

With a collective sense of SOCIAL JUSTICE, our activities reflect an understanding and acceptance of DIVERSITY among Iowans.

We encourage COLLABORATION in our activities and in our decisionmaking so that we respond more effectively to emerging issues and assure the highest QUALITY of services we can provide.

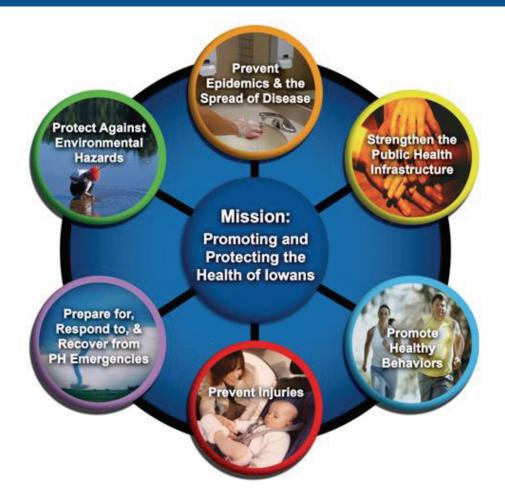
We recognize the value of a healthy COMMUNITY in developing healthy Iowans. We encourage our employees, Iowa's communities, and individual Iowans to work together as PARTNERS to build a healthy Iowa.

We are committed to using EVIDENCE-BASED strategies to assure our programs focus on creating RESULTS that improve the health of Iowans.

#### What does Public Health do?

Public health is a partnership of local public health, the Iowa Department of Public Health (IDPH), non-profit organizations, health care providers, policymakers, businesses, and many others working together to promote and protect the health of Iowans. Public health strives to improve the quality of life for all Iowans by assuring access to quality population-based health services related to the following goals:

- Preventing injuries;
- Promoting healthy behaviors;
- Protecting against environmental hazards;
- Strengthening the public health infrastructure;
- Preventing epidemics and the spread of disease; and
- Preparing for, responding to, and recovering from public health emergencies.



## How does Iowa's Public Health System meet these goals?

In Iowa, local boards of health are responsible for protecting the public's health. County boards of supervisors appoint the members of the local boards of health. Iowa law gives broad authority to local boards of health to decide what public health services to provide within their jurisdictions and how to provide them. Thus, the size and structure of local public health agencies and the services they provide varies greatly throughout the state. Local boards of health work with agencies, businesses, health care providers, and others to assure public health services are being provided in their jurisdiction.

The Iowa Department of Public Health's primary role is to help local public health fulfill its responsibility to promote and protect Iowans' health. To do this, IDPH provides technical support, consultation, and funding to Iowa's 98 county boards of health, 2 city boards of health, and 1 district board of health. IDPH also provides a variety of direct services such as licensing health professionals; regulating emergency medical services and substance abuse treatment providers; regulating radioactive materials; and collecting birth, death, and marriage records. The State Board of Health is the policymaking body for IDPH. Iowa's governor appoints State Board of Health members and the department's director.

#### How the Iowa Department of Public Health is Organized

Iowa has had a state public health agency since 1880 when the Eighteenth General Assembly formed the State Board of Health to "provide for the collecting of vital statistics and to assign certain duties to local boards of health." Since then, its duties have greatly expanded. Today's IDPH serves as the state's leader in administering and funding public health, overseeing more than 100 programs and employing more than 450 people.

The State Board of Health is IDPH's legally designated policy-making body. The Board has the power and the duty to adopt, promulgate, amend, and repeal administrative rules and regulations. The Board also advises and makes recommendations to the governor, General Assembly, and the IDPH director, on public health, hygiene, and sanitation. The IDPH director works closely with the State Board of Health to develop state health policy.

IDPH is organized into seven units.

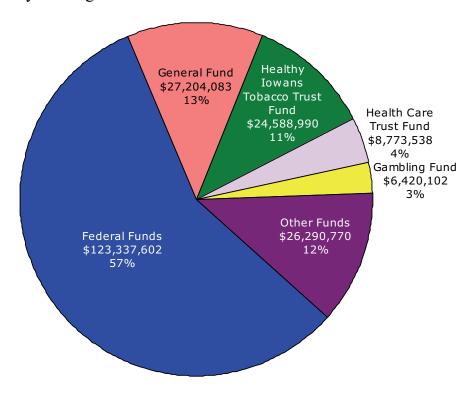
- 1. Director's Office
- 2. Division of Acute Disease Prevention and Emergency Response
- 3. Division of Administration and Professional Licensure
- 4. Division of Behavioral Health
- 5. Division of Environmental Health
- 6. Division of Health Promotion and Chronic Disease Prevention
- 7. Division of Tobacco Use Prevention and Control

IDPH provides administrative support for 24 professional licensure boards that regulate and license various health professions. IDPH also provides staff for several consumer-oriented councils and task forces. Many Iowans serve on these various boards and commissions. They provide regular input into the department's policy development, program planning, implementation, and evaluation efforts.

Contracting is done with more than 775 entities, in all 99 counties, to provide population-based health services and a limited number of personal health services. These contractors include county boards of health and boards of supervisors, community-action programs, public health nursing agencies, maternal and child-health agencies, substance abuse prevention agencies, emergency medical service providers, HIV/AIDS prevention and care providers, and many others.

## **Iowa Department of Public Health – Budget Summary**

Total expenditures in FY2009 were \$216,615,085. The following chart shows the breakdown for expenditures by funding source:



"Other Funds" refer to fees collected and retained by individual programs or via memoranda of understanding that have been established with other state agencies, grants received from private foundations, and Rebuild Iowa Infrastructure (RIFF) funds.

The following table shows fiscal year 2008, 2009, and 2010 expenditure information for the department. This Annual Report and Budget Summary also includes fiscal year 2008, 2009, and 2010 expenditure information for department programs and services.

Table 1. Iowa Department of Public Health Budget Summary

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State General Fund	\$24,664,333	\$27,204,083	\$53,590,926
Healthy Iowans Tobacco Trust Fund	\$23,632,206	\$24,588,990	\$0
Health Care Trust Fund	\$9,419,337	\$8,773,538	\$6,961,992
Gambling Fund	\$6,187,183	\$6,420,102	\$0
Federal funds	\$107,774,772	\$123,337,602	\$134,919,015
Federal Recovery & Reinvestment funds	\$0	\$0	\$3,000,000
Other funds	\$24,319,214	\$26,290,770	\$45,773,756
Total funds	\$195,997,045	\$216,615,085	\$244,245,689
FTEs	437.59	459.17	501.95

## **Iowa Department of Public Health – Programs and Services**

The following pages include details about department programs and services. These profiles include

- the name of the program/service,
- a main telephone number and Internet address,
- the division overseeing the program/service,
- why the program/service is important to promoting and protecting the health of Iowans,
- a description of services,
- at least one measure of progress toward our goals, and
- fiscal year 2008, 2009, and 2010 expenditure information.

If the measures of progress appeared in our 2009 department performance plan, the 2009 target will be included. The year 2009 refers to the state fiscal year in which the data was reported. Not all programs will have 2009 data. In these cases, the data for the most recent year available is reported for the measure. Overall, programs showed progress toward meeting targets or met targets for 65% of the 144 reported measures in the profiles. More detailed information about how we are doing is available in the *How do we measure our progress?* section of each profile.

To take a virtual tour of IDPH and view the most recent versions of the profiles, go to <a href="https://www.idph.state.ia.us/what\_we\_do.asp">www.idph.state.ia.us/what\_we\_do.asp</a>.





Division of Health Promotion & Chronic Disease Prevention Phone: 1-800-308-5986

www.idph.state.ia.us/hpcdp/health\_care\_access.asp



Life in rural lowa has a lot going for it: open spaces, green grass, fresh air, and a canvas of stars at night. Life in rural lowa also has its drawbacks: snow covered roads in winter, muddy roads in spring, and sometimes, a long ride into town for groceries or to see the doctor. IDPH's Access to Quality Health Services programs work to ensure rural lowans are able to get timely health care, especially in the case of an emergency.

When public transportation services in Butler, Monroe, and Pottawattamie counties became a concern, IDPH examined, and then recommended actions to improve services in those counties. The lowa Department of Transportation then used that tool to create a statewide assessment of transportation needs and worked with IDPH to find ways to improve access to health care.

Urban or rural, IDPH Access to Quality Health Services programs strive to make health care within arm's reach for all lowans.

Did you know? Nearly half (45%) of Iowans live in rural areas.

# Why is Access to Quality Health Services important to promoting and protecting the health of lowans?

- All lowans need to be able to get timely emergency health care access.
- All lowans need to be able to get health care within a
  reasonable time, using primary care services in a timely fashion to prevent more serious health consequences
  and to reduce unnecessary emergency room visits.
- IDPH can effectively speak on behalf of rural health issues at the national and state levels.
- No other state entity provides a high level of assistance and advocacy for health care access.
- The Access to Quality Health Care programs maintain the state's commitment to healthier lowans and communities.

#### What do we do?

- Provide funding to rural hospitals and health systems to pay for projects that enhance health care.
- Award contracts to eligible hospitals to support improvement activities including staffing, education, technology purchases, and updates and renovations.
- The three health delivery system programs of the Bureau of Health Care Access (State Office of Rural Health, Medicare Rural Hospital Flexibility Program, and Small Rural Hospital Improvement Program) use federal-state partnerships to find and solve problems regarding rural health care access.
- Collect and distribute information on the local, state, and national levels on rural health issues.

► Which Iowa Public Health Goals

Strengthen the public health infrastructure

are we working to achieve?

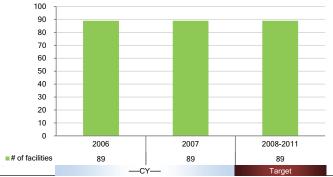
- Work with other public agencies to fight barriers to health care access.
- Develop projects and activities that may be used and serve as models for communities throughout lowa.
- Provide mini-grants to rural hospitals and health systems to pay for quality improvement projects.
- Coordinate Health Care Reform efforts for Health and Long Term Care and for the Direct Care Workforce.







• Number of health care facilities that enhance or expand health care services to the underserved by using the health workforce and bureau-sponsored programs.



Data Source: Bureau progress reports. Data are available annually.

**How are we doing?** We're on target with these measures with a recorded impact on 82 hospitals and 7 hospital health systems.

## Percent of eligible hospitals served by the SHIP program.

Data Source: SHIP program progress reports. Data are available annually.

Baseline, CY2006 – 100%. Most Recent Year, CY2008 – 100%. 2008-2011 Target – 100%.

#### How are we doing?

100% of eligible hospitals are receiving funding. Hospital reports indicate that approximately 78% of funds are spent on quality improvement, 20% on compliance with the Health Insurance Portability and Accountability Act (HIPAA), and the remaining amount on implementing the Medicare Prospective Payment System (PPS).

## What can you do to help?

- 1. Learn more about the Bureau of Health Care Access and the importance of rural health care access by visiting <a href="https://www.idph.state.ia.us/hpcdp/health">www.idph.state.ia.us/hpcdp/health</a> care access.asp.
- 2. Take part in rural health and local community planning for health services.

## Others working on similar issues

**Other IDPH bureaus, offices, or programs:** Health Workforce, Safety Net Services.

Other organizations: Iowa Rural Health Association, National Office of State Offices of Rural Health, National Rural Health Association, Iowa Public Health Association, , Iowa Hospital Association, Iowa Foundation for Medical Care, Iowa Nebraska Primary Care Association, Health Services and Resources Administration (HRSA).

#### Funding sources

**FLEX**: federal grant: 0153-0914. **State Office of Rural Health**: federal grant: 0153-0902. **SHIP**: federal grant: 0153-0916. **Health Delivery Systems**: general fund, tobacco fund, federal grant; State funds are used for a 3:1 match for the Office of Rural Health Grant: K07-0767/0773; K09-0905/0979; K19-1933; K32-3201; K72-7201; K95-9501.

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$702,146	\$540,089	\$741,116
Tobacco funds	\$96,266	\$100,000	\$0
Federal funds	\$1,295,106	\$1,361,100	\$1,341,774
Total funds	\$2,093,518	\$2,001,189	\$2,082,890
FTEs	7.73	9.68	10.70

**Note:** Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.

Iowa Department of Public Health ♦ Division of Health Promotion & Chronic Disease Prevention ♦ Access to Quality Health Services

Phone: 1-800-308-5986 ♦ Fax: 515-242-6384 ♦ www.idph.state.ia.us/hpcdp/health\_care\_access.asp

4th Floor, Lucas Building ♦ 321 E. 12th Street ♦ Des Moines, IA 50319-0075

FLEX – Phone: 515-281-4808 ◆ www.idph.state.ia.us/hpcdp/flex\_program.asp

SHIP – Phone: 515-281-6765 • www.idph.state.ia.us/hpcdp/ship\_program.asp

State Office of Rural Health – Phone: 515-281-7224 ◆ www.idph.state.ia.us/hpcdp/rural\_health.asp







www.idph.state.ia.us/adper/cade.asp



It began with a few cases in eastern Iowa. Cases had spent time in both the Mississippi River and county swimming pools. Within a matter of weeks, there were hundreds of cases of the parasitic disease, cryptosporidiosis. Resistant to chlorine, crypto thrives in water environments. Those who ingest the parasite experience profuse diarrhea, stomach cramps, and low-grade fevers. The crypto outbreak of 2007 was the largest in lowa history with nearly 1,000 cases reported to the Center for Acute Disease Epidemiology (CADE).

CADE works to keep lowans healthy by studying the causes, determining the risks, and controlling the spread of diseases. By continually monitoring, tracking, and testing for diseases, CADE works to prevent future disease outbreaks.

Did you know? The majority of food-borne illness originates from food eaten and prepared at home.

#### Why is CADE important to promoting and protecting the health of lowans?

- All lowans are affected by disease. CADE receives an average of 20 disease reports daily (about 5,000 per year) that must be investigated.
- Epidemiology (the study of disease) helps track illness to determine when there is a widespread threat to your health.
- Disease is spread in many ways. With the help of county health agencies and providers, CADE investigated and/or referred nearly 4,000 cases of infectious disease.

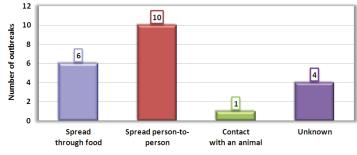
Which Iowa Public Health Goals are we working to achieve?

Prevent epidemics & the spread of disease

Prepare for, respond to, & recover from public health emergencies

Promote healthy behaviors

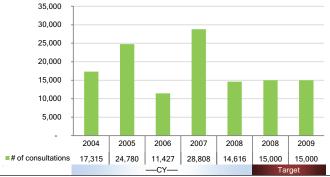
#### How outbreaks began - source of known outbreaks in 2008



#### What do we do?

- Monitor and control infectious diseases.
- Plan and prepare for public health emergencies through training exercises.
- Epidemiologists work with counties to fight diseases and outbreaks.
- Develop and use ways to prevent and control diseases.
- Provide advice, equipment, and assistance to health care providers.

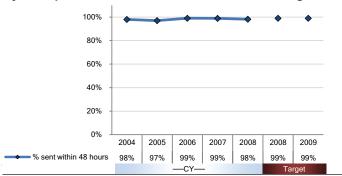
• Number of infectious disease consultations provided to clinicians, local public health officials, hospital infection control staff, and the public.



Data Source: CADE staff logs, email accounts. Data are available annually.

How are we doing? CADE continues to provide thousands of consultations each year.

**2** Percent of disease reports that are sent out for follow-up by local public health within 48 hours of receiving them.



Data Source: CADE disease report processing system. Data are available annually.

How are we doing? CADE refers disease reports to local public health agencies for follow up investigation. In addition, and as a reminder for investigations that remain open, CADE sends an "outstanding reports" notification to counties on a routine basis. The number of cases in this report has decreased substantially since it began in 2005. This is one indication that local public health agencies are more aware of the importance of complete and timely disease investigation and reporting.

#### What can you do to help?

- 1. All lowans can help stay well and prevent the spread of illness with good health habits: Eat healthy foods, exercise, keep your vaccinations up-to-date, and remember to wash your hands!
- 2. Public health officials and health care providers should be aware of infectious diseases and remember the importance of reporting those diseases to IDPH by phone at 1-800-362-2736 or via fax at 515-281-5698.
- 3. All lowans can learn about diseases and the way diseases are spread by getting information and advice from trustworthy sources www.idph.state.ia.us/adper/cade.asp.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: HIV/AIDS/Hepatitis, Immunization, Prescription Services, Sexually Transmitted Disease (STD) Prevention, Tuberculosis (TB) Control.

Other organizations: Hospitals—infection control is an essential service for all health care facilities, primarily hospitals; local public health agencies—the same issues addressed by CADE are often present on a smaller scale to local public health agencies; environmental health specialists; laboratories.



#### Funding sources

General fund, federal grants, & private grants\*: K15-1501; 0153-1502/1506/1510/1512/1514

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$556,183	\$549,236	\$493,880
Federal funds	\$993,597	\$1,377,596	\$1,223,387
Other funds*	\$0	\$70,573	\$103,887
Total funds	\$1,549,780	\$1,997,405	\$1,738,322
FTEs	8.49	8.57	11.00

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Division of Health Promotion and Chronic Disease Prevention

Phone: 515-281-4779 www.idph.state.ia.us/hpcdp/asthma.asp



Since 2003, an important part of the IDPH Asthma Control Program has been the *Young and the Breathless* trainings and asthma management sessions. Held across the state with Visiting Nurse Services consultants, the *Young and the Breathless* trainings have been provided to more than 1,395 child care provider staff in 213 child care facilities (employing 4,260 staff) caring for nearly 40,170 children including nearly 400 children who have asthma.

In addition, 200 public health nurses or childcare nurse consultants in 90 counties participated in train-the-trainer *Young and the Breathless* training. Over 200 office nurses and pediatric nurse practitioners and nearly 300 nursing students have attended the training.

## Did you know?

While the number of Iowans with asthma has remained stable since 1999, IDPH estimates that better management of the condition has contributed to an annual savings of \$9.2 million in hospitalization costs in Iowa.

# Why is the Iowa Asthma Control Program important to promoting and protecting the health of Iowans?

- Between 45,000 and 50,000 lowa children (7%) currently have health care provider-diagnosed asthma.
   Many studies suggest that just as many lowa children have undiagnosed asthma.
- More than 148,000 lowa adults currently have health care provider-diagnosed asthma.
- Each year in lowa, uncontrolled asthma leads to 12,000 hospitalizations; 40,000 to 50,000 emergency department visits; 35,000 to 40,000 unscheduled doctor's office visits; 140,000 lost school days; and direct and indirect costs of \$144 and \$154 million.

Which Iowa Public Health Goals are we working to achieve?

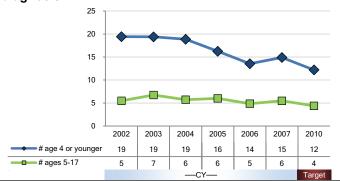
Promote healthy behaviors

Strengthen the public health infrastructure

#### What do we do?

- Partner with the American Lung Association of Iowa to facilitate the Iowa Asthma Coalition.
- Provide Young and the Breathless trainings and asthma management sessions across the state through a partnership with Visiting Nurse Services child care nurse consultants. Young and the Breathless trainings promote awareness of how policies and the physical environment play an important role in managing asthma. Education is provided to child care providers and schools, school nurses, child care nurse consultants, and public health nurses; at breakout sessions at state conferences; and at educational sessions for college nursing classes at central lowa colleges.
- Promote asthma management through
  - using an asthma action plan,
  - recognizing your asthma symptoms, and
  - avoiding your triggers.
- Provide outreach to Iowa communities, healthcare professionals, childcare providers, schools, and people with asthma by providing information on asthma and links to resources.

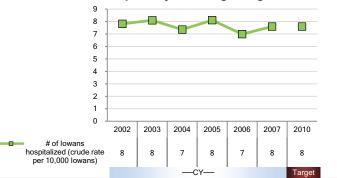
 Number of lowa children hospitalized (per 10,000 lowa children) for which asthma is the primary discharge diagnosis.



Data Source: State Inpatient Database (SIDS). Data are available annually—with a one to two-year delay in release and analysis.

**How are we doing?** Rates are trending downward, but are still much higher for children under the age of five.

2 Number of lowans hospitalized (per 10,000 lowans) for which asthma is the primary discharge diagnosis.



Data Source: State Inpatient Database (SIDS). Data are available annually—with a one to two-year delay in release and analysis.

**How are we doing?** Rates have decreased substantially since 1995 when the rate was 10.9 per 10,000 lowans. The rate has leveled off recently, but is currently below our 2010 target.

#### What can you do to help?

- 1. Help lowans with asthma learn how to manage their asthma by using Asthma Action Plans. Asthma Action Plans and instructions for using them can be found on the Iowa Asthma Control Program Web page at www.idph.state.ia.us/hpcdp/asthma.asp or you can get free copies by calling 515-281-4779.
- 2. Help lowans with asthma recognize symptoms of asthma exacerbations and reduce asthma triggers (mostly environmental). To learn how, contact the Iowa Asthma Control Program Coordinator at 515-281-4779 or ahoffman@idph.state.ia.us.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Chronic Disease Prevention and Management programs; Healthy Homes Initiative; Healthy Iowans 2010; Healthy Child Care Iowa.

Other organizations: Centers for Disease Control and Prevention (CDC); Iowa Asthma Coalition; Visiting Nurse Services (VNS); American Lung Association (ALA) of Iowa; Iowa Department of Education; Child Care Resource and Referral; Iowa Department of Natural Resources (IDNR).

## **Funding sources**

Federal grant: 0153-0702

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Federal funds	\$239,493	\$260,096	\$75,415
Total funds	\$239,493	\$260,096	\$75,415
FTEs	2.28	2.15	0.00

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Division of Behavioral Health Phone: 515-281-8465 www.idph.state.ia.us/bh/brain injury.asp



You can't always see it. But more than 2,500 lowans will suffer from one this year. A brain injury. Brain injuries can be the result of something as minor as a fall on the ice or as major as a head-on car crash. Whatever the cause, brain injuries can result in physical, mental, and social changes. Brain injury victims and their families need proper diagnosis and treatment to deal with the challenges they face.

The Brain Injury program works to improve the lives of Iowans living with brain injuries and their families by linking people with services and by promoting safety to prevent brain injuries from happening in the first place. A life may be changed by a brain injury - but that life goes on and the Brain Injury program works to ensure that life is the best and most productive it can be.

Did you know? The Centers for Disease Control and Prevention (CDC) says at least 50,000 Iowans are currently living with long-term disabilities caused by a brain injury.

#### Why is the Brain Injury program important to promoting and protecting the health of lowans?

- Each year, over 2,500 lowans will be diagnosed with a brain injury.
- Brain injuries happen in a wide variety of ways. The top causes are falls, vehicle crashes, being hit by an object, and assaults.
- Falls, which can result in brain injury, are the leading cause of injuries to elderly lowans.
- Brain injury can cause changes in thinking, language, learning, emotions, and behavior. It can also increase the risk of epilepsy, Parkinson's disease, and other brain disorders.

► Which Iowa Public Health Goals are we working to achieve?

Prevent injuries

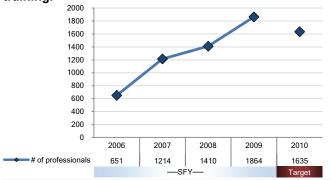
Promote healthy behaviors

Strengthen the public health infrastructure

#### What do we do?

- Promote and carry out injury prevention activities.
- Provide brain injury information, awareness, and learning opportunities.
- Work through the Brain Injury Association of Iowa to match lowans with brain injury and their families to supports and services.
- Study the needs of people with brain injury, as well as their families, so their needs can be better met.
- Make recommendations to other state departments to support a comprehensive statewide service delivery system.
- Administer contracts through the Iowa Association of Community Providers for provider training.

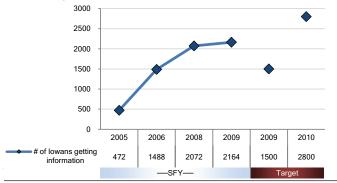
• Number of health professionals receiving brain injury training.



Data Source: Program records. Data are available annually.

How are we doing? We have continued to substantially increase the number of health professionals trained on providing appropriate services for people experiencing brain injury. These numbers are taken from attendance records and do not necessarily represent unduplicated individuals. SFY 2009 - 46 trainings were held and impacted staff at 123 provider sites.

Number of lowans with brain injury that get information about living with it and preventing secondary disabilities.



Data Source: Brain Injury Association of Iowa. Data are available

How are we doing? The number of lowans getting information about brain injury has increased more than 450% from 2005 to 2009.



#### What can you do to help?

- 1. Iowans and family members experiencing brain injury can advocate for increased and appropriate brain injury related services. For more information, contact the Brain Injury Association of Iowa at <a href="https://www.biaia.org">www.biaia.org</a> or call 1-800-444-6443.
- 2. Healthcare professionals can provide appropriate services to lowans with brain injury. For more information on special training opportunities, go to: http://www.biausa.org/lowa/education.htm
- 3. All lowans can help prevent the likelihood of brain injury by using seat belts and helmets. To learn more about injury prevention, go to: http://www.idph.state.ia.us/bh/brain injury prevention.asp



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Advisory Council on Brain Injuries, Disability Prevention; Violence Prevention, Injury Prevention & Emergency Medical Services for Children; Occupational Injury, Illness, & Death Surveillance, Chronic Disease Prevention.

Other organizations: Brain Injury Association of Iowa, Iowa Departments of Blind, Education, Human Services, and Workforce Development, Iowa Association of Community Providers, Iowa Safe Kids Coalition, Health Services Resources Administration, National Association of State Head Injury Administrators.



#### Funding sources

General fund, federal grant, federal recovery & reinvestment (FRR) funds, & intra state receipts\*: K07-0853/0854; 0153-1802

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$63,169	\$538,045	\$493,356
Federal funds	\$76,176	\$88,046	\$229,749
FRR funds	\$0	\$0	\$9,762
Other funds*	\$1,819,164	\$0	\$0
Total funds	\$1,958,509	\$626,091	\$732,867
FTEs	2.42	0.93	1.65

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Division of Health Promotion & Chronic Disease Prevention

Phone: 515-281-0925

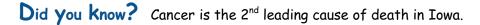
www.idph.state.ia.us/hpcdp/comp cancer control.asp



The numbers are sobering – nearly 16,000 lowans will be diagnosed with cancer this year and 6,300 will die. But cancer statistics are more than numbers. They represent real people – you, your relatives, neighbors, co-workers, and friends. The lowa Cancer programs are there to help prevent, detect, and treat cancer – one person at a time.

During a routine physical exam, "Karen" discovered a lump in her breast. She was concerned about how she would pay for needed testing. With the help of IDPH and the local Breast and Cervical Cancer Screening program, Karen received the tests, and cancer was confirmed. That was the beginning of Karen's journey of survival, a journey that IDPH and program nurses took with her, offering help with medical expenses, education, and friendly support every step of the way.

As Karen wrote to IDPH, "Thank goodness a program like this exists in the community."



## Why are Cancer programs important to promoting and protecting the health of lowans?

- Cancer is a statewide problem that affects nearly all lowans; either their own, someone in their family, coworkers, or friends.
- Many types of cancer can be prevented, or when detected early, can be successfully treated.
- More than half of lowans diagnosed with cancer will survive it.

▶ Which Iowa Public Health Goals are we working to achieve?

Promote healthy behaviors

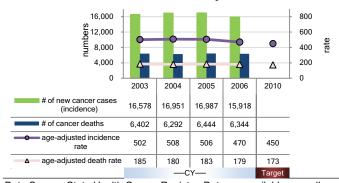
Strengthen the public health infrastructure

#### What do the Cancer programs do?

- The Comprehensive Cancer Control (CCC) program works with the lowa Consortium for Comprehensive Cancer Control (ICCCC) to develop the state cancer control plan, and put it into action. The program provides financial support for many projects working to reduce the burden of cancer in lowa. For more information on the state cancer control plan, go to <a href="https://www.canceriowa.org">www.canceriowa.org</a> or <a href="https://www.canceriowa.org">www.idph.state.ia.us/hpcdp/jowas</a> cancer plan.asp.
- The program also supports two colorectal cancer screening projects in Black Hawk County and Linn County. Men and women ages 50 and older with incomes below 250% of the federal poverty guideline are eligible to be screened through these projects.
- Other colorectal cancer activities including raising awareness of the disease and the need for screening.

- The CCC program also works to raise awareness of the ways to reduce skin cancer risk among preschool and school-age children.
- The lowa Care for Yourself Breast and Cervical Cancer Early Detection program helps eligible women with household incomes of up to 250% of the federal poverty guideline gain access to breast and pelvic exams, mammograms, and Pap tests. The program reimburses health care providers for the screening and diagnostic services provided to eligible women. The program also works to increase awareness across the state of the importance of early detection, diagnosis, and treatment.

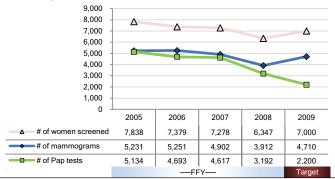
#### • lowa cancer incidence and mortality.



Data Source: State Health Cancer Registry. Data are available annually. Go to www.public-health.uiowa.edu/shri/Index.html for information about age-adjusted rates.

How are we doing? The number of new cases diagnosed has grown over the years, but many of the new cases are due to improved screening and early diagnosis. Cancer deaths in Iowa have been stable for the past few years, despite the increase in the number of new diagnoses.

#### Number of women screened, and number of mammograms and Pap tests provided.



Data Source: BCCEDP Data Set. Data are available annually.

How are we doing? In FFY2008, the program screened 6,347 women. Data from 2003 suggest that the lowa program screens about 25% of the eligible women ages 40–64 with mammography. The number of women who can be screened depends on funding from the Centers for Disease Control and Prevention (CDC), other grants, and private donations. Over the past three years, the CDC has reduced funding for the program; thus, the number of women served has also declined.

#### What can you do to help?

- 1. All lowans can learn more about cancer prevention, early detection, treatment, and survivorship. Visit www.canceriowa.org to learn more about cancer.
- 2. All lowans can live healthier lives; quit smoking or don't start, maintain a reasonable weight, exercise, and avoid too much sun.
- 3. Learn the risk factors and cancer symptoms by going to www.canceriowa.org.
- 4. Have regular age and risk-appropriate cancer screenings (Pap test, mammogram, skin checks, colonoscopy, etc.). To learn about cancer screenings, go to www.canceriowa.org.
- 5. Join the ICCCC and help reduce the burden of cancer in Iowa.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Tobacco Use Prevention & Control, Radiological Health, Oral Health, Access to Quality Health Care, Multicultural Health, Substance Abuse Prevention & Treatment, Family Planning, Women's Health.

Other organizations: American Cancer Society, State Health Registry of Iowa, Holden Comprehensive Cancer Center in Iowa City, Lance Armstrong Foundation, Susan G. Komen for the Cure. Bras for the Cause.



#### Funding sources

**CCC**: health care trust fund, federal grants, federal recovery & reinvestment (FRR) funds & private grant\*: K58-5865; 0153-0416/0428/0430/0598/0970

Breast & Cervical Cancer Early Detection: federal grant, private grant\*, & intra state receipts\* (Dept of Transportation - License Plate Sales): 0153-0408/0426/0596; K07-0852

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Health care trust	\$560,040	\$705,195	\$615,948
Federal funds	\$3,126,924	\$3,097,591	\$3,992,939
FRR	\$0	\$0	\$7,718
Other funds*	\$177,957	\$354,387	\$437,902
Total funds	\$3,864,921	\$4,157,173	\$5,054,507
FTEs	7.67	7.35	9.15

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.

lowa Department of Public Health ♦ Division of Health Promotion & Chronic Disease Prevention ♦ Cancer 4th Floor, Lucas Building ♦ 321 E. 12th Street ♦ Des Moines, IA 50319-0075

Comprehensive Cancer Control Program: Phone: 515-281-0925 ◆ Fax: 515-281-6475 ◆ www.idph.state.ia.us/hpcdp/comp\_cancer\_control.asp

Iowa Care for Yourself Breast and Cervical Cancer Early Detection Program:

Phone: 515-281-5616 ◆ Fax: 515-281-6475 ◆ www.idph.state.ia.us/careforyourself/default.asp





Division of Health Promotion & Chronic Disease Prevention Phone: 1-800-383-3826

www.idph.state.ia.us/hpcdp/family health.asp



Successful child health promotion and preventive health care is rooted in a partnership of families, community, health care providers, and public health providers, lowa's Child Health programs promote the development of local systems of health care to ensure that all lowa children have regular, preventive health care. The Child Health programs strive to make family-centered, community-based, and culturally-sensitive health services available to all lowa children.

Did you know? In 2008, 161,000 Iowa children accessed health care services through Iowa's community-based child health centers.

#### Why is Child Health important to promoting and protecting the health of lowans?

- Research shows that for every \$1 invested in early health care and education of a young child, lowa will see an economic return of \$17 per child.
- Child health centers reach out to underserved populations, who are least likely to access preventive health services.
- Barriers to accessing preventive health services include income, transportation, and lack of knowledge that well-child care is important.
- While barriers affect all lowa children and families, the Child Health programs focus on those most at-risk: lowincome children, adolescents, and minorities.

Which lowa Public Health Goals are we working to achieve?

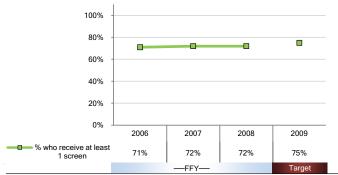
Promote healthy behaviors

Strengthen the public health infrastructure

#### What do we do?

- Provide funding for 23 child heath centers that assure child health services are available in all 99 counties for children and youth ages birth to 22.
- Encourage community-based child health agencies to work closely with medical providers to ensure familycentered, community-based, and culturally-sensitive preventive health services are offered.
- Provide access to community-based health resources through the toll free Healthy Families line, a 24-hour information and referral resource.
- Assist in developing local health care systems that meet present and future health needs.
- Support community-based child health agencies that link clients to medical and dental providers.

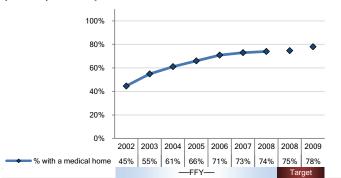
Percent of Medicaid enrolled children who receive at least one recommended screen.



Data Source: Federal CMS 4.16 report. Data are available annually.

How are we doing? Due to a change in the data collection methods of the Centers for Medicare & Medicaid Services (CMS), Iowa rates decreased in FFY2006. A slight increase was noted in FFY2007 and maintained in FFY2008.

**9** Percent of children served in the Child Health program (Title V) who report a medical home.



Data Source: Child & Adolescent Reporting System (CAReS). Data are updated quarterly. Annual unduplicated counts are available for FFY (Oct-Sept) in January.

How are we doing? There has been steady improvement in assuring children served by the Child Health program have medical homes.



#### What can you do to help?

- 1. Learn more about the healthy development of children. Go to www.iowaepsdt.org/ScreeningResources/IowaScrRecs05.pdf.
- 2. Learn more about community-based child health services by going to www.iowaepsdt.org.
- 3. Refer uninsured or underinsured families to child health centers by contacting the Healthy Families toll free line at 1-800-369-2229 or by visiting www.idph.state.ia.us/webmap/default.asp?map=epsdt.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Early Childhood, Immunization, Lead Poisoning Prevention, Local Public Health Services, Oral Health, WIC.

Other organizations: Community Empowerment, Iowa Academy of Family Physicians, Iowa Chapter of the American Academy of Pediatrics, Iowa Department of Education – Early ACCESS, Iowa Department of Human Services - Iowa Medicaid Enterprise/EPSDT, Off to a Good Start Coalition, University of Iowa Child Health Specialty Clinics, University of Iowa Center for Disabilities and Development.



#### Funding sources

General fund, health care trust fund, RIFF funds, federal funds, federal recovery & reinvestment (FRR) funds, & intra state receipts\* (Dept of Human Services); State funds are used for a 75% match for the Title V Block Grant: K05-0505/0552/0554/ 0601/0931; K07-0863; K28-2801; K56-5669; K73-7301; 0153-0506/0522/0622/0654.

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$863,944	\$929,739	\$924,325
Health care trust	\$10,000	\$10,000	\$0
RIFF funds	\$0	\$130,000	\$130,000
Federal funds	\$2,273,290	\$2,006,469	\$2,077,335
FRR funds	\$0	\$0	\$22,203
Other funds*	\$340,656	\$1,569,245	\$4,267,900
Total funds	\$3,487,890	\$4,645,453	\$7,421,763
FTEs	12.21	14.05	19.05

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Division of Health Promotion & Chronic Disease Prevention Phone: 319-356-1117 www.uihealthcare.com/chsc



My name is Lisa Clark. My daughter Katelyn was born August 2, 1994. She was a beautiful baby. She progressed and met all of her milestones. On January 1, 1996, my husband woke me up at about 2 a.m. yelling something is wrong with Katelyn. She was like a limp doll. We called 911. At the ER, the doctor told us she had a 105-106 degree temperature and they gave her valium to stop her seizures. They diagnosed her with presumed viral encephalitis. Katelyn was in the hospital for over a month.

When she came home, we started a new life together. She was unable to eat or drink, walk or talk, and seemed unable to see. For 10 years now, we've had home care services from the hospital, PT and OT from AEA, and specialty health services from Child Health Specialty Clinics (CHSC). CHSC has been a great support and sounding board. It has been nice to have the support and advocacy from CHSC staff. Having CHSC here locally has decreased our need to travel out of town. Katelyn still has lots of mountains to climb, but we have conquered a few hills.

Did you know? About 100,000 Iowa children have some degree of a special health care need.

# Why is the Child Health Specialty Clinics important to promoting and protecting the health of lowans?

- Research suggests that about 15 to 20% of all children ages 0 to 18 have some type of special health care need.
- Children with special health care needs require services that are more intensive and comprehensive than children without special care needs require. These specialty services are often not available or accessible.
- ➤ Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

Promote healthy behaviors

- Research shows that specialty services are an important addition to primary care services for children who have chronic illnesses or developmental delays.
- Federal rules require that at least 30% of each state's Title V Maternal and Child Health Block Grant be used to focus on children with special health care needs.

#### What do we do?

- Improve access to direct-care pediatric specialty services, including behavioral consultations and nutrition services through telehealth technology.
- Provide community-based expertise and guidance about specialty care.
- Offer policy and planning expertise to improve the safety net for uninsured or underinsured lowans; and the service system for all children with special health care needs and their families.
- Provide care coordination to help families organize needed services so that they can be used easily.
- Provide family support through a statewide parent consultant network.
- Promote spread of the medical home model among community-based primary care providers, especially for the purpose of improving quality of care for children with special health care needs.

#### Page 26

Percent of children with special health needs (CSHCN) ages 0-18 whose families partner in decision-making at all levels and are satisfied with the services they receive.

Data Source: National CSHCN Survey. Data are available approximately every 5 years.

#### How are we doing?

In 2002, Iowa – 58.5%; National – 57.5%. In 2006, Iowa – 64.7%; National – 57.4%.

**2** Percent of CSHCN ages 0-18 who receive coordinated, ongoing, comprehensive care within a medical home.

Data Source: National CSHCN Survey. Data are available approximately every 5 years.

#### How are we doing?

In 2002, Iowa – 57.1%; National – 52.6%. In 2006, Iowa – 57.4%; National – 47.1%.

**❸** Percent of CSHCN ages 0-18 whose families have adequate private and/or public insurance to pay for the services they need.

Data Source: National CSHCN Survey. New data are available approximately every 5 years.

#### How are we doing?

In 2002, Iowa – 64.5%; National – 59.6%. In 2006, Iowa – 68.6%; National – 62.0%.

**9** Percent of CSHCN ages 0-18 whose families report the community-based service systems are organized so they can use them easily.

Data Source: National CSHCN Survey. Data are available approximately every 5 years.

#### How are we doing?

In 2002, Iowa – 77.8%; National – 74.3%. In 2006, Iowa – 92.9%; National – 89.1%.

9 Percent of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.

Data Source: National CSHCN Survey. Data are available approximately every 5 years.

#### How are we doing?

In 2002, Iowa – 2.3%; National – 5.8%. In 2006, Iowa – 47.3%; National – 41.2%.

#### What can you do to help?

- 1. Iowans who have or know of children with special needs can contact the Child Health Specialty Clinics by calling 319-356-1117 or visiting www.uihealthcare.com/chsc.
- 2. All lowans can recognize the essential public health role Child Health Specialty Clinics play as Iowa's Title V program for children with special health care
- 3. All lowans can ask their state legislators to continue state support for Child Health Specialty Clinics.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Congenital & Inherited Disorders. Early Childhood.

Other organizations: Iowa Department of Education Early ACCESS Program, University of Iowa Center for Disabilities and Development, Child Serve, Iowa Department of Human Services Division of MH/MR/DD/BI, other child and adolescent residential care facilities for mental health.



#### Funding sources

General fund, health care trust fund, & federal grant: K07-0703; K58-5863; 0153-0706

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$468,865	\$458,865	\$461,832
Health care trust	\$473,981	\$473,981	\$383,271
Federal funds	\$1,146,321	\$3,916,314	\$2,185,719
Total funds	\$2,089,167	\$4,849,160	\$3,030,822
FTEs	0.00	0.00	0.00

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Division of Health Promotion & Chronic Disease Prevention Phone: 641-842-6442 www.nca-online.org



Child abuse. No one wants to imagine the mental and physical pain an abused child must endure. Unfortunately, the pain can sometimes be prolonged by the very systems designed to protect the victims. Child Protection Centers provide a safe environment where all exams and interviews can occur in one place.

It took great courage for "Allen," a 16-year old boy, to reveal his stepfather had sexually abused him for years. It was extremely difficult and embarrassing for Allen to share the details of his abuse, but with the non-threatening environment of the Child Protection Center, he was able to give authorities enough details to take his case to trial, resulting in a guilty conviction, and prison time for his stepfather.

Child Protection Centers work to ease the pain of abuse through understanding and awareness.

Did you know? More than 12,000 children were abused in Iowa in 2008.



- Children who are victims of alleged child abuse are often further victimized by the numerous interviews and exams. At a Child Protection Center, all investigation can occur in one place.
- There are only four Child Protection Centers in Iowa, making it difficult to help all the children who need assistance.

Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

#### What do Child Protection Centers do?

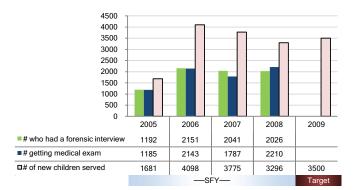
- Use a comprehensive team of law enforcement, state agencies, county attorney, mental health, family advocacy, and Child Protection Center staff to make sure children and families are not subjected to duplication of efforts.
- Provide a safe, child-friendly facility for interviews and/or services for abused children.
- Build community awareness and understanding of child abuse.
- Coordinate and track investigation efforts so cases do not "fall through the cracks."
- Improve prosecution of child abuse cases, thus holding more offenders accountable.

- Number of new children served.
- Number that had a medical exam.
- Number that had a forensic interview.

Data Source: CPC Reports to IDPH. Data are available annually.

#### How are we doing?

Child protection centers first received state funding in SFY2005. The CPCs have used this funding to increase capacity and infrastructure. Based on a comprehensive assessment of needs for additional CPC services throughout the state, the Iowa Chapter of National Children's Alliance is actively approaching and assisting the areas determined to have the highest need with forming a full service CPC or a satellite center.





#### What can you do to help?

- 1. Iowans who are abused or suspect that a child is being abused should seek help. If you suspect a child is being abused or neglected,
  - ▼ CALL a DHS local office 8:00 AM 4:30 PM Monday-Friday. For a clickable map of county office locations and contact information, go to www.dhs.state.ia.us/Consumers/Find Help/MapLocations.html, or
  - ✓ CALL lowa's Child Abuse Hotline at 1-800-362-2178.

For more information, go to

www.dhs.state.ia.us/Consumers/Safety and Protection/Abuse Reporting/ChildAbuse.html.

- 2. All lowans can support efforts to establish new Child Protection Centers or outreach efforts in new communities.
- 3. Public health professionals can build awareness of the Child Protection Centers and encourage use and support of their services. Go to www.nca-online.org to learn more.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Early Childhood.

Other organizations: National Children's Alliance, Iowa Department of Human Services, law enforcement, county attorneys, physicians, hospitals, clinics.



#### Funding sources

Intra state receipts\* (Dept of Human Services): K17-1764

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Other funds*	\$1,028,566	\$1,042,571	\$1,005,166
Total funds	\$1,028,566	\$1,042,571	\$1,005,166
FTEs	0.00	0.00	0.00

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Division of Acute Disease Prevention & Emergency Response Phone: 515-242-5224

www.idph.state.ia.us/adper/cap.asp



Remember the "telephone game?" You would whisper a secret into a friend's ear, then that friend would tell the next person, and so on. By the time the "secret" reached the end of the circle, it was completely wrong! That's an example of how important good, clear communication is. Making sure an important message reaches the right people also takes planning.

The Bureau of Communication and Planning works with media and public health agencies and providers to be sure important information about your health is communicated clearly and effectively. When a dead bat dropped off at the University of Iowa Hygienic Lab for testing turned out to have rabies, the family needed to know. Trouble is, they didn't leave their name. A lab worker remembered the county the family was from and that they were leaving on vacation soon. IDPH contacted local radio and television and within an hour, the family heard the messages! By creating a plan and using clear and effective communication, the family was successfully treated for exposure to rabies.

Did you know? The public health services available to you depend on where you live in Iowa.

#### Why is Communication and Planning important to promoting and protecting the health of lowans?

All lowans deserve high quality health services. The Iowa Public Health Standards define the public health services that should be available to you, no matter where you live in Iowa. Go to

Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

- www.idph.state.ia.us/mphi/standards.asp to learn more about "Modernizing Public Health in Iowa."
- Clear and accurate information helps lowans stay healthy, live with diseases like cancer or arthritis, and be ready for and cope with public health threats or emergencies.
- Through planning and organizing, the Bureau of Communication and Planning helps public health programs work together for the best results.
- Good planning and clear policies improve the quality of public health services at the local, state, and federal levels.

#### What do we do?

- Provide accurate information to the media and the public about health-related issues.
- Help set health goals, create plans to meet them, and then track the progress toward meeting those goals.
- Provide information to legislators about policies, services, legal requirements, and administrative rules.
- Work to find, hire, train, and retain a qualified, professional workforce for IDPH.
- Make sure that public health data are available to make decisions about what public health services are provided.
- Coordinate planning for changes in Iowa's public health system.
- Coordinate planning for the use and exchange of electroni health infirmation to improve patient centered health care and population health.

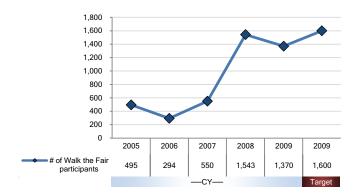


#### Number of participants in public health sponsored activities at the Iowa State Fair.

Data Source: After the Fair report. Data are available annually.

#### How are we doing?

More than 1 million people attend the State Fair each year. In 2009, approximately 267,000 came by the IDPH booth. Over 90,000 people talked with IDPH staff and/or got informational materials or a giveaway. Although we didn't reach our target, the number of people who participated in the healthy activity, "Walk the Fair," is still nearly 3 times higher than in 2005.



#### What can you do to help?

- 1. All lowans should learn about important public health issues and policies. Visit the IDPH homepage at www.idph.state.ia.us.
- 2. Public health professionals should continue to learn about the importance of working with the media to deliver health messages to protect and promote the health of lowans.
- 3. All lowans should be aware of the public health services they can expect from local and public health, no matter where they live. For more information, go to www.idph.state.ia.us/mphi/.
- 4. All lowans should learn about plans to promote the adoption and use of health information technology. For more information, go to www.idph.state.ia.us/hcr committees/electronic health info.asp.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Disaster Operations & Response, Health Care Access, Multicultural Health, Local Public Health Services, Finance.

Other organizations: National Public Health Information Coalition (NPHIC), Public Relations Society of America (PRSA), National Association of Government Communicators (NAGC), American Health Planning Association, Iowa Public Health Association, Iowa Association of Local Public Health Agencies, local public health agencies, National Association of County and City Health Officials (NACCHO), CDC National Public Health Performance Standards (NPHPS) Program, Association of State and Territorial Health Officials (ASTHO), Iowa Department of Administrative Services, Iowa Department of Management, AFSCME, IUP.



#### Funding sources

General fund, health care trust funds, federal indirect funds, federal recovery & reinvestment (FRR) funds, private grants\*, private donations,\* & registration fees\*: K09-0969; K09-0977, K19-1963; K21-2211; K60-6071; 0153-0954/2110/2236/2238

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$307,488	\$347,101	\$585,138
Health care trust	\$65,779	\$72,279	\$61,350
Federal funds	\$825,812	\$1,208,845	\$3,540,897
FRR funds	\$0	\$0	\$362,865
Other funds*	\$91,117	\$91,867	\$313,608
Total funds	\$1,290,196	\$1,720,092	\$4,863,858
FTEs	14.03	17.53	21.70

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Division of Health Promotion & Chronic Disease Prevention Phone: 1-800-383-3826

www.idph.state.ia.us/genetics/default.asp



Zachariah, born in November 2000, was the first baby diagnosed with medium chain acyl coA dehydrogenase deficiency (MCAD) through the Iowa Neonatal Metabolic Screening Program (INMSP). He was born just a few weeks after the INMSP began to screen for MCAD deficiency. Without early identification through newborn screening, 30% of these babies will die or have significant morbidity secondary to significant hypoglycemia. With early identification, monitoring, education, and early medical care during times of illness, the prognosis is excellent. Today, Zachariah is a healthy, happy six-year-old. His growth and development are completely normal and his prognosis is excellent.

Through programs like these, the Center for Congenital and Inherited Disorders (CCID) advances the health and well-being of children with genetic conditions and special health needs in partnership with families, health and human service providers, and communities.

Did you know? About 40,000 children are born in Iowa every year. Each year, an average of 1,850 are born with a congenital or inherited disorder, and approximately 200 additional babies are stillborn. The CCID programs serve all steps of the life cycle: prenatal, neonatal, pediatric, and adult.

#### Why is the Center for Congenital and Inherited Disorders important to promoting and protecting the health of lowans?

- Screening programs for the early detection of inherited or congenital disorders helps assure that intervention can be provided earlier to eliminate or reduce disability.
- Early detection and treatment can prevent mental retardation and even death in children born with an inherited or congenital disorder.

Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

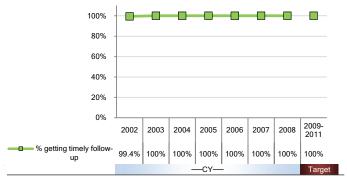
Promote healthy behaviors

#### What do we do?

CCID provides the structure through which comprehensive genetic health care services, laboratory services, and surveillance are developed and implemented as vital parts of lowa's health care system. CCID assures statewide genetics education is provided to promote health and prevent disease and develops policies and programs that assure the availability of and access to quality genetic health care and laboratory services. The CCID administers seven programs:

- Regional Genetics Consultation Services regional clinics provide statewide medical consultation and counseling to people with a diagnosed genetic disorder.
- Neuromuscular & Related Disorders provides medical consultation and counseling to those with a diagnosed neuromuscular disorder, such as muscular dystrophy.
- Iowa Neonatal Metabolic Screening Program (INMSP) conducts newborn dried blood spot testing and short and • long term follow-up for metabolic disorders and cystic fibrosis. Testing is done for Iowa, North and South Dakota, and Saudi Arabia. INMSP also provides metabolic formula and medical foods for people diagnosed with PKU and other inherited disorders of metabolism that require medically necessary foods.
- Iowa Registry for Congenital and Inherited Disorders conducts surveillance for congenital and inherited disorders and stillbirth on children born in Iowa.
- Stillbirth Surveillance Program supports stillbirth surveillance activities of the Iowa Registry for Congenital and Inherited Disorders. Promotes stillbirths awareness and initiatives that may reduce the number of fetal deaths.
  - Family Health History Initiative provides resources for people to explore and compile their family health history to determine their risk of inheriting disease. Provides resources for lifestyle/behavior changes and screening tests based on the results of their family health history.
  - Maternal Serum AFP Screening Program conducts prenatal testing on maternal serum to screen for congenital/inherited disorders of the fetus.

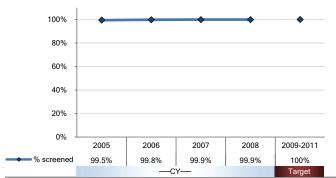
Percent of screen positive newborns who get timely follow up to definite diagnosis and clinical management for condition(s) mandated by their statesponsored newborn screening programs.



Data Source: INMSP/UHL database. Data are available annually.

How are we doing? In 2007, all 185 children with a positive screen received timely follow-up services.

Percent of children, who do not have a parent-signed waiver, that are screened for disorders tested through the lowa newborn screening panel.



Data Source: INMSP/UHL database. Data are available annually.

How are we doing? Nearly all lowa newborns are screened using the lowa newborn screening panel.

#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Child Health Program (Early Hearing Detection and Intervention), IDPH chronic disease prevention programs, Center for Health Statistics.

Other organizations: University of Iowa Department of Pediatrics, Department of Maternal Fetal Medicine, and Colleges of Medicine, Public Health, and Nursing.



#### What can you do to help?

#### All lowans can

- 1. Go to www.idph.state.ia.us/genetics/default.asp to learn more about CCID programs.
- 2. Support and promote newborn dried blood spot screenings for all newborns by having your children screened, and encouraging others to do the same.
- 3. Conduct your own family health history and talk to your health care provider about the results.
- 4. Talk to your legislators about funding for newborn screening and genetic programs.
- 5. Contact the CCID advisory committee with questions or issues. Go to www.idph.state.ia.us/genetics/common/pdf/committe

e roster.pdf for a committee roster.

#### Health care professionals can

- 1. Teach patients about the benefits of newborn screening.
- 2. Provide newborn screening for all newborns in your care and follow-up for positive screens.
- 3. Help patients gather their family health history and discuss the results with them.
- 4. Learn more about science-based genetic research.

#### Policymakers can

- 1. Learn about science-based genetic research and genetic programs.
- 2. Provide funding for public health-based genetic programs.

#### **Funding sources**

General fund, health care trust fund, tobacco fund, federal grants, private grants\*, & retained fees\*: K07-0705/0709/0765; 0830-0830; K56-5667; K58-5867; K81-8102; K84-8402; 0153-0714/0716/0718/0720

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$1,041,085	\$934,105	\$1,009,917
Health care trust	\$3,535	\$5,869	\$0
Tobacco funds	\$126,000	\$119,384	\$0
Federal funds	\$353,956	\$434,526	\$660,910
Other funds*	\$48,226	\$37,432	\$35,000
Total funds	\$1,572,802	\$1,531,316	\$1,705,827
FTEs	2.07	2.01	1.65

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.



Division of Health Promotion & Chronic Disease Prevention

Covering Kids & Families - Phone: 515-281-7721 www.idph.state.ia.us/coveringkids/default.asp

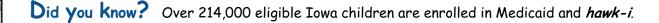
hawk-i Outreach – Phone: 515-242-5980 www.hawk-i.org

Promoting & Protecting the Health of Iowans



Karen is a single, working mom who needed health insurance for her child. She couldn't afford it, but heard about the *hawk-i* insurance program for low-income children. She heard about the program from a *hawk-i* outreach coordinator in her community. She filled out the 2-page application, sent it in, and soon after her *hawk-i* coverage began, her daughter got poison ivy. No problem. Her daughter saw the doctor and all turned out well. This story shows how the *hawk-i* program works. What Karen doesn't know is the deeper story that shows how IDPH's Covering Kids & Families (CKF) program works.

That 2-page form Karen filled out was once a 17-page booklet; and at one time, there was a six-month waiting period for *hawk-i* coverage to begin. CKF worked to make those changes. That's how CKF strives to eliminate the barriers that keep kids from needed health care coverage – making things easier and faster to help keep lowa kids healthy!





- The lowa Department of Human Services estimates that about 40,000 uninsured lowa children under the age of 19 are below 300% of the poverty level.
- Research overwhelmingly shows that access to health care coverage increases a child's readiness to learn, improves school performance by nearly 70%, increases focus in class by 68%, and improves school attendance.
- ➤ Which Iowa Public Health Goals are we working to achieve?

Promote healthy behaviors

Strengthen the public health infrastructure

- Nearly one-third of all Americans (about 90 million people) have trouble understanding and using health information.
- According to the 2005 lowa Child and Family Household Health Survey, 97% of those surveyed said it was very important for children to have health insurance.

#### What do we do?

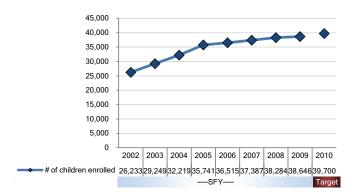
- Work with other organizations and agencies to provide information and applications to families at various locations.
- Help families navigate the Medicaid and hawk-i enrollment process.
- Develop and deliver timely, culturally-correct education and materials to lowans through conferences, health fairs, and trainings.
- Encourage policy and procedure changes in the Medicaid and *hawk-i* programs to increase the number of people who stay in the programs.
- Consult with other programs, such as Oral Health, to create effective outreach and communication materials for health insurance, and overall child and family health and wellness.
- Plan meetings and trainings to discuss ways to expand health care coverage outreach and education, simplify coverage programs, and coordinate coverage.
- Test materials and promote awareness of "health literacy"
   the ability to easily understand health information.



Number of children enrolled in Medicaid expansion & hawk-i.

Data Source: Iowa Department of Human Services. Data are available monthly.

How are we doing? Enrollment numbers are steadily rising. Effective July 1, 2009, *hawk-i* eligibility will increase to 300% of the federal poverty level. The Iowa Department of Human Services estimates an additional 5,000 uninsured children will be eligible for coverage.



#### What can you do to help?

- 1. All parents, health care providers, community members, policy makers, and employers can learn about the Covering Kids & Families program at www.idph.state.ia.us/coveringkids/default.asp and the hawk-i program at www.hawk-i.org.
- 2. Parents with questions about their eligibility for the hawk-i insurance program should contact hawk-i customer service at 1-800-257-8563. For more information, go to www.hawk-i.org.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Access to Quality Health Care, Child Health, Child Health Specialty Clinics, Immunization, Lead Poisoning Prevention, Maternal Health, Oral Health, Physical Activity & Nutrition, WIC.

Other organizations: Iowa Departments of Education and Human Services, Community Health Services of Marion County, Visiting Nurse Services, Des Moines County Health Department, Outlooks/State Public Policy Group, Iowa State University Extension, Des Moines Public Schools, Mercy Hospital, Iowa Medical Society, Drake University Head Start, Iowa Legal Aid, Iowa/Nebraska Primary Care Association, Every Child Counts, March of Dimes, Wellmark Foundation, the Bryton Companies, McFarland Clinic, University of Iowa Hospitals, Decatur Medical Systems, Iowa Senate, Iowa House of Representatives, Medical Associates Clinic.



#### Funding sources

Intra state receipts\* (Dept of Human Services)\*: 0153-0534/0688

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Other funds*	\$405,797	\$431,709	\$411,980
Total funds	\$405,797	\$431,709	\$411,980
FTEs	1.72	1.67	1.00

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.

lowa Department of Public Health ♦ Division of Health Promotion & Chronic Disease Prevention ♦ Covering Kids & Families & hawk-i Outreach 5th Floor, Lucas Building ♦ 321 E. 12th Street ♦ Des Moines, IA 50319-0075

**Covering Kids & Families** 

Phone: 515-281-7721 ◆ Fax: 515-242-6013 www.idph.state.ia.us/coveringkids/default.asp hawk-i Outreach

Phone: 515-242-5980 Fax: 515-242-6013

www.hawk-i.org





### **Iowa Dental Board**

Phone: 515-281-5157 www.dentalboard.iowa.gov



Did you know the practice of dentistry dates back to Egyptian times? A tomb from 2600 BC marks the death of Hsye-Re, known as the "greatest to deal with teeth." We've come a long way since those ancient days. Today, dentistry involves not only the repair of damaged teeth, but preventive care and even appearance-related treatments, like teeth whitening.

The lowa Dental Board helps keep lowans healthy by making sure only qualified dentists, dental hygienists, and dental assistants practice in lowa. By licensing health professionals, lowans can be confident they are receiving competent care.



There are more than 6,500 dentists, dental hygienists, and dental assistants licensed in Iowa.

## Why is the lowa Dental Board important to promoting and protecting the health of lowans?

- All lowans deserve ethical and safe care from competent, qualified practitioners.
- Setting standards for licensure ensures that minimum standards are met.
- Licensing is an effective way to keep untrained and dishonest individuals from practicing dentistry, dental hygiene, or dental assisting in Iowa.

Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

- License health professionals.
- Investigate complaints about health professionals.
- Discipline health professionals who break the law.
- Monitor disciplined and impaired (e.g., substance abuse, mental health problems) professionals so they can return to practice as soon as it's safe.
- Provide licensure and discipline data to the public.
- Educate professional groups, students, and the public.
- Watch national health care trends to see how they might apply to lowa.

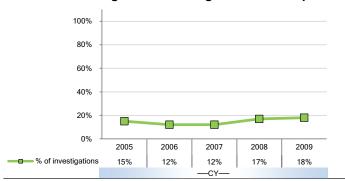
• Number of providers participating in the lowa practitioner recovery program.



Data Source: Manual counts. Data are available annually.

How are we doing? In 2008, there were 10 providers participating in our IPRC program.

**9** Percent of investigations resulting in formal discipline.



Data Source: Board manual counts. Data are available annually.

How are we doing? Out of 210 complaints filed in 2008, 36 formal discipline cases were filed.



#### What can you do to help?

- 1. All lowans can learn more about the lowa Dental Board by going to www.dentalboard.iowa.gov.
- 2. Health professionals should learn how to comply with lowa laws.
- 3. Health professionals can learn how to use the programs created to help impaired or potentially impaired professionals. For more information, go to www.dentalboard.iowa.gov/iprc.html.



### Others working on similar issues

Other IDPH bureaus, offices, or programs: Board of Medicine, Board of Nursing, Board of Pharmacy, Professional Licensure.

Other organizations: Other states' licensing boards, American Dental Association, American Dental Hygiene Association, American Dental Assistants Association.



#### Funding sources

Retained fees: K19-2062

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Retained fees	\$656,789	\$713,590	\$1,665,000
Total funds	\$656,789	\$713,590	\$1,665,000
FTEs	7.08	7.65	8.00

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





www.idph.state.ia.us/hpcdp/diabetes.asp





Finding out that you or someone you love has diabetes is scary. You may feel sad, frustrated, or even angry. Diabetes is a serious health condition, but it can be controlled. The IDPH Diabetes Prevention and Control Program provides resources to help lowans learn about the disease and how to live with it.

A woman in southeast lowa took diabetes education classes in November 2008. Since the classes, she has been following a meal plan and has lost 30 pounds. She has been exercising and says she feels so much better. The woman is excited about a significant reduction in her A1c level and is grateful for the classes that helped her learn how she can manage her type 2 diabetes.

Diabetes is preventable and controllable. IDPH helps lowans learn how.

Did you know? Diabetes is the 7th leading cause of death among Iowans.

# Why is Diabetes Prevention & Control important to promoting and protecting the health of lowans?

- About 160,000 (7%) adult lowans have been told by a doctor that they have diabetes.
- The percentage of lowans diagnosed with diabetes increases as the population ages.
- Diabetes represents 3% of all deaths in Iowa.
- Awareness of diabetes can help prevent or delay the onset of the disease.
- Strict diabetes control can prevent or reduce complications, including heart disease, stroke, high blood
  pressure, blindness, kidney disease, nervous system disease, amputations, dental disease, and pregnancy
  complications.

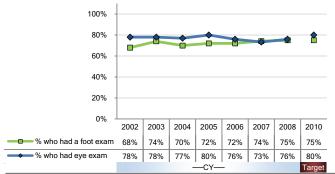
## ► Which Iowa Public Health Goals are we working to achieve?

Promote healthy behaviors

Strengthen the public health infrastructure

- Provide education about diabetes prevention and control through training for health care professionals.
- Provide educational materials for communities and certified outpatient diabetes education programs.
- Certify community-based outpatient diabetes education programs.
- Maintain involvement with diabetes care providers and educators statewide.
- Participate in activities like the Dilated Eye Exam Project.
- Monitor, evaluate, and report diabetes-related data.
- Work with other chronic disease programs, like asthma and cancer, to increase awareness of chronic disease and common management strategies.

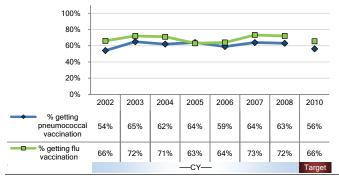
- Percent of lowa adults with diabetes who had a foot exam in the last year.
- Percent of lowa adults with diabetes who had a dilated eye exam in the last year.



Data Source: Behavioral Risk Factor Surveillance System (BRFSS). Data are available annually.

How are we doing? We have achieved our Healthy lowans 2010 target for annual foot exams. In 2008, there was a 3% increase from 2007 in the percentage of adults with diabetes getting a dilated eye exam.

- **9** Percent of lowa adults with diabetes who had a pneumococcal vaccination in the last year.
- Percent of lowa adults with diabetes who had an influenza vaccination in the last year.



Data Source: BRFSS. Data are available annually.

How are we doing? We have exceeded our targets for both measures.

#### What can you do to help?

- 1. All lowans can learn how to prevent or manage diabetes by visiting www.diabetes.org (American Diabetes Association).
- 2. Health care professionals working with people with diabetes can get quality education and resources through the Iowa Diabetes Prevention and Control Program at www.idph.state.ia.us/hpcdp/diabetes.asp.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Nutrition & Physical Activity, Asthma Control, Tobacco Use Prevention & Control, Cancer, Multicultural Health, Heart Disease and Stroke.

Other organizations: American Diabetes Association, American Association of Diabetes Educators, Juvenile Diabetes Research Foundation, Centers for Disease Control and Prevention, National Diabetes Education Program.



#### Funding sources

Federal grant: 0153-1966

Prevention & Chronic Care Management general fund: K07-0861; K27-2701

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$0	\$25,331	\$174,544
Federal funds	\$176,732	\$187,598	\$194,541
Total funds	\$176,732	\$212,929	\$369,085
FTEs	1.83	1.35	3.00

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





### **Disability Prevention**

Division of Behavioral Health Phone: 515-242-6336

www.idph.state.ia.us/bh/disability health.asp

Sandy had been living with multiple sclerosis for 28 years. She and her husband wanted to build a house that was accessible for her changing needs. With the help of the lowa State University Extension Universal Design and Home Accessibility Project, they were able to design a house that allowed Sandy to use every room. This not only gave her independence in her daily activities, it also allowed her to continue to be an adoptive mother and foster parent to more than 15 children she had cared for over the past 34 years. IDPH partners with the ISU program to provide information to the public on making housing more accessible.

A disability is anything that limits your ability to walk, talk, hear, learn, or function day-to-day. A disability does change a life, but doesn't end it. The goal of the Disability Prevention program is to help disabled lowans live well and to the fullest. This helps all lowans toward healthier, more productive lives.

Did you know? Nearly 19% of Iowa adults report having a disability. 6% of Iowa adults specifically say they need the help of a cane, wheelchair, special bed, or special telephone. Iowans with a disability are five times more likely than those without to characterize their health status as "fair to poor".

#### Why is Disability Prevention important to promoting and protecting the health of lowans?

- A disability is any limitation that affects a person's day-to-day activities.
- It can be difficult for people with disabilities to find helpful services, especially in rural areas.
- People with disabilities are more likely to develop other conditions like high blood pressure, high cholesterol, depression, addiction, or obesity.
- lowa's older population is growing. Older people are more likely to be living with disabilities.
- Helping lowans with disabilities find helpful services and information allows them to live healthier lives.

Which Iowa Public Health Goals are we working to achieve?

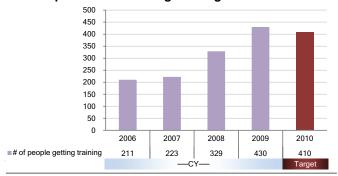
Prevent injuries

Promote healthy behaviors

Strengthen the public health infrastructure

- Provide training and assistance so community health providers can improve accessibility and Americans with Disabilities Act (ADA) compliance.
- · Prepare lowans with disabilities, their families, and others for what to do in an emergency.
- Work with the Commission on Persons with Disabilities to assure the accessibility of Iowa healthcare facilities.
- Work with the Center for Disability and Development at the University of Iowa to provide an 8-week course called "Living Well with a Disability." This course helps people with a disability set personal goals that promote health and wellness.
- Provide technical assistance to builders and contractors to make home and business modifications for accessibility.

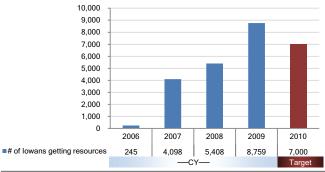
#### Number of people with disabilities and community service providers receiving training.



Data Source: Program reports. Data are available annually.

**How are we doing?** We exceeded our 2009 target and continue to increase the number of people receiving training.

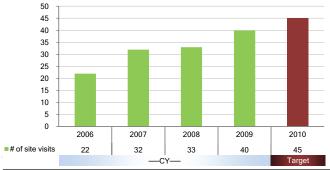
## Number of lowans provided with disability-related resources.



Data Source: Program reports. Data are available annually.

**How are we doing?** We exceeded our CY09 target and continue to increase the number of lowans we reach with disability resource information as well as the type of information we provide.

#### Number of ADA site visits completed.



Data Source: Program reports. Data are available annually.

**How are we doing?** We are expanding the availability of ADA site visits and related technical assistance to help community agencies comply with accessibility standards and improve access to services.

### ► v

#### What can you do to help?

- 1. Iowans with disabilities can sign up for a "Living Well with a Disability" course. For more information, go to www.livingwelliowa.org.
- lowans with disabilities, as well as family members, and community EMS and fire departments should be aware of the importance of emergency plans for people with disabilities and should include such persons in all levels of planning. To learn more, go to <a href="http://www.idph.state.ia.us/bh/disability">http://www.idph.state.ia.us/bh/disability</a> emergency p rep.asp or call 515-242-6336.
- 3. Community and healthcare providers should take a close look at their accessibility for lowans with disabilities. An access survey is available at <a href="https://www.state.ia.us/government/dhr/pd/publications/index.html">www.state.ia.us/government/dhr/pd/publications/index.html</a> or by calling 515-242-6336.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Disaster Operations & Response, EMS, Chronic Disease Prevention, Oral Health, Maternal & Child Health, Violence Prevention, Brain Injury.

Other organizations: Iowa Departments of Elder Affairs, Human Rights, Human Services and Homeland Security; University of Iowa Center for Disabilities and Development; Centers for Independent Living; American Red Cross, Easter Seals, National Organization on Disability, Centers for Disease Control and Prevention (CDC)/National Center for Birth Defects and Developmental Disabilities, American Association on Health and Disability, Association of University Centers on Disabilities.



#### **Funding sources**

Federal grant: 0153-1706

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Federal funds	\$307,901	\$406,065	\$391,199
Total funds	\$307,901	\$406,065	\$391,199
FTEs	1.63	1.79	1.70

**Note:** Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Division of Acute Disease Prevention & Emergency Response Phone: 515-281-5604

www.idph.state.ia.us/adper/cdor.asp



When you hear the word disaster, what comes to mind? Perhaps it's a devastating flood, relentless blizzard, or a serious tornado. Maybe you think of terrorism like an anthrax or smallpox release. Perhaps it's an infectious disease outbreak like pandemic flu? The department's Center for Disaster Operations and Response (CDOR) works to protect the health of lowans by preparing for and responding to these and other disasters.

CDOR accomplishes its mission by working with local public health agencies, hospitals, community health centers and other health care providers to prepare for disasters. As an example, each of our local partners have comprehensive emergency plans that guide the agency's response before, during and after a disaster. These plans are not one size fits all; they are written specifically for each locale and address hazards and vulnerabilities specific to each community.

No one can predict when the next disaster may strike, but the Center for Disaster Operations and Response works to enhance the state's ability to prepare for, respond to, and recover from public health emergencies.

Did you know? CDOR works with local public health agencies, hospitals, and other health care entities to ensure redundant communications, capacity, capability, emergency planning, drills and exercises, and education to detect, respond to, and recover from bioterrorism, public health emergencies, and other disasters that may affect the health of Iowans.



- Public health emergencies, from human threats such as terrorism, to natural disasters like floods and tornadoes, to disease outbreaks like pandemic flu, can affect all
- Emergencies can happen at any time and anywhere. During such emergencies, public health and healthcare professionals are among the first responders.
- Coordinating communications, plans, and systems helps make disaster response more effective at the federal, state, and local levels.

Which Iowa Public Health Goals are we working to achieve?

Prepare for, respond to, & recover from public health emergencies

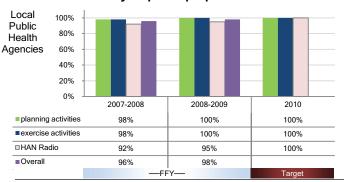
Prevent epidemics & the spread of disease

### What do we do?

- Coordinate local and regional emergency and disaster training exercises.
- Provide equipment and supplies so state and local labs are able to handle increases in receiving, testing, and reporting suspicious samples.
- Recruit and maintain the Public Health Response Teams which respond to disasters in a matter of hours and relieve overwhelmed locals until other resources can arrive on scene.
- Provide funding and technical assistance for the development of a round-the-clock disease reporting system.
- Help pay for and operate a communications system that links critical disaster response partners.
- Work to improve plans and processes to inform the public about disaster-related health risks and ways to be protected.

### Page 42

#### • Percent of local public health agencies that complete state and federally required preparedness activities.



Data Source: Reports from Local Public Health Agencies. Data are available annually.

How are we doing? lowa's local public health agencies (LPHA) must submit a workplan each year to outline how they will spend their funding. LPHA are also required to respond to monthly Health Alert Network (HAN) radio tests. LPHA must respond to the test within 30 minutes of the initial call to receive credit for the test. Each agency must also perform a tabletop, functional, or full-scale exercise to test their preparedness and response plans; and then submit an after-action report. Some agencies use actual events such as the severe weather of 2008 to meet the exercise requirement.

#### Percent of lowa hospitals that complete state and federally required preparedness activities.



Data Source: Reports from Iowa Hospitals. Data are available annually.

How are we doing? lowa hospitals must submit a workplan each year to outline how they will spend their funding. Hospitals are also required to respond to monthly Health Alert Network (HAN) radio tests. The hospital must respond to the test within 30 minutes of the initial call to receive credit for the test. Each hospital must also perform a tabletop, functional, or full-scale exercise to test their preparedness and response plans; and then submit an after-action report. Some hospitals use actual events such as the severe weather of 2008 to meet the exercise requirement.

#### What can lowans do to help?

- 1. Create a family disaster plan and family disaster kit. Review the plan at least once a year. For help creating a disaster plan and more information on what should be included in the kit, go to www.protectiowahealth.org.
- 2. Hospitals and emergency medical services should hold practice drills and exercises with local and state partners.
- 3. Healthcare and public health professionals should remain vigilant with emerging infectious diseases that pose a threat to the public's health.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Acute Disease Epidemiology, Emergency Medical Services, Immunization, Disability and Health, Bureau of Local Public Health.

Other organizations: U.S. Centers for Disease Control and Prevention, Assistant Secretary for Preparedness and Response, Iowa Department of Public Safety, Homeland Security and Emergency Management Division, Iowa Hospital Association, University of Iowa Hygienic Laboratory, Safeguard Iowa Partnership, Health Resources and Services Administration (HRSA).



#### Funding sources

Antiviral Program: general fund, intra state receipts\* (Executive Council – Iowa Code 7D.29), & federal recovery & reinvestment (FRR) funds: K19-1938; 0153-1936. Hospital Preparedness: federal grant: 0153-1934. I-SERV: 0153-1978. Pandemic Influenza Healthcare Preparedness for States: federal grant: 0153-1976. Public Health Preparedness: federal grant & intra state receipts\*: 0153-1932. Public Health Emergency Response: federal grant: 0153-1932/1974.

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$0	\$118,612	\$101,015
Federal funds	\$13,508,271	\$15,551,877	\$29,263,151
FRR funds	\$0	\$0	\$17,455
Other funds*	\$200,868	\$203,656	\$0
Total funds	\$13,709,139	\$15,874,145	\$29,381,621
FTEs	28.80	29.36	32.80

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.









"Shirley" was tired. She was frustrated. She knew she was supposed to be thrilled because she had a healthy new baby, but instead she felt stressed out and unhappy. Shirley didn't know it, but she was suffering from depression. With help from the IDPH Early Childhood program, Healthy Opportunities for Parents to Experience Success (HOPES), Shirley received treatment and counseling for her depression. Now Shirley, her baby, and her husband all are happier – and the whole family has a better chance at success.

From developmental and health problems, to the financial and emotional challenges parents may face, the IDPH Early Childhood programs bring parents and healthcare providers together to diminish the potential barriers to a child's future health or success. The IDPH Early Childhood programs support the early care, health, and education of lowa's children and their families.

Did you know? 77% of Iowa families with children under age five have both or the only parent working. Families need quality early care, health, and education for their children.

#### Why are Early Childhood programs important to promoting and protecting the health of lowans?

- While there has been a decline in the number of children abused over the past two years there were still 12,227 children found to be abused in 2008.
- Only 3% of HOPES-HFI families had confirmed cases of child abuse in 2009, down from 7% of families in 2004.
- More than 2,900 lowa children with a known developmental delay or health condition that puts them at risk for future developmental problems are helped each year through the Early Access program. This number has more than doubled since 2001.
- Based on national figures, it's expected that 120 lowa children will be born each year with permanent hearing loss. If not diagnosed until after six months of age, a child's language skills by age three will be about half those of a child with normal hearing. Currently, nearly all (99.8%) lowa newborns receive hearing screening, up from 86% in 2002.

### ▶ Which Iowa Public Health Goals are we working to achieve?

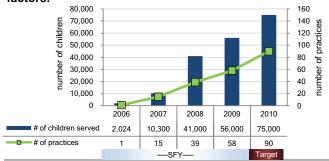
Strengthen the public health infrastructure

Promote healthy behaviors

### What do the Early Childhood programs do?

- Early Childhood Iowa (ECI) has developed a comprehensive plan that serves as the framework for lowa's early care, health, and education system.
- Healthy Opportunities for Parents to Experience Success-Healthy Families Iowa (HOPES-HFI) helps families through education, family support, and home visits beginning with pregnancy and continuing through preschool.
- The 1<sup>st</sup> Five program links private healthcare providers with state resources to screen children under age five for • social, emotional, and developmental skills, and helps families find the community resources needed.
- The Early Hearing Detection and Intervention Program (EHDI) works to make sure hearing loss in newborns and infants is found early and that help is available to children and their families.
- Along with the Iowa Department of Education, IDPH coordinates the Early ACCESS program, which provides developmental evaluations and services for low-income children from birth to age three, and coordinates services for children with or at risk for developmental delays.
  - Healthy Child Care Iowa supports the health and safety of children enrolled in early care and education programs through nurse consultation, health education, and facilitating referral to health services.

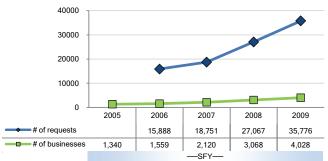
• Number of medical practices engaged in 1st Five identification, referral, and follow-up for high risk social/ emotional development concerns and family risk factors.



Data Source: Local public health agency reports. Data are available annually.

How are we doing? From 2006 to 2009, the number of participating practices in lowa increased from 2 to 58 and the number of children (ages birth to 5) served increased from approximately 2,000 to 56,000. It is estimated that 90 practices will be engaged by the end of 2010.

- Number of early care and education businesses receiving services from a child care nurse consultant.
- Number of child care nurse consultant service requests that were completed.



Data Source: HCCl records. Data are available annually.

**How are we doing?** The number of early care and education businesses served and the number of completed requests for services have more than doubled since 2006.

### What can you do to help?

- Go to <u>www.earlychildhoodiowa.org</u> and the parent's page (<u>www.parents.earlychildhoodiowa.org</u>) to learn more about the Early Childhood lowa project.
- All lowans can make sure their babies are screened for hearing loss. lowa law requires screening all babies before leaving the hospital. To learn more, go to www.idph.state.ia.us/iaehdi/default.asp.
- 3. If you have a concern about a child's development, make a referral to Early ACCESS by calling 1-800-779-2001.
- All lowans can support and encourage funding for quality evidence-based early childhood programs by talking with policymakers.

### Others working on similar issues

**Other IDPH bureaus, offices, or programs:** Maternal Health, Child Health, Covering Kids & Families/*hawk-i* Outreach, Oral Health, Immunization, Lead Poisoning Prevention.

Other organizations: Iowa Departments of Education, Human Services, Economic Development, and Workforce Development; Community Empowerment; Iocal maternal and child health agencies; Iocal Community Empowerment; family support programs; primary care providers; private providers; advocacy organizations; early care and education providers; Area Education Agencies.

### Funding sources

Federal grant, federal recovery & reinvestment (FRR) funds, & intra state receipts\* (Dept of Human Services & Dept of Education): 0153-0536/0546/0980. **ECI**: federal grant: 0153-0676. **HOPES-HFI**: general fund & intra state receipts\* (Dept of Human Services). State funds are used for a 75% match for the Title V Block Grant: K05-0559. **1st Five**: general fund, health care trust, & intra state receipts\* (Dept of Human Services): K05-0538/0691; K56-5661; 0153-0692. **EHDI**: health care trust & federal grant: K56-5671; 0153-0544/0682. **Early ACCESS**: intra state receipts\* (Dept of Education): 0153-0530/0708. **HCCI**: intra state receipts\* (Dept of Human Services & Dept of Management): 0153-0540/0662

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$989,646	\$930,585	\$856,443
Health care trust	\$327,243	\$466,906	\$349,931
Federal funds	\$259,099	\$274,508	\$1,057,923
FRR funds	\$0	\$0	\$23,899
Other funds*	\$593,362	\$767,796	\$1,048,981
Total funds	\$2,169,351	\$2,439,795	\$3,337,177
FTEs	8.99	9.12	11.20

**Note:** Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.

lowa Department of Public Health ♦ Division of Health Promotion & Chronic Disease Prevention ♦ Early Childhood
Phone: 1-800-383-3826 or 515-281-4911 ♦ www.idph.state.ia.us/hpcdp/family health.asp

4th & 5th Floors, Lucas Building ♦ 321 E. 12th Street ♦ Des Moines, IA 50319-0075

### Early ACCESS (5th floor)

Phone: 515-281-8284 Fax: 515-242-6013 www.state.ia.us/earlyaccess

**1st Five (5th floor)** Phone: 515- 281-3108 Fax: 515-242-6013 www.iowaepsdt.org Early Childhood Iowa (5th floor)
Phone: 515-281-7585 Fax: 515-242-6013
www.state.ia.us/earlychildhood

Healthy Child Care Iowa (5<sup>th</sup> floor)
Phone: 515-281-6071 or 281-7519 Fax: 515-242-6013
www.idph.state.ia.us/hcci

Early Hearing Detection Initiative (5th floor)
Phone: 515-242-5639 Fax: 515-242-6013
www.idph.state.ia.us/iaehdi/default.asp

HOPES-HFI (4th floor)

Phone: 641-842-6442

www.idph.state.ia.us/hpcdp/local\_public\_health\_services.asp #HOPES



### EMS—lowa's Trauma System

Division of Acute Disease Prevention & Emergency Response Phone: 515-281-0443

www.idph.state.ia.us/ems/trauma.asp



The car was unrecognizable. In an instant, the head-on crash transformed it into a mangled pile of metal. It seemed impossible that anyone could survive. But Kely did - barely. When EMTs arrived on the scene of the north-central lowa crash, she was given less than a 2% chance of making it. With the expertise of skilled trauma care, that 2% chance was all Kely needed.

Thanks to an organized system approach to trauma care that included air medical transport, a verified Resource Trauma Care Facility, and rehabilitation, Kely beat the odds and after nearly 3 months in the hospital, was able to return to her home and family.

Today, Kely is grateful for every moment she shares with her family and looks forward to the future. "I am grateful for the terrific care I received," says Kely. "The doctors, nurses, and EMTs that cared for me saved my life."



Did You Know? Iowa's Trauma System is one of the most comprehensive and established trauma systems in the nation. If an injury occurs anywhere in Iowa, there are thousands of trained providers ready to respond in a timely manner and take the victim to one of the 117 trauma care facilities where life-saving care is immediately available.

#### Why is Iowa's Trauma System important to promoting and protecting the health of lowans?

- Trauma is the leading cause of death for lowans from birth to age 40.
- Because trauma is a disease of the young, it takes a higher toll on society than heart disease, cancer, and stroke combined.
- Trauma is the fifth leading cause of death for all age groups combined.
- Iowa's Trauma System works to decrease the incidence and severity of trauma, and prevent unnecessary deaths and disabilities from trauma.
- lowa's Trauma system works to keep costs down while improving efficiency.

Which Iowa Public Health Goals are we working to achieve?

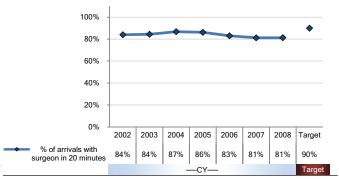
Prevent injuries

Strengthen the public health infrastructure

Prepare for, respond to, recover from public health emergencies

- Certify all licensed hospitals at a level of trauma care based on what resources are available in the community.
- Collect, analyze, and provide trauma data to other state programs.
- Regulate and provide oversight of trauma care facilities.

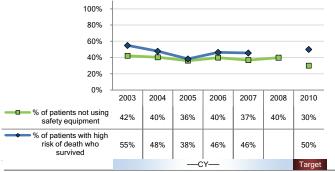
Percent of patient arrivals to the emergency department (ED) where a trauma surgeon was present within 20 minutes.



Data Source: State Trauma Registry data. Data are submitted quarterly but not usually analyzed until SEQIC meetings.

How are we doing? Trauma surgeons are present at patient arrival more often given timely notification.

- Percent of traumas where patient did not use safety equipment.
- Percent of patients with high risk of death who survived.



Data Source: State Trauma Registry data. Data are submitted quarterly but not usually analyzed until SEQIC meetings.

How are we doing? In 2007, fewer injuries were reported where the patient was not using safety equipment, meaning the injuries were less severe because safety equipment was being used more often.

#### What can you do to help?

- 1. All lowans, including healthcare providers, need to recognize trauma as a disease.
- 2. All lowans can take action to protect against injury, such as wearing helmets when bicycling, or using protective pads and helmets during sporting and recreational activities.
- 3. All lowans, and especially young adults, need to understand the dangers of drinking alcohol and driving or driving under the influence of drugs.

#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Brain Injury, Injury Prevention & Emergency Medical Services for Children (EMSC).

Other organizations: National Trauma Data Bank, American Trauma Society, American College of Surgeons, Society of Trauma Nurses, Emergency Nurses Association, National Association of EMTs, National Association of State EMS Officials.



#### Funding sources

Tobacco fund & federal grant: K92-9204; 0153-1944 (FY2008 & FY2009); Federal grant: 0153-1942 (FY2010 only)

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Tobacco funds	\$377,538	\$351,606	\$0
Federal funds	\$0	\$0	\$365,096
Total funds	\$377,538	\$351,606	\$365,096
FTEs	1.00	0.99	3.95

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.



Division of Acute Disease Prevention & Emergency Response Phone: 515-281-0620 www.idph.state.ia.us/ems

Promoting & Protecting the Health of Iowans



A broken leg, a heart attack, an injured child – whatever the emergency, lowa's Emergency Medical Services (EMS) System is ready to respond. Iowans rely on the EMS system to provide efficient, well-trained, and reliable out-of-hospital care. The EMS system must ensure this care is available to all lowans, whether urban or rural, even when resources are scarce.

Emmet County found a way to overcome money and personnel EMS challenges by bringing together representatives from the county, cities, EMS, emergency management, public health, law enforcement, hospital, local schools, and a college to form the Emmet County Emergency Responders Association. By working together, all the people of Emmet County are assured the same high standard of care when EMS is needed.

The Emergency Medical Services system works to ensure medical help is there when lowans need it.



Did you know? Of the agencies that have been awarded grants to purchase Automated External Defibrillators (AED), there have been 18 AED uses throughout the state.

#### Why is the Emergency Medical Services System important to promoting and protecting the health of lowans?

- EMS serves as an entry point to the health care system.
- All 3 million lowans, along with visitors to the state, may need EMS at some time in their life.
- lowa ambulance services receive 240,000 calls for help each year, resulting in 200,000 patients being transported to a healthcare facility.
- Early CPR and defibrillation usually result in a greater than 50% long-term survival rate for witnessed cardiac arrests.

► Which Iowa Public Health Goals are we working to achieve?

Prevent injuries

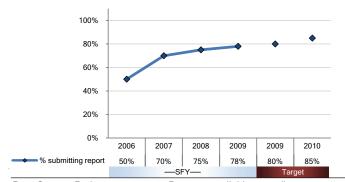
Strengthen the public health infrastructure

Prepare for, respond to, & recover from public health emergencies

Promote healthy behaviors

- Regulate EMS training programs, as well as individual providers and patient care services.
- Regulation ensures that baseline standards for training, certification, and service authorization are met.
- Help county EMS associations by providing funds for training and system development, and by serving as a resource for local EMS services.
- Communities throughout lowa have public access defibrillation programs in places like malls and office buildings.

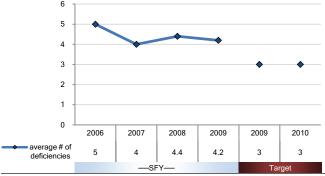
#### • Percent of ambulance calls that submit a patient care report.



Data Source: Patient care reports. Data are available annually.

How are we doing? Currently, approximately 70% of ambulance calls are submitted.

#### Average number of deficiencies per EMS site.



Data Source: Onsite review reports. Data are available annually.

How are we doing? Currently there are an average of 4 deficiencies per site, which is higher than our target of 3.

#### What can you do to help?

- 1. Authorized EMS service providers should make sure that all required data is submitted to the Bureau of
- 2. Emergency medical care providers must understand the EMS system and the rules that regulate providing emergency medical care.
- 3. All lowans should attend CPR/AED training in their community. Go to
  - www.idph.state.ia.us/ems/aed\_pad.asp to learn more about CPR or AED training.
- 4. All lowans can help create public access defibrillation programs in their communities.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Acute Disease Epidemiology, Disaster Operations & Response.

Other organizations: medical care, Allied Health, county EMS associations.



#### Funding sources

General fund, tobacco fund, federal grants, federal recovery & reinvestment (FRR) funds & carryover\*; General funds are used for maintenance of effort match for the PHHS Block Grant: K19-1941/1943; K83-8302; K85-8502; 0153-1726/1952; 0153-1942 (FY2008 & FY2009 only)

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$1,067,656	\$1,052,699	\$1,304,023
Tobacco funds	\$40,000	\$0	\$0
Federal funds	\$396,579	\$432,850	\$71,779
FRR funds	\$0	\$0	\$97,967
Other funds*	\$101,606	\$0	\$0
Total funds	\$1,605,841	\$1,485,549	\$1,473,769
FTEs	9.33	9.38	7.10

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Division of Environmental Health Phone: 515-281-7462

www.idph.state.ia.us/eh/toxicology env health.asp



If you have ever eaten a meal outside your home, worked outside your home, or taken a deep breath of outside air, you've been at risk for developing an environmental or work-related disease. In other words, everyone is at risk! The IDPH Environmental Epidemiology program helps protect the health of all lowans by watching for and investigating outbreaks of illness that are caused by environmental factors.

For instance, the Environmental Epidemiology program worked with the Department of Natural Resources to develop a system for letting the public know when pollution levels may make fish caught in lowa lakes and streams unsafe to eat. Seven new fish consumption advisories have been posted for Iowa lakes and streams.

By working to keep lowa's air, food, and water clean, Environmental Epidemiology helps keep lowans safe.

Did You Know? The Centers for Disease Control and Prevention (CDC) estimates 76 million people get sick, more than 300,000 are taken to the hospital, and 5,000 die each year from foodborne illnesses.

#### Why is Environmental Epidemiology important to promoting and protecting the health of lowans?

- Environmental exposures, like contaminated food, air, or water, can harm the health of lowans.
- Everyone is at risk for developing an environmental or occupational disease.
- Prevention and control measures, like public education, are very effective. In recent years, the number of West Nile virus cases has declined, mostly because lowans have learned how to protect themselves against it.

#### Which lowa Public Health Goals are we working to achieve?

Protect against environmental hazards

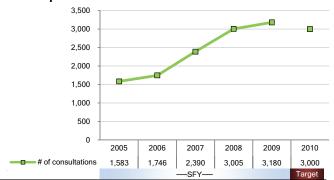
Prepare for, respond to, & recover from public health emergencies

Prevent epidemics & the spread of disease

Strengthen the public health infrastructure

- Work with other state and local agencies to investigate illnesses caused by food and water.
- Work with Iowa State University and local health departments to conduct mosquito surveillance to help guard against West Nile virus.
- Provide guidance and assistance to local public health officials and other state agencies when needed.
- Collect information on 61 acute, infectious, environmental and occupational diseases.
- In 2008, advertisements promoting food safety and safe food preparation were placed in newspapers across the state, reaching over one million readers.

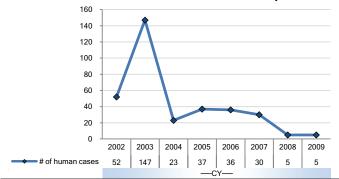
#### • Number of consultations provided to local officials and the public.



Data Source: Division of Environmental Health phone & email logs. Data are available annually.

**How are we doing?** As staff numbers increase, so do the number of inquiries and responding consultations provided.

#### Number of human cases of West Nile virus reported.



Data Source: IDPH and State Hygienic Laboratory. Data are available annually.

How are we doing? lowa's first reported human case of West Nile virus was in 2002. After the initial peak, case numbers have remained relatively stable. As this disease is now endemic in our state, it is increasingly challenging to maintain public awareness of the importance of protecting oneself and ones family. IDPH maintains public education materials on the IDPH website and issues press releases throughout the West Nile season. From May 2009 through November 2009, approximately 5943 people viewed the West Nile virus page on the IDPH web site.

### What can you do to help?

- 1. All lowans can learn about how to prepare and handle food safely. For more information, go to <a href="https://www.fightbac.org/content/view/6/11/">www.fightbac.org/content/view/6/11/</a>.
- 2. If you have been diagnosed with an environmental-related disease, make sure your physician reports it to IDPH. To get a list of reportable environmental diseases, go to <a href="https://www.idph.state.ia.us/adper/common/pdf/epi">www.idph.state.ia.us/adper/common/pdf/epi</a> manual/environmental disease poster.pdf.
- 3. All lowans can learn more about West Nile virus, rabies, and other environmental diseases by going to <a href="https://www.idph.state.ia.us/adper/cade.asp">www.idph.state.ia.us/adper/cade.asp</a>.
- 4. Local public health should consult the Environmental Epidemiology program for help and guidance on possible environmental exposures and health concerns.

### Others working on similar issues

Other IDPH bureaus, offices, or programs: Acute Disease Epidemiology, Asthma Control, Iowa Statewide Poison Control Center.

Other organizations: University of Iowa Hygienic Laboratory, Iocal health departments, Iowa Department of Administrative Services, Iowa Department of Agriculture and Land Stewardship, Iowa Department of Natural Resources, Iowa Department of Inspections and Appeals, Iowa Department of Human Services, National Environmental Health Association, Council of State and Territorial Epidemiologists, Iowa Environmental Health Association, Iowa Public Health Association, American Public Health Association.

### Funding sources

General fund, tobacco fund, & federal grants: K13-1303; K92-9252; 0153-1312/1318/1972

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$71,661	\$56,516	\$344,413
Tobacco funds	\$275,770	\$173,912	\$0
Federal funds	\$317,980	\$414,048	\$295,263
Total funds	\$665,411	\$644,476	\$639,676
FTEs	4.11	3.47	5.45

**Note:** Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.







Phone: 515-242-6388

www.idph.state.ia.us/hpcdp/family\_planning.asp



A client from the Decorah clinic sent her last payment to the clinic with the following note. "I wanted to also thank you. The free clinic services were very useful to me during my college years. During my annual exams, I always felt comfortable, not judged, and like the examiners actually cared about my health. I really appreciate that the yearly exams were more than just a Pap smear and that my exercise, nutrition, and lifestyle were also addressed. Thank you for all you do!" A woman from Southern Iowa wrote, "I really appreciate that I have somewhere to go for a reasonable price. Unfortunately, I couldn't come in with a payment today. I am grateful to know that I was still welcome."

The IDPH Family Planning Program provides medical services, health education, and information to Iowans to promote reproductive health in Iowa.

Did you know? In 2007, 50% of pregnancies in Iowa were unintended.

## Why is the Family Planning Program important to promoting and protecting the health of lowans?

- There are 327,160 women in Iowa ages 13-44 that need contraceptive services. An increasing number of males are seeking family planning services.
- The social and economic circumstances experienced by low-income or minority families may result in decreased access to family planning services.
- Improving birth outcomes and promoting healthy families and communities are essential to promoting public health.
- From 2001 to 2007, the number of lowa pregnancies steadily increased to 48,305. Of those, half were unintended.
- Women with intended pregnancies modify their lifestyles and obtain prenatal care earlier than do women with unintended pregnancies.
- lowa's adolescents have higher rates of unintended pregnancy, low birth weight babies, and sexually transmitted infections than any other age cohort.
- Teen childbearing in lowa cost taxpayers (federal, state, and local) approximately \$82 million in 2004.

#### What do we do?

#### **Medical Services**

- Birth control exams and supplies
- Tests and treatment for sexually transmitted diseases
- Cancer screening: Pap smears and breast exams
- Infertility exams, counseling, and referral
- Tests for high blood pressure and anemia
- Pregnancy tests

#### Information

- How to plan a healthy pregnancy
- · How to talk with parents and others about sexuality
- How to make responsible sexual decisions

## Health Education

- Birth control methods
- Reproductive health
- Self-exams for breast or testicular cancer
- Sexually transmitted diseases and HIV/AIDS
- Importance of nutrition
- Effects of alcohol, drugs, and tobacco on reproductive health

Which lowa Public Health Goals

Promote healthy behaviors

Strengthen the public health infrastructure

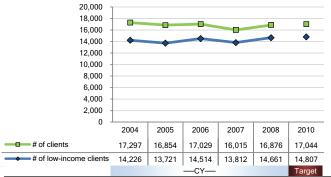
are we working to achieve?

#### **Community Education**

- Public speakers and educational materials
- Parent-child communication
- Reproductive health
- Birth control
- Other family planning-related issues



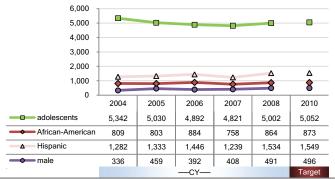
- Number of unduplicated clients served.
- Number of low-income clients served (below 150% of the federal poverty level).



Data Source: Family Planning Annual Report.

How are we doing? The number of clients increased from 2005 to 2006, but decreased in 2007. In 2008, the numbers increased again. The number of low-income clients decreased from 2004 to 2005, increased in 2006, then decreased again in 2007. In 2008, the number of low-income clients served increased to the highest level since 2004.

- Number of adolescent clients (under 20 years old) served.
- Number of African-American clients served.
- Number of Hispanic clients served.
- Number of male clients served.



Data Source: Family Planning Annual Report.

How are we doing? The number of adolescent clients decreased from 2004 to 2007, increasing in 2008. The number of male clients increased from 2004 to 2005, decreased in 2006, and increased again in 2007 and 2008. The number of African-American clients increased from 2004 to 2006, decreased slightly in 2007 and increased in 2008. The number of Hispanic clients increased rapidly from 2004 to 2006, and then decreased slightly in 2007. The number of Hispanic clients served increased to its highest level in 2008.

#### What can you do to help?

- 1. Learn more about the Family Planning Program by going to www.idph.state.ia.us/hpcdp/family\_planning.asp.
- 2. Share with friends and colleagues how important it is that pregnancies are planned.
- 3. Share with friends, colleagues, and other health professionals that no-cost or low-cost reproductive health care screening and contraception is available by calling 1-800-369-2229.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Maternal Health, STD Prevention, HIV/AIDS & Viral Hepatitis, Cancer, Violence Prevention, WIC, Child Health, Tobacco Use Prevention & Control, Substance Abuse Prevention, Multicultural Health.

Other organizations: Family Planning Council of Iowa, Iowa Department of Human Services, FutureNet, Iowa Initiative to Prevent Unintended Pregnancy.



#### Funding sources

Federal grant: 0153-0302

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Federal funds	\$1,100,694	\$1,104,675	\$1,264,378
Total funds	\$1,100,694	\$1,104,675	\$1,264,378
FTEs	1.20	1.86	1.65

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.







www.idph.state.ia.us/apl/finance.asp



Who does the bookkeeping in your family? Who pays the bills and makes sure the money is spent wisely? It's an important task and one that requires a great deal of responsibility and attention to detail. Now, imagine keeping the books for a family of 450! The IDPH Bureau of Finance provides all accounting, budgeting, contractual, and purchasing services for the 450 employees of IDPH and the department's 65 program areas. That's a lot of beans to count!

By improving the processes and procedures for service contracts, the Bureau of Finance has been able to manage scarce resources more effectively. By handling all the financial matters for IDPH, program staff members can devote their time to promoting and protecting the health of lowans.

The Bureau of Finance works hard to ensure the department spends every dollar as effectively and efficiently as possible.



Did you know? The Bureau of Finance paid 11,783 bills to over 776 different contractors that provided services to Iowans in their local communities in FY2009.

#### Why is the Bureau of Finance important to promoting and protecting the health of lowans?

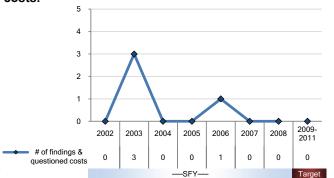
- The Bureau of Finance ensures scarce resources are spent effectively so the 65 program areas and 450 employees of IDPH can work to promote and protect the health of lowans.
- Centralizing administrative support services in the Bureau of Finance is an effective and efficient way to monitor and assure accountability in the use of taxpayer money.

Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

- The Bureau of Finance provides all accounting, budgeting, contractual, and purchasing services for IDPH.
- The Bureau works to improve the service contracting process by standardizing and simplifying procedures throughout the department.

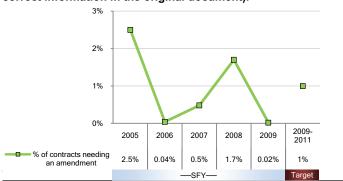
• Audit Reports: Number of findings and questioned costs.



Data Source: State Audit Report. Data are available annually.

How are we doing? The number of audit findings has been declining over the past several years.

Service Contracting: Percent of contracts requiring a corrective amendment (contracts that need changes to correct information in the original document).



Data Source: Annual Service Contract Listing. Data are available annually.

How are we doing? We have performed better than our target in two of the last three years.

#### What can you do to help?

- 1. All IDPH service contractors must follow the terms and conditions of financial management. confidentiality, staff qualifications, contract performance, and contract administration. For more information on IDPH terms and conditions, go to "Grants, Bids and Proposals" at www.idph.state.ia.us.
- 2. IDPH employees must ensure that the state gets the highest quality service from providers at the most reasonable cost.
- 3. All lowans can recommend ways the bureau can improve its services by e-mailing the Finance Bureau Chief at cheryl.christie@idph.state.ia.us.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Communication and Planning.

Other organizations: Iowa Department of Management, Iowa Department of Administrative Services.



#### Funding sources

General fund, federal indirect funds, & indirect funds from private grants\*: K21-2201; 0153-2202

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$80,822	\$50,538	\$123,306
Federal funds	\$853,162	\$1,004,550	\$101,866
Other funds*	\$255,000	\$255,000	\$1,116,572
Total funds	\$1,188,984	\$1,310,088	\$1,341,744
FTEs	16.22	17.67	18.70

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.

lowa Department of Public Health ♦ Division of Administration & Professional Licensure ♦ Finance Phone: 515-281-6645 ♦ Fax: 515-281-3789 ♦ www.idph.state.ia.us/apl/finance.asp 6th Floor, Lucas Building ♦ 321 E. 12th Street ♦ Des Moines, IA 50319-0075

> Accounts Payable - Phone: 515-281-8539 Accounts Receivable and Service Contracting - Phone: 515-281-6645 Administrative Services (Fleet, Mail, Purchasing, etc.) - Phone: 515-281-3699





Division of Behavioral Health Phone: 515-281-8802 www.1800betsoff.org



For the vast majority of people, office pools, lottery tickets or a trip to the casino are harmless entertainment. For some, however, gambling leads to serious problems that also harm people close to them and the wider community. For problem gamblers, the lowa Gambling Treatment Program is here to help.

Gambling had taken control of Jeff's life two years ago. In that short time, he amassed nearly \$110,000 in credit card debt and was on the verge of bankruptcy. He spent hours away from his family and work to be at the casino. He opened extra credit cards and maxed them out. As the bills began to catch up, he knew he needed to stop but couldn't put the brakes on his habit himself. "I didn't know what I was going to do," he said. "Without Allen Hospital's gambling treatment program, I wouldn't have been able to quit. Treatment hasn't been easy but I've learned to cope with stress and the urges to gamble. I've got a long ways to go to be out of debt but I know I have the skills to do it.... I have hope.'

Did you know? Since the mid-1970's, we have gone from a nation in which legal gambling activity was extremely rare to a nation in which legal gambling is permitted in all but a few states. In Iowa, there are 20 casinos, 2.600 lottery outlets. over 3,000 social and charitable gaming licenses, and countless internet and other illegal gaming opportunities.

#### Why is Gambling Treatment important to promoting and protecting the health of lowans?

- It is estimated that 43,500 lowans are lifetime pathological gamblers and 26,100 meet the criteria in a given year.
- lowans with gambling problems report money spent gambling led to financial, personal, family, and work problems.
- The annual cost to society for each pathological gambler is estimated at \$13,000.
- Treatment is effective in reducing or eliminating gambling and associated problems like debt and employment problems.
- The 1-800-BETS-OFF helpline offers lowans help and information. More than 3,400 calls were logged to the helpline in FY2009.

### What do we do?

- Fund counseling for lowans affected by problem gambling.
- Fund financial counseling including budgeting and debt reduction plans for admitted clients.
- Fund proven prevention and education services for schools, community groups, casino employees, and other at-risk groups.

Which Iowa Public Health Goals are we working to achieve?

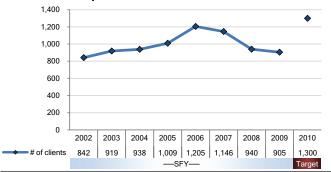
Promote healthy behaviors

Strengthen the public health infrastructure

- Provide information about problem gambling and counseling referral through the 1-800-BETS-OFF helpline.
- Fund housing services for people in problem gambling treatment who have no other housing options.
- Provide training and resources for problem gambling counselors and other human services professionals.

#### Page 56

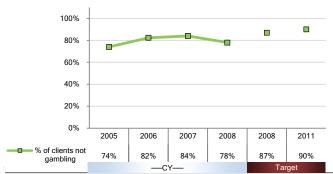
#### • Number of clients admitted for counseling services to a state funded provider.



Data Source: Gambling Treatment Reporting System (GTRS). Data are available annually.

How are we doing? In SFY2009, 905 clients received counseling services, a decrease from 940 clients in SFY2008.

#### Percent of discharged clients who report no gambling in the past 30 days.



Data Source: Iowa Gambling Treatment Outcome System. Data are available annually.

How are we doing? Of clients discharged from treatment in 2008, 78% reported no gambling in the 30 days after discharge compared to 84% in 2007 and 74% in 2005.

#### What can you do to help?

- 1. If you or someone you care about is struggling with problem gambling, call 1-800-BETS-OFF
- 2. Pathological gambling often occurs along with other mental health or health problems. If you are a healthcare or human service professional, understand the signs and symptoms of problem gambling and how to treat it or where to refer people for help. Training on problem gambling is available through Training Resources at www.1800betsoff.org.
- 3. All lowans can find more information about problem gambling at www.1800betsoff.org.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Substance Abuse Prevention, Substance Abuse Treatment.

Other organizations: Prairielands ATTC, Iowa Behavioral Health Association, National Council on Problem Gambling, National Center for Responsible Gambling.

#### Funding sources

General fund & gambling fund: K96-9602; K01-0222.

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$0	\$0	\$4,078,035
Gambling funds	\$4,397,183	\$4,111,655	\$0
Total funds	\$4,397,183	\$4,111,655	\$4,078,035
FTEs	1.90	1.92	2.80

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Division of Environmental Health Phone: 515-281-3773

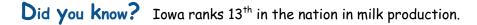
www.idph.state.ia.us/eh/milk\_certification.asp



You may take it for granted – it's easy to find at any grocery or convenience store, and chances are, it's in your refrigerator right now. It's milk. But did you know that not so very long ago, a glass of milk could lead to serious illness? In 1938, 25% of all illnesses caused by food or water were associated with milk! Since then, regulations about milk production have made it much safer. The FDA now says milk products are associated with less than 1% of all food-related outbreaks.

The IDPH Grade "A" Milk Certification program ensures milk and milk products are safe to drink and eat by certifying that all grade "A" milk products are produced, transported, processed, sampled, tested, and labeled according to strict guidelines.

So drink up! The IDPH Grade "A" Milk Certification program helps keep that milk moustache a safe one!



# Why is the Grade "A" Milk Certification program important to promoting and protecting the health of lowans?

- lowa's milk industry ranks 13<sup>th</sup> in the nation and pumps at least \$1.5 billion into lowa's economy.
- Unless properly processed, milk is nature's perfect medium for the growth of dangerous organisms.
- All lowans, and out of state consumers, benefit from safe milk and milk products produced in lowa.
- lowa code requires IDPH to be responsible for certifying that all grade "A" milk and milk products meet lowa and national standards.
- In 2004 and 2005, two separate milk-borne disease outbreaks related to drinking "raw" or unpasteurized milk occurred in lowa; 61 people became ill.

## ► Which Iowa Public Health Goals are we working to achieve?

Protect against environmental hazards

Prevent epidemics & the spread of disease

#### What do we do?

- Conduct field surveys of grade "A" milk supplies, dairy farms, processing plants, and transfer and receiving stations to make sure all safety rules are being followed.
- Test and certify the work of lowa Department of Agriculture and Land Stewardship (IDALS) field inspectors, which is required by federal law.
- Train milk haulers in proper pick-up and sampling procedures.
- Help with investigations of suspected and confirmed milkborne disease outbreaks.
- Serve as a voting member of the National Conference on Interstate Milk Shipments, and serve on national committees and cast votes in the rule-making process.
- Enter lowa data into the national milk database program, making it available for nationwide analysis of trends.

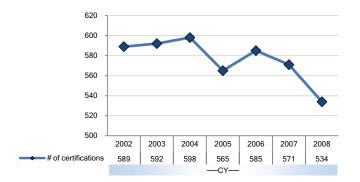
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#### • Number of certifications completed.

Data Source: Program records. Data are available annually.

**How are we doing?** Grade "A" certifications and inspections that ensure compliance with federal and state laws automatically expire two years after being issued. Products are withheld from the grade "A" market until producers and suppliers renew their certification and demonstrate compliance with federal and state laws outlining the minimum requirements to produce and process dairy products.

The annual number of certifications will vary because renewals must be completed before the existing certification expires. Our staff at IDPH is committed to ensuring consumer safety by completing 100% of the required certifications each year.



### What can you do to help?

- 1. All lowans should know that grade "A" milk products produced in lowa are safe and excellent sources of nutrition.
- 2. All lowans should be aware that "raw" or unpasteurized milk can contain dangerous bacteria and poses a threat to public health.
- 3. All lowans can learn more about IDPH's Grade "A" Milk Certification program by going to www.idph.state.ia.us/eh/milk certification.asp.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Acute Disease Epidemiology, Environmental Epidemiology.

Other organizations: Iowa Department of Agriculture and Land Stewardship (IDALS), National Conference on Interstate Milk Shipments.



#### Funding sources

General fund: K19-1907

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$189,438	\$194,003	\$174,392
Total funds	\$189,438	\$194,003	\$174,392
FTEs	2.01	2.01	2.00

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Phone: 515-281-8707 www.idph.state.ia.us/eh/hazardous waste.asp



Hazardous wastes and contaminated disposal sites can pose a serious health risk to lowans if exposures are significant. The IDPH Hazardous Waste Site Assessment program provides accurate health information in the event of exposure to chemicals or toxic substances.

Once a hazardous site, always a dangerous site? Not always! An IDPH health consultation, along with an environmental investigation completed by the Iowa Department of Natural Resources allowed the community of Rolfe in northwest lowa to transform a former petroleum bulk-tank site into a city park and bike path trailhead. Protection for the present and plans for the future are all part of how IDPH helps keep lowans healthy.

Did you know? Several factors play a key role in whether you will get sick from a chemical exposure. These factors are - the type of chemical; the amount of chemical; the duration of exposure, or how long the exposure was; and the frequency of exposure, or how many times you were exposed. But, if you are not exposed to a chemical, it won't make you sick or have any effect on your health.

#### Why is Hazardous Waste Site Assessment important to promoting and protecting the health of lowans?

- Improper management of hazardous wastes, chemical spills and accidents, and previous industrial use of land may expose lowans to dangerous chemicals.
- There are currently 19 hazardous waste sites in Iowa listed on the National Priorities List, and over 800 contaminated sites that are candidates for evaluation.
- lowans are concerned about environmental exposures to chemicals that can affect their health or the health of their children.
- lowans need trusted health information to prevent harmful exposures and disease-related exposures to toxic substances.

#### Which Iowa Public Health Goals are we working to achieve?

Protect against environmental hazards

Prevent injuries

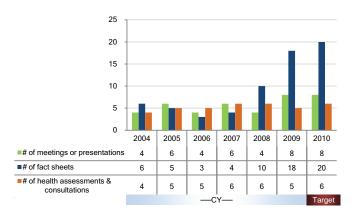
Prepare for, respond to, & recover from public health emergencies

- Prepare health assessments and health consultations for
   Design and develop physician, nurse, and community state and federal agencies and for communities.
- Develop fact sheets and informational documents for state agencies and communities summarizing health effects from exposure to specific sites.
- education programs for areas where potential exposure to hazardous substances exist.

- Number of community meetings attended or presentations made to communities.
- Number of fact sheets developed.
- Number of health assessments and health consultations completed.

Data Source: Evaluation by ATSDR and program records. Data are available annually.

How are we doing? We are meeting the goals set by the Agency for Toxic Substances and Disease Registry (ATSDR) for this program. We continue to meet with the public to discuss health assessments and consultations. We attempt to provide fact sheets with each consultation and for other special situations. Chemical fact sheets are being developed that discuss exposure to common chemicals and chemicals of special concern.



#### What can you do to help?

- 1. All lowans can learn about existing or potential exposure to hazardous chemicals and how to protect themselves.
- 2. Physicians and healthcare providers need to get accurate information about the health risks from exposure to environmental chemicals and how these exposures can be diagnosed in their patients. For more information, go to www.atsdr.cdc.gov.
- 3. Industry and emergency response workers can learn how to prevent chemical spills by going to www.chemsafety.gov.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Local Board of Health & Local Environmental Health Services, Health Statistics, Division of Health Promotion and Chronic Disease Prevention, Disaster Operations & Response.

Other organizations: Iowa Department of Natural Resources, Iowa Department of Agriculture and Land Stewardship, Centers for Disease Control and Prevention, Agency for Toxic Substances and Disease Registry, U.S. Environmental Protection Agency.



#### Funding sources

Federal grant: 0153-01304

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Federal funds	\$185,100	\$191,315	\$175,063
Total funds	\$185,100	\$191,315	\$175,063
FTEs	1.86	1.91	1.30

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.







www.idph.state.ia.us/apl/health\_statistics.asp



Each year in Iowa, about 40,000 babies are born, another 30,000 Iowans die, and 20,000 people decide to get married. Who keeps track of all these people? The IDPH Bureau of Health Statistics does. Vital records data has been kept in Iowa since 1880 and every person who was born, died, or got married since then is on file at IDPH.

Statistical data isn't just interesting trivia. It's important information that can be used to analyze and report on health trends and issues. These records are also required to prove eligibility for many programs and services, such as a driver's license, passport, or Medicaid. As a convenience, verifying the facts of birth is now available electronically for Medicaid and the DOT's driver services.

Much of lowa's health history can be told through the "numbers" and the Bureau of Health Statistics helps ensure they "add up" to a healthier future.



After 6 years of steady increases in the number of births from 37,555 in 2002 to 40,835 in 2007, births dropped slightly in 2008 to 40,221.

In 2008, the bureau continued to implement phases of the automation project by adding an administrative module within the electronic system to process legal actions for all births since 2007. Same-day service to front window customers has also been implemented.

## Why are Health Statistics important to promoting and protecting the health of lowans?

- Health data is used to monitor trends in health and health care, identify health problems, and measure the effectiveness of public health programs.
- Health data is used to measure progress toward meeting the goals of Healthy Iowans 2010 and other public health plans.
- Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

- Vital records are needed to determine eligibility for many programs and services. For instance, a birth certificate is required for a driver's license or passport.
- Health statistics help us understand the health of lowans, including disparities in health and the use of health care by different people.
- Health statistics help leaders decide where resources are needed and how they can best be used. Statistics also provide a measure of a program's success.

#### What do we do?

- Provide data to local, state, and national public health agencies so they can plan and measure the effectiveness of programs and make decisions about the use of resources.
- Provide data to state agencies to help them conduct their official duties.
- Provide certified copies of birth, death, and marriage records to lowans and other entitled people to establish eligibility for many benefits, including U.S. citizenship.
- Provide a database to monitor progress on health objectives, identify emerging health issues, and support policy development.
- Publish the annual Vital Statistics of Iowa and Vital Statistics in Brief, as well as studies on important topics.
- Conduct the Behavioral Risk Factor Surveillance System (BRFSS) survey, under the guidance of the Centers for Disease Control and Prevention (CDC). BRFSS helps monitor risk factors for chronic disease and other leading causes of death.



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• Percent of health data requests delivered on or before the target date.

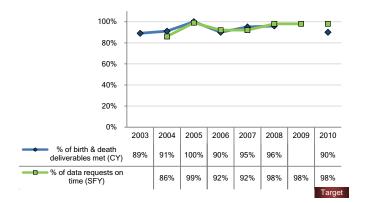
Data Source: Request database and help desk. Data are available annually.

How are we doing? In SFY2009, 98% of requests were completed by the agreed deadline—maintaining the SFY 2008 performance level.

2 Percent of birth and death data deliverables met according to National Center for Health Statistics requirements.

Data Source: National Center for Health Statistics report card. Data are available annually.

How are we doing? We are meeting expectations. Frequent changes to vital records systems and expectations make maintaining a 90% performance rating an appropriate target.





#### What can you do to help?

- 1. All lowans can learn about health trends by accessing health statistic information. For information on health trends, go to www.idph.state.ia.us/apl/health\_statistics.asp.
- 2. Data providers can work with the Bureau of Health Statistics to report accurate and complete data efficiently.
- 3. Data providers can work with the Bureau of Health Statistics to collect data in standard formats and with standard processes.



### Others working on similar issues

Other IDPH bureaus, offices, or programs: State Systems Development Initiative, Information Management.

Other organizations: National Center for Health Statistics, State Library Data Center.



### Funding sources

General fund, federal grants, & retained fees\*: K21-2203; 0153-0456/0972/1724; 0024-0024

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$53	\$0	\$0
Federal funds	\$648,507	\$839,750	\$319,125
Other funds*	\$2,539,950	\$2,883,119	\$3,587,190
Total funds	\$3,188,510	\$3,722,869	\$3,906,315
FTEs	29.92	32.07	37.70

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.

lowa Department of Public Health ♦ Division of Administration & Professional Licensure ♦ Health Statistics Phone: 515-281-4944 ♦ Fax: 515-281-0479 ♦ www.idph.state.ia.us/apl/health\_statistics.asp 1st & 5th Floors, Lucas Building ♦ 321 E. 12th Street ♦ Des Moines, IA 50319-0075

> Statistics: 5th Floor, Phone: 515-281-7221 Vital Records: 1st Floor, Phone: 515-281-4944





Division of Health Promotion & Chronic Disease Prevention

Phone: 515-281-8517

www.idph.state.ia.us/hpcdp/health care access.asp



Has your computer ever crashed? When no amount of re-booting or choice words brings the digital flicker of life back to your monitor, you call in the professionals. Thankfully, there seems to be no shortage of computer techs or even neighbors who know how to fix what ails your computer. But what about your body? Who do you turn to when you need help with your health? Professionals, of course - but the number of doctors, nurses, and other health professionals in lowa is not keeping up with the need. For example, by 2010, lowa is projected to have a 12% shortage in full-time registered nurses.

A competent, qualified, and diverse health workforce is vital to the health of lowans, especially in rural areas where access is limited. IDPH Health Workforce programs seek to promote and expand the number of health care workers in Iowa to ensure Iowans always have health professionals available when needed.

Did you know? The U.S. Department of Labor ranks Iowa as the lowest paying state in the country for registered nurses.

#### Why are Health Workforce programs important to promoting and protecting the health of lowans?

- In 2000, lowa ranked 47<sup>th</sup> in the nation in the number of psychiatrists and 46<sup>th</sup> in the number of psychologists per 100,000 people. Eighty-four lowa counties are Mental Health Professional Shortage Areas.
- Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

- Almost half of Iowa's dentists (49%) are over the age of 50. Sixty-one Iowa counties are in a Dental Health Professional Shortage Area.
- Long-term care facilities face high turnover of direct care workers. Iowa's shortfall of nurses is projected to increase from 8% in 2005 to 27% in 2020.
- lowa ranks 44<sup>th</sup> in the nation in the number of physicians per 100,000 people. Fifty-nine lowa counties reside in a full or partial Primary Care Health Professional Shortage Area.
- All lowans need to be able to access qualified health care professionals in lowa for their health care needs.

#### What do we do?

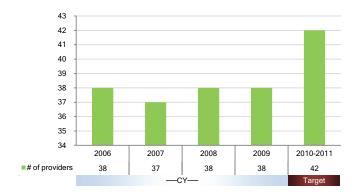
- Assist in recruiting students into primary care serviceoriented careers.
- Provide technical assistance to rural health clinics.
- Provide insurance to health care professionals and free clinics through the Volunteer Health Care Provider program. Currently, more than 500 professionals are enrolled in the program.
- Engage in analysis and planning for health care access and health care reform.
- Manage grants and contracts related to health workforce.
- Help professionals repay loans through the Iowa Loan Repayment Program. Loan repayment awards are made to an average of eight health professionals a year who commit to serve in shortage areas for two years.
- Help communities looking for health care professionals and professionals looking for vacancies through a free Web-based national recruitment network.

### Page 64

• Number of placements of providers practicing in rural or underserved communities.

Data Source: Contracts executed. Data are available annually.

How are we doing? An average of 38 providers are placed per year. Funding limits providing more placements in health professional shortage areas. At current funding levels, the program has retained providers and maintained the current level of provider to population ratios. This may not be possible in the future as both the population and providers age.



### What can you do to help?

- 1. All lowans can learn about the Bureau of Health Care Access by visiting www.idph.state.ia.us/hpcdp/health care access.asp.
- 2. All lowans can participate in rural health and local community planning for health services.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Access to Quality Health Services, Maternal Health, Child Health, Emergency Medical Services, Professional Licensure.

Other organizations: Health Resources and Services Administration (HRSA), National Health Service Corps, Iowa/Nebraska Primary Care Association, HRSA Bureau of Health Professions, National Rural Recruitment and Retention Network (3RNet).



### Funding sources

Center for Health Workforce Planning: health care trust fund: K60-6065/6073. Primary Care Office: federal grant: 0153-0912. PRIMECARRE: general fund & federal grant; State funds are used for a 1:1 match for the Federal Loan Repayment Grant: K09-0901; 0153-0908. In FY 2010, American Recovery & Reinvestment Act (ARRA) funds were added in the amount of \$100,000 with \$100,000 local match.

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$150,000	\$150,000	\$150,000
Health care trust	\$463,086	\$264,500	\$847,370
Federal funds	\$302,410	\$269,758	\$362,910
ARRA funds	\$0	\$0	\$100,000
Total funds	\$915,496	\$684,258	\$1,460,280
FTEs	1.42	0.93	3.00

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.

Iowa Department of Public Health ♦ Division of Health Promotion & Chronic Disease Prevention ♦ Health Workforce 4th Floor, Lucas Building ♦ 321 E. 12th Street ♦ Des Moines, IA 50319-0075

> 3R-Net ◆ PRIMECARRE ◆ Primary Care Office ◆ Center for Health Workforce Planning Phone: 515-281-8517 ♦ Fax: 515-242-6384 ♦ www.idph.state.ia.us/hpcdp/health\_care\_access.asp





Division of Health Promotion and Chronic Disease Prevention

Phone: 515-281-6779

www.idph.state.ia.us/hpcdp/chronic\_disease\_prevention\_management.asp



Cathy is a WISEWOMAN participant caring for a young adult son with cerebral palsy. Cathy's WISEWOMAN screenings showed increasing lipid values and weight, smoking, and that she was obese. At her 2006 visit, her screening values were higher again. "I decided that if I was going to die, at least I didn't want it to be from something I'd caused," Cathy said. Cathy quit smoking, drank diet soda without caffeine occasionally, ate foods low in fat, sugar, and salt, cooked at home, and replaced her high-calorie snacks. Cathy attended the WISEWOMAN intervention sessions to learn about good nutrition and physical activity. Instead of smoking, she walked in her neighborhood. After six months, Cathy's total cholesterol dropped 35 points, her triglycerides dropped 87 points, her LDL "bad" cholesterol dropped 20 points, and her HDL "good" cholesterol increased two points. Cathy reports that she now sleeps through the night. WISEWOMAN helped Cathy understand her cardiovascular risks, and supported her lifestyle changes.

Did you know? Heart disease and stroke are the #1 and #3 killers of Iowa men and women.

# Why is Heart Disease and Stroke programming important to promoting and protecting the health of lowans?

- In 2007.
  - 6,843 lowans died of heart disease; 1,680 lowans died of a stroke;
  - 31% of lowa deaths were from heart disease and stroke; and
  - 53% of lowa's heart disease and stroke deaths were women.

Which Iowa Public Health Goals are we working to achieve?

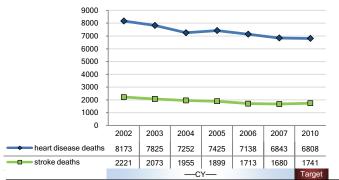
Promote healthy behaviors

Strengthen the public health infrastructure

- lowa adults with diabetes are more than 4 times more likely to die from heart disease than those without diabetes.
- Diabetes doubles the risk of a second heart attack in women, but not in men
- Unlike men, 71% of women experience early warning signs of heart attack with nausea and vomiting
- Nationally, heart attacks kill six times as many women as breast cancer
- More than twice as many women consider themselves not at all informed about stroke compared with heart disease.
- Stroke is a leading cause of disability in adults.
- Stroke treatment initiated within four hours of stroke symptoms saves lives and limits disability.

- Communicate the need for lowa entities to conduct, complete, and report activities that support the state heart disease and stroke plan.
- Work with the lowa State Stroke Task Force to identify programming to improve stroke symptom recognition, assure early transport to a qualified stroke facility, and promptly provide appropriate treatment.
- Measure blood pressure, blood cholesterol, blood glucose, height and weight and provide nutrition, physical activity and stop-smoking intervention to qualifying women in each of lowa's 99 counties through 25 *lowa Care for Yourself* programs at 48 sites.
- Inform lowans about national heart disease and stroke goals and evidence-based programming strategies.

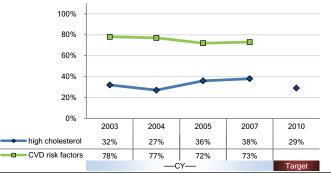
- Number of heart disease deaths.
- Number of stroke deaths.



Data Source: IDPH Vital Records. Data are available annually.

How are we doing? More investigation is necessary to determine if advances in cardiac treatment are responsible for improved heart disease death trend. We have already met our 2010 target for stroke-related deaths.

- Percent of lowa adults reporting high cholesterol.
- Percent of lowa adults with one or more of these cardiovascular risk factors: high blood pressure, high blood cholesterol, diabetes, current smoker, or overweight or obese.



Data Source: Behavioral Risk Factor Surveillance System (BRFSS). Data are available every two years.

How are we doing? Reported cholesterol levels are increasing. More investigation is necessary to find out if it is caused by greater awareness or changes in dietary behaviors. The cardiovascular risk factors for Iowa adults show that several chronic disease prevention programs must work together to reduce the physical and financial burdens cardiovascular disease has on lowans and health-care delivery systems.

### What can you do to help?

- 1. Learn from health care providers your blood pressure, blood cholesterol, and Body Mass Index (BMI) numbers, what they mean, and why they are important.
- 2. Increase the frequency and duration of physical activity to improve heart health and reduce overweight/obesity.
- 3. Eat moderate portions of fruits, vegetables, whole grains, legumes, and low-fat products to improve heart health and limit obesity.
- 4. Prepare foods without added salt and saturated fats. Avoid foods with trans fats.
- 5. Learn the different signs and symptoms for stroke and heart attack, and call an ambulance immediately if either occur.

#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Nutrition & Physical Activity, Tobacco Use Prevention & Control, Diabetes Prevention & Control.

Other organizations: American Heart Association (AHA)/American Stroke Association (ASA) - Go Red for Women; Centers for Disease Control and Prevention (CDC) - Heart Disease and Stroke Prevention Program, Nutrition and Physical Activity Program; National Heart, Lung and Blood Institute (NHLBI) - HeartTruth for Women, National High Blood Pressure Education Program, National Cholesterol Education Program, Obesity Education Initiative, WISEWOMAN initiative.

### Funding sources

Federal grants: 0153-0406/0420/0760

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Federal funds	\$914,440	\$1,025,839	\$1,324,736
Total funds	\$914,440	\$1,025,839	\$1,324,736
FTEs	4.56	5.01	5.90

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Division of Acute Disease Prevention & Emergency Response

Phone: 515-242-5150

www.idph.state.ia.us/adper/hiv aids.asp www.idph.state.ia.us/adper/hepatitis.asp



You could be one of 600 lowans reading this page who doesn't know they are infected with HIV. Maybe you're one of the 50,000 lowans who has chronic hepatitis C, but doesn't know it. Knowledge is power, especially when it comes to disease. Finding out early that you are HIV-positive or have chronic hepatitis C means that you can receive treatment earlier and live a longer, healthier life.

The HIV/AIDS and Viral Hepatitis programs provide prevention, counseling, testing, and treatment services. Disease Prevention Specialists help people newly diagnosed with HIV learn about the disease, talk to their partners about being exposed, and learn how to get into care. One person wrote the following to their disease prevention specialist: "You told me at a very low point in my life that I would be fine. You even called me six months later to say "I told you so," and you were right. Since then, I have regained my health, and have returned to work. My outlook is now happy and hopeful. Thank you."

Through personal awareness and community support, the HIV/AIDS and Viral Hepatitis programs are helping save lives.

Did you know? Over one-third of people diagnosed with HIV last year were considered late testers - meaning that they had been infected for many years before they were tested. Should you be tested?

#### Why are the HIV/AIDS & Viral Hepatitis programs important to promoting and protecting the health of lowans?

- HIV diagnoses reached an all-time high in 2007 with 128 persons diagnosed.
- The estimated number of lowans living with HIV/AIDS has grown to over 2,200 people, including at least 600 who are infected but who do not know it.
- The number of lowans living with hepatitis C is estimated to be over 53,000. Over 80% of these people are not aware of their infections.
- Which Iowa Public Health Goals are we working to achieve?

Prevent epidemics & the spread of disease

Strengthen the public health infrastructure

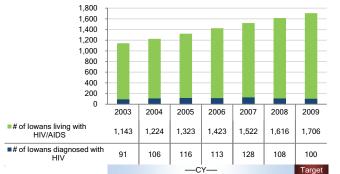
Promote healthy behaviors

- Early detection of both diseases can greatly increase the life expectancy of someone who is infected.
- Medications are available to treat HIV and hepatitis C. The AIDS Drug Assistance Program provides lifesaving medications or help with insurance premiums and co-pays to nearly 400 lowans each month.
- Early treatment of HIV infection means an individual is less likely to transmit the infection to partners. It also decreases the number of hospital visits, costs less, and increases the quality of life.

- Provide information, training, and funding to local public health agencies and community-based organizations for prevention programs.
- Offer counseling, testing, and referral services, including services for the partners of HIV-positive individuals.
- Provide medication, case management, and supportive services.
- The AIDS Drug Assistance program provides life-saving medication for HIV infected lowans when no other resources, including Medicaid, are available.
- Study and investigate ways to decrease transmission among disproportionately affected people, such as African Americans, Latinos, men who have sex with men, and injection drug users.



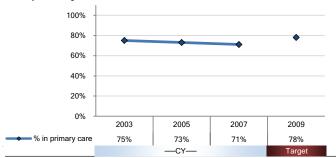
- Number of Iowans diagnosed with HIV.
- Number of lowans living with HIV/AIDS.



Data Source: HIV/AIDS reporting system. Data are available annually.

How are we doing? Diagnoses have been increasing recently, particularly among white, non-Hispanic males. The number of lowans living with HIV/AIDS is now increasing by about 100 per year.

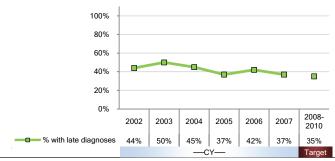
**9** Percent of diagnosed HIV-positive people who are in HIV primary medical care.



Data Source: HIV/AIDS reporting system. Data are available annually.

**How are we doing?** The percentage of diagnosed HIV-positive people who are in HIV primary medical care is steady at nearly 75%.

Percent of people with late diagnoses of HIV infection (AIDS diagnosis made within 1 year of HIV diagnosis).



Data Source: HIV/AIDS reporting system. Data are available annually, one year after the diagnosis year.

**How are we doing?** The percentage of people with late diagnoses of HIV infection is lower than in previous years.

#### What can you do to help?

- 1. All lowans who are at risk for HIV/hepatitis C should be tested to learn their statuses. To find out if you're at risk, go to
  - www.idph.state.ia.us/adper/hepatitis.asp.
- All lowans can encourage people who have tested positive for HIV or hepatitis C to follow their treatment providers directions and take their medications faithfully.
- 3. Health professionals can learn about screening for HIV and hepatitis C through training programs.
- 4. Health professionals can learn about good resources for patients interested in the disease, medications, and testing. For more information, go to www.idph.state.ia.us/adper/hiv aids.asp.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: STD Prevention, TB Control, Immunization, Acute Disease Epidemiology, Multicultural Health, WIC, Communication & Planning, Maternal Health, Family Planning, Health Care Access, Violence Prevention, Substance Abuse Prevention and Treatment, Health Statistics.

**Other organizations:** Iowa Department of Human Services, Centers for Disease Control and Prevention (CDC), Health Resources and Services Administration (HRSA), local public health, AIDS service organizations, hospitals, Ryan White Part C clinics.



#### **Funding sources**

**HIV:** general fund, tobacco fund, federal grant, federal recovery & reinvestment (FRR) funds, intra state receipts\* (Dept of Education), & private grant\*: K07-0761; K86-8602; 0153-0804/1568/1570/1572/1574/1578/1580/1582 **Hepatitis:** general fund: K07-0763; K15-1529

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$459,685	\$442,866	\$627,772
Tobacco funds	\$275,000	\$275,000	\$0
Federal funds	\$4,458,441	\$5,114,907	\$4,791,914
FRR funds	\$0	\$0	\$36,210
Other funds*	\$23,264	\$14,110	\$28,482
Total funds	\$5,216,390	\$5,846,883	\$5,484,378
FTEs	12.93	12.84	15.50

**Note:** Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.

lowa Department of Public Health ♦ Division of Acute Disease Prevention & Emergency Response ♦ HIV/AIDS/Hepatitis 5th Floor, Lucas Building ♦ 321 E. 12th Street ♦ Des Moines, IA 50319-0075

HIV/AIDS – Phone: 515-242-5150 ♦ Fax: 515-281-4570 ♦ www.idph.state.ia.us/adper/hiv\_aids.asp

**Hepatitis B** – Phone: 515-281-7228 ♦ Fax: 515-281-4570 ♦ **Hepatitis C** – Phone: 515-281-5027 ♦ Fax: 515-281-4570 ♦ www.idph.state.ia.us/adper/hepatitis.asp







www.idph.state.ia.us/adper/immunization.asp



In the 1950s, 7,813 lowans were infected with polio, many needing braces, crutches, wheelchairs, and iron lungs. In 2007, there were no cases of polio in Iowa. Why such a dramatic decline? The polio vaccine. During the 1960s, more than 35,000 lowans got rubella (German measles). In 2007, there were no cases of German measles in Iowa. The difference? The rubella vaccine. Vaccines have changed the world we live in by providing protection against harmful diseases and, in some cases, by eliminating them altogether.

The lowa Immunization program's goal is to reduce and ultimately eliminate the occurrence of vaccine preventable diseases. Working with public and private healthcare providers, the program works to increase and maintain the number of lowans who are properly vaccinated.

Vaccines help prevent the spread of disease and the IDPH Immunization program provides the resources to do just that.



Did you know? Vaccine preventable diseases still threaten the health of Iowans. In 2006, mumps and pertussis (whooping cough) sickened 2,306 Iowans.

#### Why is the Immunization program important to promoting and protecting the health of lowans?

- Vaccines are responsible for the control of many infectious diseases that once were common in the U.S., including polio, measles, diphtheria, whooping cough, rubella, mumps, tetanus, and Haemophilus influenzae type b (Hib).
- Vaccines help prevent infectious diseases and save lives.
- Immunization saves money! Each year, routine immunizations save more than \$40 billion in costs to society.

Which Iowa Public Health Goals are we working to achieve?

Prevent epidemics & the spread of disease

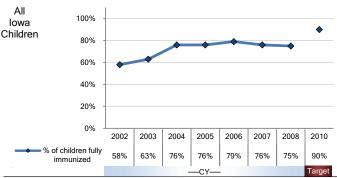
Strengthen the public health infrastructure

Prepare for, respond to, & recover from public health emergencies

Promote healthy behaviors

- Purchase and distribute vaccine to public and private health care providers through the Vaccines for Children (VFC) program. About 345,409 lowans ages 18 and younger are eligible for the program because they are Medicaid eligible, uninsured, underinsured, or American Indian natives.
- Provide education about vaccine preventable diseases and the benefits of immunization.
- Provide funding to local public health agencies to conduct immunization clinics and outreach clinics.
- Manage the statewide Immunization Registry Information System (IRIS), which keeps immunization records for all lowans, helping to prevent individuals from being under and over immunized.

#### Percent of all lowa children ages 19-35 months fully immunized\*.

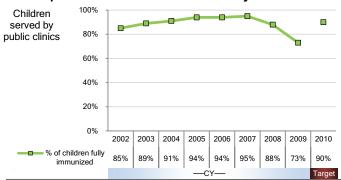


Data Source: National Immunization Survey, Centers for Disease Control and Prevention. Data are available annually.

\*4:3:1:3:3:1 – Includes 4 or more doses of any diphtheria and tetanus toxoids and pertussis vaccines including diphtheria and tetanus toxoids, and any acellular pertussis vaccine (DTaP/DTP/DT); 3 or more doses of any poliovirus vaccine; 1 or more doses of measles-mumps-rubella vaccine; 3 or more doses of Haemophilus influenzae type b (Hib) vaccine; 3 or more doses of hepatitis B vaccine; and 1 or more doses of varicella at or after child's first birthday, unadjusted for history of varicella illness.

How are we doing? Immunization rates for all Iowa children have increased over the years.

#### Percent of children ages 24-35 months served in lowa's public sector clinics that are fully immunized\*.



Data Source: IDPH public sector immunization assessments. Data are

#4:3:1:3:3:1 – Percentage for 2009 includes the requirement for 1 or more doses of varicella vaccine for the first time; thus, it is not comparable to 2004-2008 rates.

How are we doing? Immunization rates for lowa children served in public clinics have remained constant or increased over the years.

#### What can you do to help?

- Keep track of and maintain immunization schedules for you and your children. For a handy immunization card, go to <a href="https://www.idph.state.ia.us/adper/immunization.asp">www.idph.state.ia.us/adper/immunization.asp</a>.
- Healthcare professionals can promote the need for and the benefits of immunization.
- Healthcare professionals should routinely give immunizations according to the recommended childhood, adolescent, and adult schedules.
- Healthcare professionals can attend immunization educational seminars and trainings.

#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Acute Disease Prevention and Epidemiology, Child Health, Health Care Access, HIV/AIDS/Hepatitis, Maternal Health, STD Prevention, WIC.

Other organizations: Centers for Disease Control and Prevention (CDC), Advisory Committee on Immunization Practices, American Academy of Pediatrics, American Academy of Family Physicians, American College of Obstetricians and Gynecologists, local health departments, Iowa Department of Education, Iowa Department of Human Services, HMOs/MCOs, hospitals.



#### Funding sources

General fund, federal grant, & federal recovery & reinvestment (FRR) funds: K15-1521; 0153-1522

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$664,650	\$1,837,896	\$748,678
Federal funds	\$2,562,033	\$2,550,055	\$3,691,573
FRR funds	\$0	\$0	\$8,688
Other funds	\$5,000	\$0	\$0
Total funds	\$3,231,683	\$4,387,951	\$4,448,939
FTEs	14.00	13.85	15.75

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.

<sup>\*4:3:1:3:3-</sup> Includes 4 or more doses of any diphtheria and tetanus toxoids and pertussis vaccines including diphtheria and tetanus toxoids, and any acellular pertussis vaccine (DTaP/DTP/DT); 3 or more doses of any poliovirus vaccine; 1 or more doses of measles-mumps-rubella vaccine; 3 or more doses of Haemophilus influenzae type b (Hib) vaccine and 3 or more doses of hepatitis B vaccine





Division of Administration & Professional Licensure Phone: 515-281-3216

www.idph.state.ia.us/apl/info man.asp



A man from India visits family in northwest Iowa. He flies in to the Des Moines airport, makes a side trip to the Bridges of Madison County near Winterset, and shops for antiques in Walnut. During his journey through lowa, he gets sick and goes to the doctor. He's diagnosed with tuberculosis, a highly contagious disease. How does IDPH notify county health agencies in all the areas of the state where lowans may have been exposed to TB? It's done with the help of the IDPH Bureau of Information Management.

The story above didn't really happen, but it shows the important role Information Management plays in not only keeping the computers running at IDPH, but also keeping health information flowing across the state. Keeping the lines of communication open is critical to maintaining public health.

IDPH Information Management - keeping lowans healthy with the click of a mouse!



Did You Know? Information Management maintains over 1,560 pages on our Web site that include 3,908 images and 12,198 files (.pdf, .zip, and .exe) to make information available to the people of Iowa.

#### Why is Information Management important to promoting and protecting the health of lowans?

- The Information Management (IM) bureau develops, maintains, and supports technology services that allow health experts to collect and analyze health information.
- Health statistics and information are needed by IDPH, the statewide public health community, and individual lowans to understand, develop, and put health policy into action.
- Studies have shown that IM can provide better service at a fraction of the cost of contracting externally for the same services.

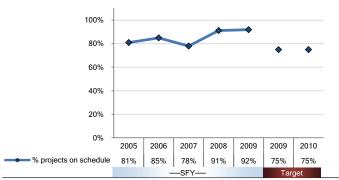
Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

Prepare for, respond to, & recover from public health emergencies

- Maintain and support personal computers, hardware, and software for all department employees, including communication links to email, the Internet, the ITE mainframe, data servers, and applications.
- Develop and support Web sites and software applications.
- Provide help desk and technical consultation services to support department programs, project management, and grant writing.
- Provide support for the emergency communication functions of IDPH.
- Maintain the IDPH Web site, providing the public with access to health information.
- Design, develop, and support computer software for external public health partners, including local public health agencies and private providers.

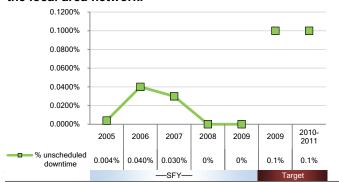
#### Percent of information management projects completed as scheduled.



Data Source: Information Management status reports tracked with MS Project. Data is updated weekly and available anytime. Final reports are made for each fiscal year.

How are we doing? Our goal is 75%. We have been holding between 78% and 92% for the last five years.

#### Percent of network-wide unscheduled downtime for the local area network.



Data Source: IDPH Big Brother monitoring system. Information in this system is added continuously and reports can be run as needed.

How are we doing? The goal is 0.1%. This year we had no unscheduled network downtime.



#### What can you do to help?

- 1. All lowans can provide feedback about the IDPH Internet site through individual IDPH programs or by using the "Contact Us" function.
- 2. All lowans can use the IDPH Internet site to find accurate health information. Go to www.idph.state.ia.us.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Health Statistics.

Other organizations: Other state agencies provide the same service for their respective departments, but do not offer them to other departments. DAS/ITE offers email service and application hosting, but at a cost that is prohibitive and at a lower level of service.



#### Funding sources

General fund, federal indirect funds, & intra state receipts\* (Dept of Human Services): K21-2207; 0153-2208

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$218,530	\$50,954	\$35,510
Federal funds	\$1,100,518	\$1,338,784	\$1,091,659
Other funds*	\$51,106	\$53,712	\$295,000
Total funds	\$1,370,154	\$1,443,450	\$1,422,169
FTEs	15.01	13.74	12.05

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





### **Injury Prevention &** Emergency Medical Services for Children

Division of Acute Disease Prevention & Emergency Response Injury Prevention – Phone: 515-281-0609 www.idph.state.ia.us/ems/injury prev.asp EMSC – Phone: 319-653-7270 www.idph.state.ia.us/ems/emsc.asp

Baby bottles, crib, diapers, stroller, car seat...the list of items needed for a new baby seems endless. But just having the items isn't enough. If you don't know how to assemble the crib, the baby can't sleep in it. If you don't know how to install the car seat, the baby isn't safe in it. In Iowa, 90% of child restraints are used incorrectly!

The Injury Prevention and Emergency Medical Services for Children (EMSC) programs work to prevent injuries to children. More than 100 child safety seat checks are conducted around the state each year, teaching parents and caregivers how to properly install a child seat.

Child safety doesn't stop at infancy. The Injury Prevention and EMSC programs also provide bike helmets and education to kids ages 2-14 across the state. Preventing injuries to children protects lowa's most precious asset.

Did you know? Each year, about 60 Iowa children are killed in car crashes; 34% are not properly restrained at the time of the crash.

Why are Injury Prevention & Emergency Medical Services for Children important to promoting and protecting the health of lowans?

- About 671,000 lowans are under the age of 18.
- EMS units across the state have taken advantage of opportunities to learn more about taking care of patients who are children.
- Federal funding was obtained to provide non-age specific automatic external defibrillators (AED) for Iowa EMS services.

Which Iowa Public Health Goals are we working to achieve?

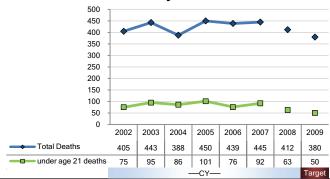
Prevent injuries

Promote healthy behaviors

Prepare for, respond to, recover from public health emergencies

- Distribute injury prevention and child healthcare resource information, free of charge, to local public health departments.
- Distribute pediatric equipment bags to EMS services. More than 300 pediatric equipment bags have been distributed. These bags contain emergency equipment specially made to treat children.
- Injury prevention projects, including distributing child restraint seats, bicycle helmets, and educational materials, which are provided locally.
- Provide assistance for grassroots injury prevention campaigns.

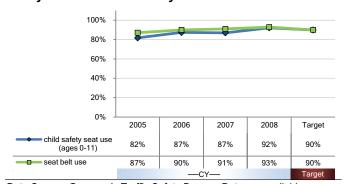
• Number of deaths caused by motor vehicle crashes.



Data Source: FARS IDOT; GTSB. Data are available annually.

How are we doing? The number of total deaths caused by motor vehicles accidents and the number of children and young adults who have died from motor vehicle accidents have declined.

Percent using occupant protection systems, such as safety belts and child safety seats.



Data Source: Governor's Traffic Safety Bureau. Data are available annually.

How are we doing? lowa currently boasts a 93% use rate of seat belts and a 92% rate for child safety seats during the 2008 survey. The Healthy Iowans 2010 goal is 90%.

#### What can you do to help?

- 1. All lowans can learn how to properly install a child restraint seat. For more information, go to www.idph.state.ia.us/ems/injury\_prev.asp.
- 2. All lowans can learn about the importance of wearing bicycle helmets. For more information, go to www.idph.state.ia.us/ems/injury prev.asp.
- 3. Iowans and healthcare providers should recognize the need for pediatric patient care education and equipment.
- 4. Iowans and healthcare providers can encourage policy makers to consider children when planning health care initiatives.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Child Health, Maternal Health.

Other organizations: Kiwanis Priority One, School Nurse Association, Academy of Pediatrics.



#### Funding sources

EMSC: federal grant: 0153-1714

Injury Prevention: intra state receipts\* (Dept of

Transportation – License Plate Sales & Governor's Traffic

Safety Bureau grant): K19-1948; 0153-1722

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Federal funds	\$91,287	\$101,058	\$126,531
Other funds*	\$178,533	\$209,374	\$398,845
Total funds	\$269,820	\$310,432	\$525,376
FTEs	2.28	2.27	2.30

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.

lowa Department of Public Health ♦ Division of Acute Disease Prevention & Emergency Response ♦ Injury Prevention & EMS for Children 5th Floor, Lucas Building ♦ 321 E. 12th Street ♦ Des Moines, IA 50319-0075

> **EMSC** Phone: 319-653-7270 Fax: 319-653-4271

www.idph.state.ia.us/ems/emsc.asp

**Injury Prevention** Phone: 515-281-0609 Fax: 515-281-0488 www.idph.state.ia.us/ems/injury\_prev.asp





Division of Environmental Health Phone: 1-800-972-2026

www.idph.state.ia.us/eh/lead poisoning prevention.asp



One of every 14 lowa children under age 6 is poisoned. They may have problems learning, hearing, or growing. At the extreme, they may have severe brain damage, or even die. Most of these children are being poisoned in their own homes by lead. Nearly 4 of every 10 homes in Iowa were built before 1950, when lead-based paint was routinely used. Children are lead-poisoned when they put paint chips in their mouths, or get house dust or soil on their hands and put them in their mouth.

The IDPH Lead Poisoning Prevention program works to prevent childhood lead poisoning by assuring that children are tested for lead poisoning, reducing exposure for lead-poisoned children, and educating lowans about prevention. The percentage of children tested for lead poisoning before age six has increased from 37% in 2000 to 90% in 2009 The IDPH Lead Poisoning Prevention program helps protect lowa adults through testing and education.



Did You Know? One child out of every 14 Iowa children under age 6 is lead-poisoned - more than 4 times the national average. About 2,000 Iowa children born each year will become lead poisoned by their 6th birthday.

#### Why is Lead Poisoning Prevention important to promoting and protecting the health of lowans?

- Lead is especially harmful to the developing brains and nervous systems of young children under age 6. Lead affects intelligence, hearing, and growth.
- Nearly 40% of lowa houses were built before 1950, and most of these homes contain lead-based paint. Young children who live in pre-1950 houses are lead-poisoned when they put paint chips or exterior soil in their mouths

or when they get house dust and soil on their hands and put them in their mouths.

In adults, lead can affect the nervous system, blood pressure, and fertility. Each year, an average of 126 lowa adults tested have blood lead levels considered harmful.

Which lowa Public Health Goals are we working to achieve?

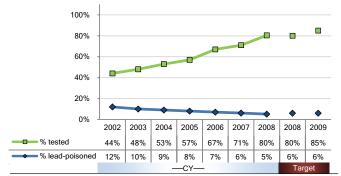
Protect against environmental hazards

Prevent injuries

- In 70 counties, local boards of health provide childhood lead poisoning prevention services; IDPH provides funding and technical assistance. IDPH provides direct services in 29 counties.
- The services include assuring that children under age 6 are tested for lead poisoning, providing medical and environmental case management for lead-poisoned children, collecting and analyzing data on all children who are tested for lead poisoning, providing information, and involving the community.
- IDPH collects blood lead test results for lowans ages 16 and older. Adults with blood lead levels considered harmful are notified.
- Training and certification is required for lowans who identify or abate lead-based paint.
- Property owners and occupants must be notified that leadbased paint may be present before renovating, remodeling, or repainting a home or child-occupied facility built before 1978. Beginning in April 2009, contractors that conduct renovation, remodeling, or repainting in these facilities must be trained and certified and must follow lead-safe work practices.



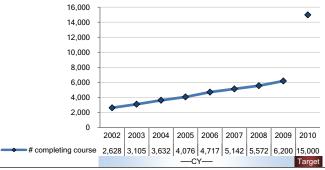
- Percent of lowa children under age six who get a blood lead test.
- Percent of lowa children getting a blood lead test who are identified as lead-poisoned.



Data Source: IDPH Childhood Blood Lead Surveillance Database. Data are available annually

How are we doing? The percentage of children who are lead-poisoned is steadily decreasing. However, not all lowa children are tested. The percentage of children tested for lead poisoning before age six is steadily increasing. However, there is still a need to teach providers and parents about the need to test children for lead poisoning.

• Number of people who have completed an 8-hour lead-safe work practices course.



Data Source: IDPH Bureau of Lead Poisoning Prevention records. Data are available annually.

How are we doing? The number of people who have completed this training is increasing, but it is not increasing as fast as in earlier years when IDPH had a grant to pay for people to complete this training at no charge.

### What can you do to help?

- Healthcare providers should test all patients under age 6 for lead poisoning at least once a year.
- 2. Iowa parents should ask that their children be tested and be aware of possible exposure to lead-based paint hazards.
- Adults who work with lead should be aware that they can become lead-poisoned, their children could be poisoned by lead brought home on their clothes, and their unborn children can be exposed to lead if they are pregnant.
- Follow laws requiring training and certification of those who identify or abate lead-based paint, requiring notification to owners and occupants that lead-based paint may be present before renovating, remodeling, or repainting a home or a child-occupied facility built before 1978, and contractors working in these facilities to be trained and certified and to use lead-safe work practices.
- All lowans should be aware of the risk for lead 5. poisoning. To learn more, go to www.idph.state.ia.us/eh/lead poisoning prevention.asp.

#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Child Health, Healthy Child Care Iowa, Early Access, WIC.

Other organizations: Iowa Department of Human Services (Medicaid), Centers for Disease Control and Prevention (CDC) Childhood Lead Poisoning Prevention Program, Environmental Protection Agency (EPA) Lead Programs, National Institute for Occupational Safety and Health (NIOSH).



#### **Funding sources**

Adult lead: federal grant: 0153-0402; Childhood lead: general fund, tobacco fund, federal grant, & federal recovery & reinvestment (FRR) funds: K13-1351; K92-9212; 0153-1352; Lead-based paint activities training & certification & pre-renovation notification: federal grant & retained fees\*: K19-1928; 0153-1912/1954

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$657,126	\$575,396	655,978
Tobacco funds	\$68,573	\$66,128	\$0
Federal funds	\$946,747	\$1,217,306	\$990,586
FRR funds	\$0	\$0	\$55,000
Other funds*	\$25,060	\$17,555	\$72,805
Total funds	\$1,697,506	\$1,876,385	\$1,774,369
FTEs	9.67	9.21	9.25

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.



### Local Board of Health & Local Environmental Health Services

Division of Environmental Health Phone: 515-281-0921 www.idph.state.ia.us/eh/board of health assistance.asp Promoting & Protecting the Health of Iowans



We live in a time when it's easy to take many things for granted. Clean water, safe food, and proper waste disposal are things we expect. However, it takes properly trained people at the local level to carry out the work needed to ensure the basics we've come to expect are there consistently.

IDPH supports local boards of health in providing environmental health programs. Since the local environmental health liaison program was created in 2001, over 1,200 local environmental health staff have attended more than 40 training programs. That's an estimated 7,000 hours of professional training!

Environmental health has become a more recognized and valued part of public health in Iowa. IDPH works to ensure the same services and knowledge are delivered statewide, regardless the size of the community.



Did you know? In 2009, IDPH responded to 3,180 requests for consultation or assistance from local officials and the public.

#### Why are Local Board of Health & Local **Environmental Health Services important to** promoting and protecting the health of lowans?

- Concerns about environmental conditions continue to increase, but the level of environmental health services is not consistent across the state.
- Environmental health affects every lowan every day. The environmental health workforce is vital to making sure lowans are safe where they live, work, and play.
- Environmental hazards may affect lowans in a public health emergency or natural disaster. These include food safety, availability of clean drinking water, management of waste, and air quality.
- lowa's environmental health workforce is aging and it is important to recruit new graduates to the field of environmental health.
- During an environmental health emergency, federal resources are typically not available for the first 72 hours. Local health agencies must be prepared to respond until additional assistance arrives.

#### Which lowa Public Health Goals are we working to achieve?

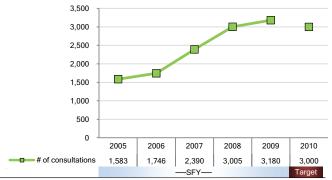
Strengthen the public health infrastructure

Protect against environmental hazards

Prepare for, respond to, & recover from public health emergencies

- · Offer consultation to local boards of health and boards of supervisors on their role in providing environmental health services. This includes finding and hiring qualified environmental health specialists.
- Provide training and consultation services to local environmental health staff on issues including indoor air quality, water quality, tattoo inspections, and more.
- Develop model programs for local officials to adopt and implement.
- · Provide technical assistance and consultation during a food or water related illness outbreak investigation.
- Facilitate coordination between state agencies and local public health agencies.
- Provide equipment, assistance, and back-up staff for local emergency response plans.

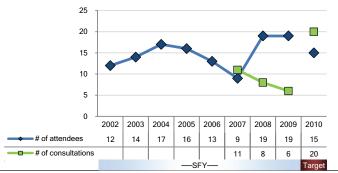
#### Number of consultations provided to local officials and the public.



Data Source: Division of Environmental Health phone & email logs. Data are available annually.

How are we doing? As staff numbers increase, so do the number of inquiries and responding consultations provided.

- Number of consultations provided to local boards of health or supervisors.
- Number of attendees at annual IDPH environmental health orientation.



Data Source: Division of Environmental Health logs. Data are available annually.

How are we doing? We fulfill all requests to present to local boards of health and supervisors. Each year, we have 10-20 environmental health professionals register for orientation. Evaluations of this orientation show high value to environmental health practice at the local level.

#### What can you do to help?

- 1. All lowans should develop a personal or family disaster plan. For more information, go to www.ready.gov.
- 2. Local public health officials, elected officials and board of health members should call 515-281-0921 with questions about the delivery of environmental health services in Iowa.
- 3. Public health administrators, local boards of health, environmental health directors, and practitioners should attend regional trainings. For more information, go to www.idph.state.ia.us/calendar/calendar.aspx.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Acute Disease Epidemiology, Disaster Operations & Response, Radiological Health, Swimming Pools & Spas, Safe Drinking Water.

Other organizations: Iowa Department of Natural Resources, Iowa Department of Inspections and Appeals, Iowa Homeland Security, Iowa Department of Agriculture and Land Stewardship, University of Iowa Hygienic Laboratory, Iowa Water Well Association, Iowa Onsite Waste Water Association, Iowa Environmental Health Association, Iowa Ground Water Association.



#### Funding sources

General fund, federal grant, federal recovery & reinvestment (FRR) funds & intra state receipts\* (Dept of Human Services): K09-0963; 0153-0974/0976/1360

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$66,319	\$65,059	63,974
Federal funds	\$55,830	\$125,669	\$120,564
FRR funds	\$0	\$0	\$8,771
Other funds*	\$70,613	\$27,420	\$0
Total funds	\$192,762	\$218,148	\$193,309
FTEs	1.43	1.65	1.65

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Division of Health Promotion & Chronic Disease Prevention

Phone: 515-281-7016

www.idph.state.ia.us/hpcdp/local\_public\_health\_services.asp



This is the story of Katy. She is 97 and lives on a farm in the same house she was born in. Katy has a daughter who lives close. Although they care for each other, their relationship is very strained. The homemaker calls Katy's daughter and leaves a message when her mother needs supplies and her daughter will then deliver them. With the homemaker's assistance, Katy makes a grocery list and the homemaker picks up her groceries in town before her weekly visit to Katy's home.

Katy has to watch every penny, so when the homemaker noticed that a couple who began visiting Katy was talking her into giving them cash, Katy's daughter was notified. After Katy stopped giving them money, the couple stopped visiting.

Katy can't bend over because she becomes dizzy and falls. This makes it hard for her to put clothes in and take them out of the dryer, change her bedding, and do other housekeeping tasks. The homemaker takes care of these jobs during her weekly visits. Both Katy and her daughter are appreciative of the homemaker service and feel that without the services Katie could not stay in her own home, which is so important to Katy's quality of life.

Did you know? Local public health services exist in all of Iowa's 99 counties and local boards of health assure that all communities have services that help promote healthy Iowans and healthier communities.

- Why are Local Public Health Services important to promoting and protecting the health of lowans?
  - All lowans deserve a local public health system that
    - ✓ supports local capacity to assess, plan, and carry out local health improvements, and

Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

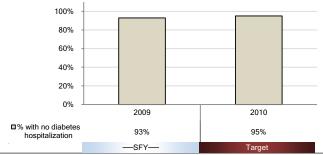
- ✓ serves as the mechanism to continually assess changing health needs and develop strategies to address. those needs.
- Local public health services increase the capacity of local health partners to provide gap-filling services where there is no provider.
- Local public health services prevent illness, improve health, enhance the quality of life, and provide leadership to safeguard the health and wellness of communities.

### What do we do? IDPH supports local public health services through:

- Grant funding for local programs that
  - ✓ Help lowans engage in healthy behaviors,
  - ✓ Improve access to health services for those who "fall through the cracks" and often have no other options, and
  - ✓ Strengthen the public health infrastructure with
    - health promotion services and education to get people the information they need to make healthy choices:
    - in-home personal care and supportive services, such as home care aide, homemaker, and skilled nursing;
    - health screenings such as blood pressure, lead testing, cholesterol, and more;
    - communicable disease follow-up; and
    - immunizations for children and adults when no other funding source is available.

- Support for local needs assessment and community organizing processes necessary to encourage community change for improved health.
- Regional field staff from the Bureau of Local Public Health Services help all 99 counties address local health priorities in a number of ways to ensure that all lowans, no matter where they live, have access to basic public health services.
- Technical assistance in resolving community health issues. problems, or concerns:
- Education designed to build and maintain the knowledge and skills necessary to provide local public health services and build healthier communities;
- Acting as catalysts for sharing best practices between boards of health, local public health agencies, and IDPH.

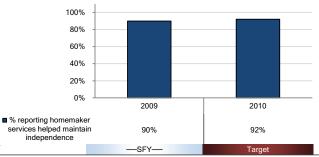
• Percent of health maintenance consumers who report having diabetes and who were not hospitalized with an acute episode related to diabetes.



Data Source: LPH service contracts End of Year Report. Data are available annually.

How are we doing? SFY2009 baseline is 93%. Our 2010 target is 95%.

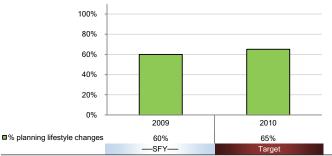
**2** Percent of consumers who report that homemaker services helped them remain in their home rather than going to a long-term facility.



Data Source: LPH service contracts End of Year Report. Data are available annually

How are we doing? SFY2009 baseline is 90%. Our 2010 target is 92%.

**©** Percent of consumers who verbalized plans to make lifestyle changes to reduce risks identified in screening and assessments.



Data Source: LPH service contracts End of Year Report. Data are available annually.

How are we doing? SFY2009 baseline is 60%. Our 2010 target is 65%.

#### What can you do to help?

- 1. All lowans should be familiar with their local public health agency and the services provided.
- 2. All lowans can support local public health policies and plans.
- 3. All lowans should consider serving as a board of health member.
- 4. All lowans can create a personal and family health improvement plan.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: The Division of Environmental Health works with local boards of health building organizational capacity for environmental public health. The Bureau of Communication and Planning works on a variety of planning efforts.

Other organizations: Iowa Public Health Association (IPHA), American Public Health Association (APHA), Iowa Association of Local Public Health Administrators (IALPHA), Centers for Disease Control and Prevention (CDC). National Association for City and County Health Officials (NACCHO), National Association of Local Boards of Health (NALBOH).



#### Funding sources

Local Public Health Essential Services: tobacco fund K92-9202 (FY2008 & FY2009 only).

Local Public Health Liaison: general fund, federal grant, & federal recovery & reinvestment (FRR) funds. State funds are used for maintenance of effort match for the PHHS Block Grant K09-0957: 0153-0958.

Local Boards of Health: general fund K09-0959.

Healthy Aging: FRR funds K11- 1111 Home Care Aide: general fund K11-1105. Public Health Nursing: general fund K11-1103.

Social Services Block Grant (SSBG): intra state receipts\* 0153-0942.

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$10,002,586	\$9,793,955	\$10,080,846
Tobacco funds	\$1,157,480	\$1,145,820	\$0
Federal funds	\$323,975	\$382,917	\$337,291
FRR funds	\$0	\$0	\$847,305
Other funds*	\$0	\$294,194	\$963,742
Total funds	\$11,484,041	\$11,616,886	\$12,229,184
FTEs	9.32	8.72	8.75

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





### Maternal Heath

Health Promotion and Chronic Disease Prevention Phone: 1800-383-3826

www.idph.state.ia.us/hpcdp/maternal health services.asp

An Iowa Mom's childbirth experience with perinatal depression...

I was 17 years old when I became pregnant with my first child. I experienced depression both during and after my pregnancy. I felt a lot of pressure being a new mom. I was trying to finish high school, and be a new mom. I wanted to do everything right, but did not feel like a good mother. This made my depression worse. I was afraid to talk to my family or friends; however, I completed a survey at the maternal health agency and found out I had depression. I did not know this was the most common complication of childbirth. I found that there was help and that I did not have to feel this way. With the help of my doctor, counselor, and family, I am learning to manage my depression and feeling better about being a new mom.

Did You Know? The Maternal Health Program improves the health of mothers and babies by teaching mothers about healthy lifestyle choices and nutrition, assessing oral health, screening for maternal health, mental health, and pregnancy risk factors, and improving access to prenatal care. We promote breastfeeding, as well, which improves infant health, immunity, growth, and development.

#### Why is Maternal Health important to promoting and protecting the health of lowans?

- Early and adequate prenatal care (in the first 3 months of pregnancy) is important to a healthy pregnancy and birth. It helps reduce illness and disability through health care advice and by identifying and managing chronic or pregnancy related risks.
- According to the Iowa Barriers to Prenatal Care Survey, most lowa women get prenatal care; however, low-income, teen, and minority women are more likely to get late prenatal care (after the 3<sup>rd</sup> month). Barriers to getting early care include financial, transportation, and a lack of knowledge that prenatal care is important.
- Premature, low birthweight babies have a higher risk of death and disabilities. Costs for caring for these babies are up to 15 times higher. In 2004, there were 4,519 preterm births in Iowa - 12% of live births. This is an increase from 10% in 1996. Still, lowa's rate is slightly better than the national rate of 12.5% of live births.
- Maternal health agencies have worked hard to improve the number of pregnant women who have a "medical home" – a regular source of prenatal medical care by a physician or midwife – from 68% in 2002 to 94% in 2006, a 26% increase in four years.

### What do we do?

- We provide funding for 24 maternal health grantees in lowa that provide services to pregnant and postpartum women. For a map with contact information for the maternal health agencies, go to www.idph.state.ia.us/hpcdp/maternal health services.asp. Services include:
  - Help in finding a medical home.
  - Prenatal and postpartum health education.
  - Transportation to medical visits.
  - Education about lifestyle choices to improve pregnancy outcomes.
  - Breastfeeding education and support.
  - Psychosocial assessment including screening for perinatal depression.
  - Nutrition assessment and education.
  - Oral health assessment and help in finding a dentist to provide a regular source of oral health care.
- Postpartum home visits by registered nurses to assess the health of both new mothers and their babies.

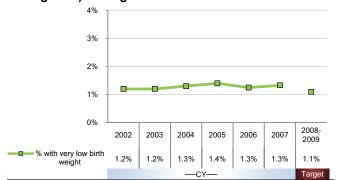
Which lowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

Promote healthy behaviors

- Family needs assessment and referral to community resources to help the family.
- Pregnant women may qualify for help from publicly funded health insurance (Medicaid) even if they were not eligible before pregnancy. Program staff help families find out if they qualify for services at a reduced or no cost.
- Referral to family planning and child health agencies after delivery to support the family's ongoing health care needs.

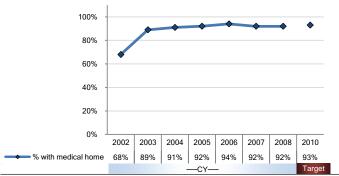
#### • Percent of very low birth weight infants (less than 1500 grams) among all live births.



Data Source: Vital statistics. Data are available annually.

How are we doing? The percent of very low weight births has remained steady from 2002 to 2007.

#### Percent of women served in the maternal health program who report a medical home.



Data Source: Women's Health Information System. Data are available

How are we doing? In 2002, the rate was 68% with a medical home. In 2008, our rate of women reporting a medical home was 92%, a slight decline from 2006 but a 24% increase since 2002.

### What can you do to help?

- 1. Health care professionals can refer Medicaid eligible/low-income women for maternal health services. Call the Healthy Families Line at 1-800-369-2229.
- 2. All lowans can improve pre-conception health that can result in better reproductive health outcomes and potentially reduce societal costs. Focus on overall wellness for all women of childbearing age. Understand the importance of early regular prenatal care. If you are pregnant, do not smoke or drink alcohol.
- 3. Health care professionals and dentists can provide medical home/dental homes to Medicaid eligible women and low-income women with no insurance.
- 4. Health professionals can screen all pregnant and post partum women for depression—the number one risk of childbirth.

#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Early Childhood, Family Planning, Tobacco Use Prevention & Control, Multicultural Health, Bureau of Nutrition and Health Promotion.

Other organizations: Department of Human Services; child health advocacy groups; Iowa Community Empowerment; Healthy Start; March of Dimes; American College of Obstetricians and Gynecologists; certified nurse midwives; Academy of Family Physicians; Iowa Osteopathic Medical Association: Iowa Statewide Perinatal Care Program; Iowa Nurses Association; Iowa Section of the Association of Women's Health, Obstetric and Neonatal Nurses.

### Funding sources

General fund, federal grants, & private grant\*; State funds are used for a 75% match for the Title V Block Grant: K05-0507/0651; 0153-0304/0454/0532/0612

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$348,334	\$315,972	\$321,067
Federal funds	\$1,835,632	\$1,377,536	\$1,504,166
Other funds*	\$19,174	\$818	\$0
Total funds	\$2,203,140	\$1,694,326	\$1,825,233
FTEs	4.78	3.55	2.95

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Phone: 515-725-1400

www.idph.state.ia.us/do/medical examiner.asp



For many lowans, knowledge about what a medical examiner does may be limited to an episode of "CSI" or reruns of "Quincy." While entertaining, these programs don't paint a true picture of the many responsibilities of the State Medical Examiner office.

The State Medical Examiner (SME) office does over 700 autopsies per year; but that's only a small part of what is accomplished. The SME also reviews close to 4,000 death investigation reports from Iowa's 99 counties and provides 24-hour consultation services to county medical examiners and investigators. In addition, SME staff are responsible for signing about 600 death certificates and 350 cremation permits per year.

While the television version of a medical examiner may appear glamorous, the real life work of the State Medical Examiner in Iowa is a vital part of Iowa's public health system.



Did you know? The number of autopsy cases sent to the State Medical Examiner office has increased from 189 in 2000 to 757 in 2008.

> The Iowa Office of the State Medical Examiner earned accreditation from the National Association of Medical Examiners (NAME) in March 2008.

#### Why is the State Medical Examiner important to promoting and protecting the health of lowans?

- Iowa has more than 28,000 deaths each year. Of these deaths, approximately 4,000 need a death investigation by the county medical examiner, deputy medical examiner, investigators, or the state office.
- Of the nearly 4,000 deaths that need a death investigation, more than 700 require autopsies by the State Medical Examiner office.
- State Medical Examiner physicians and forensic pathologists provide expert witness testimony at depositions, grand juries, and state and federal criminal and civil trials.
- The State Medical Examiner office has members on the Domestic Violence Death Review Team, providing help and expert advice about forensic pathology questions and concerns.
- The Child Death Review Team is under the direction of the State Medical Examiner office beginning FY09.

#### What do we do?

- Provide 24/7 access to all counties for help with or consultations about death investigations in their county.
- Perform over 700 autopsies and review close to 4,000 reports each year.
- Provide funding for up to 10 county medical examiners and medicolegal death investigators to attend training.
- Provide lectures, tours, and presentations to schools, professional groups, and other government agencies.
- Provide internships for investigators, radiology technologists, clinical laboratory scientists, and medical office specialist from many schools throughout lowa.
- Maintain a database of medical examiner cases
- Forensic pathologists provide more than 40 lectures per year to medical students, residents, mortuary science students, and county medical examiners and their investigators.

Which Iowa Public Health Goals are we working to achieve?

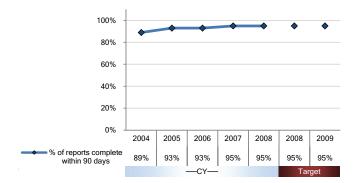
Strengthen the public health infrastructure

- Provide basic death investigation training sessions across the state to county level investigators and medical
- Provide one month rotations for medical students.

• Percent of autopsy reports completed within 90 days of death.

Data Source: SME Database. Data are available annually.

How are we doing? We have met the goal of 95% of autopsy reports completed within 90 days of death with greater than 80% completed within 60 days.



### What can you do to help?

- 1. Every Iowan can view the Iowa Office of the State Medical Examiner as an independent and objective investigative agency.
- 2. Iowans can encourage more funding for the office as it continues to grow and takes on more cases statewide.



### Others working on similar issues

Other IDPH bureaus, offices, or programs: Vital Records handles submissions of death certificates, Child Death Review, Violence Prevention.

Other organizations: Iowa Association of County Medical Examiners, Iowa Division of Criminal Investigations.



#### Funding sources

General fund, retained fees, & federal recovery & reinvestment (FRR) funds: K19-1951;

Child Death Review: K05-0661/0665 (FY09 only)

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$1,143,497	\$1,203,455	\$1,053,821
FRR funds	\$0	\$0	\$50,814
Retained fees	\$1,598,791	\$1,784,210	\$2,304,465
Total funds	\$2,742,288	\$2,987,665	\$3,409,100
FTEs	20.58	23.45	18.00

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





### **Iowa Board of Medicine**

Phone: 515-281-5171 www.medicalboard.iowa.gov



When you or a loved one are ill and need medical care, it can be stressful. You have many things to be concerned about, but worries about your doctor's competency should not be one of them. The lowa Board of Medicine strives to ensure that only qualified, skilled physicians and acupuncturists practice in Iowa.

In addition to helping lowans get quality medical care, the lowa Board of Medicine helps doctors. The Board has improved the license renewal system for doctors. In FY2009, 98% of physicians renewed their license online, eliminating wait-time and allowing for immediate practice.

And, by streamlining the peer review system, the Board has been able to take disciplinary action sooner, and when necessary, remove incompetent physicians from practice.



Did you know? There are more than 10,200 physicians and 37 acupuncturists licensed to provide health services to Iowans.

### Why is the Iowa Board of Medicine important to promoting and protecting the health of lowans?

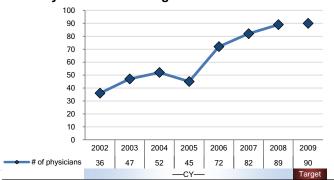
- lowans deserve medical care and acupuncture from competent, qualified practitioners. By licensing providers, we help keep untrained and dishonest individuals from working in lowa.
- Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

- The medical board provides licensure, investigation, and services for professionals with substance abuse or mental health problems. Iowa law mandates such services.
- Research shows that monitoring programs, like the Iowa Physician Health program, are highly effective in reducing the likelihood of a return to addictive or problem behavior.
- Thousands of Iowans use the Docfinder service on the medical board's Web site each year. Docfinder provides information about licensees to the public.

- License health professionals.
- Investigate complaints about health professionals.
- Discipline health professionals who have broken the law.
- Monitor disciplined and impaired health professionals so they can return to practice as soon as they are safe to practice again.
- Provide information about licensure and discipline to the public, employers, and credentialers.
- Speak to professional groups, students, and the public.
- Watch trends in other states and use that information to help form policy.

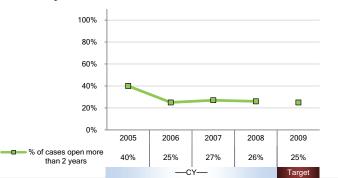
• Number of physicians with signed contracts in the Iowa Physician Health Program.



Data Source: Manual counts. Data are available annually.

How are we doing? The number increased by 7 in 2008 and 71 since 2000.

Percent of open cases that have been open for more than two years.



Data Source: Board database. Data are available annually.

How are we doing? The percentage has decreased since 2005, showing that the backlog is improving.



### What can you do to help?

- 1. All lowans can use the Docfinder on the medical board's Web site to search for a licensed physician or acupuncturist. Go to www.medicalboard.iowa.gov to use Docfinder.
- 2. Physicians and licensed acupuncturists should learn about and follow ethical and medical guidelines.
- 3. Physicians and employers should use the lowa Physician Health Program to deal with physicians who show an impairment or potential impairment (for example, addiction or mental health problems). Go to www.iphp.iowa.gov to learn more.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Dental Board, Board of Nursing, Board of Pharmacy, Professional Licensure.

Other organizations: Other states' medical boards, Federation of State Medical Boards, Federation of State Physician Health Programs.

### Funding sources

Retained fees: K19-2071/2075

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Retained fees	\$2,156,556	\$2,119,359	\$3,588,865
Total funds	\$2,156,556	\$2,119,359	\$3,588,865
FTEs	21.21	21.25	22.00

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Health Promotion and Chronic Disease Prevention Phone: 515-281-4904

www.idph.state.ia.us/hpcdp/mh\_default.asp



In 2008, the Office of Multicultural Health secured funding to address higher rates of STDs and HIV/AIDS in lowa's minority populations. On April 12, 2008, 90 people attended a one day summit for African American females ages 14 to 18. The goal was to focus on HIV/AIDS and STD education and awareness, positive lifestyles and choices, self esteem building, oral health, and peer mentorship. The summit provided a good environment for sharing and discussing efforts to reduce the high rates of HIV/AIDS and STDs in this population. Participants even asked that it become an annual event. In addition, partnerships have been built to hold similar events in other parts of the state and with other diverse populations.

### Did you know?

- ✓ In 2005, IDPH established the Office of Multicultural Health (OMH) in an effort to increase access to culturally competent health care for Iowa's minority, immigrant, and refugee populations.
- ✓ In 2006, OMH became part of Iowa law.
- ✓ In 2007, OMH developed a strategic plan with the mission to actively promote and facilitate health equity for Iowa's multicultural communities.

# Why is Multicultural Health important to promoting and protecting the health of lowans?

According to the U.S. Census, Iowa had a 97% increase in its minority population from 1990 to 2000.
 There was a 47% increase in African Americans, a 46% increase in Native Americans, a 214% increase in Asian Pacific Islanders, and a 241% increase in the Hispanic/Latino population.

► Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

- From 1990 to 1999, approximately 2,600 legal immigrants and refugees became lowa residents each year. Currently, lowa's largest refugee groups are Southeast Asians and Bosnians. The Sudanese refugee population in Des Moines was 916 in 2001.
- Chronic diseases such as diabetes, cardiovascular disease, and cancer are more common in lowa's minority
  and immigrant/refugee populations. To meet the needs of these growing populations, lowa must expand its
  capacity to address minority and immigrant/refugee health issues. IDPH must help local public health agencies
  and health care providers address the health concerns of new lowans.

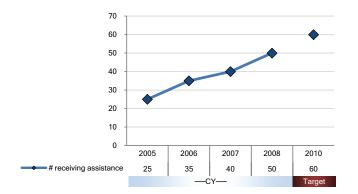
- Work with companies, communities, faith-based groups, and others across lowa to develop strategies for providing culturally and linguistically appropriate services.
- Coordinate and provide education and training in culturally and linguistically appropriate health care and service delivery to any state, local, or regional agency, program, or institution.
- Assure access to networks, contacts, and resources necessary to apply for local, regional, and federal grants and awards.
- Assure a comprehensive health assessment for newly arriving refugees. Work with partnering agencies to assure appropriate health services are received.
- Provide information to the public about health disparities.
- Plan, evaluate, assess, and research health disparities.
- Develop legislation, rules, and policies related to health disparities.
- Work with and provide links to communities, local agencies and programs, and regional and federal entities to address the health issues that affect lowa's minority, immigrant, and refugee populations.

• Number of state and local programs and organizations that have received technical assistance, resources, or training about multicultural health issues and services.

Data Source: OMH records. Data are available annually.

#### How are we doing?

In 2008, cultural competency training was provided to over 100 participants at the 2008 Protecting Families, Mercy Medical Conference in Sioux City, Iowa. In 2009 cultural diversity trainings, workshops and technical assistance have been provided at the Univ. of Iowa, Des Moines Univ., UNI and Cornell College. Over 200 students have been impacted by these presentations.



### What can you do to help?

- 1. All lowans can become more aware of the health care and access needs of lowa's minority, immigrant, and refugee residents.
- 2. All lowans can build public, professional, and policymaker support for programs and policies to improve the health of minorities, immigrants, refugees, and their families.
- 3. Iowa organizations can do more to recruit and retain racial and ethnic minorities as health and human service providers.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Child Health, Oral Health, Immunization, Lead Poisoning Prevention, STD Prevention, HIV/AIDS/Hepatitis, Tobacco Use Prevention & Control, Maternal Health, Nutrition & Physical Activity, Access to Quality Health Care, Local Public Health Services, chronic disease prevention and management programs.

Other organizations: U.S. Department of Health and Human Services, Office of Public Health Services and Office of Minority Health.



#### Funding sources

Federal grants: 0153-0404/0952

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Federal funds	\$88,233	\$80,285	\$91,376
Other funds*	\$22,303	\$13,835	\$39,644
Total funds	\$110,536	\$94,120	\$131,020
FTEs	1.20	1.27	1.05

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Phone: 515-281-3255 nursing.iowa.gov



They are there when you are born, when you are ill, and often, when you die. They are the thousands of dedicated nurses in Iowa who provide care at all stages of life.

Every lowan deserves to be treated by nurses who are competent and licensed to work within their authorized scope of practice. The lowa Board of Nursing ensures all nurses practicing in lowa are qualified and competent. If an individual has a concern, the Board investigates complaints to protect the health of lowans. Eighty-seven percent of complaint investigations are completed within 18 months.

The Iowa Board of Nursing works to make certain all Iowans receive the highest quality of nursing care.

Did you know? There are over 50,000 nurses providing health services in Iowa.



- lowans deserve care from qualified professionals.
- lowans deserve protection from care that does not meet standards, including timely investigations of complaints about nursing practice, and discipline of nurses who are found to have violated the law.

➤ Which Iowa Public Health Goals are we working to achieve?

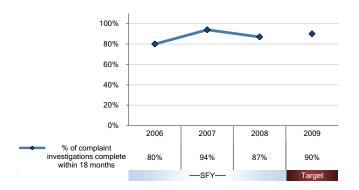
Strengthen the public health infrastructure

- License nurses who meet requirements.
- Approve nursing education programs.
- Approve continuing education providers.
- Promulgate rules and regulations to carry out the mandate of the laws.
- Investigate complaints and monitor disciplined licensees.
- Prosecute nurses whose practice is out of compliance with lowa Code and Iowa Administrative Code.
- Enforce nursing continuing education requirements.
- Maintain licensee records.

Percent of complaint investigations that are completed within 18 months of receiving the complaint.

Data Source: Manual counts. Data are available annually.

How are we doing? During SFY2008, over 87% of complaint investigations were completed within 18 months of receiving a complaint. This percentage has decreased due to one Health Professions Investigator position being vacant and another Health Professions Investigator serving on active military duty.



#### What can you do to help?

- 1. Iowans and employers may contact the Iowa Nursing Board for information regarding discipline history or may retrieve discipline documents through our website nursing.iowa.gov.
- 2. Iowans may report nurses whose practice does not appear to meet minimum qualifications by calling 515-281-3255, emailing enforce@iowa.gov or completing a complaint form at our website nursing.iowa.gov.
- 3. Iowa nurses are required to report other nurses whose practice does not meet minimum standards.



### Others working on similar issues

Other IDPH bureaus, offices, or programs: Dental Board, Board of Medicine, Board of Pharmacy, Professional Licensure.

Other organizations: Nurse licensing boards in other states and internationally.



### Funding sources

Retained fees: K19-2082

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Retained fees	\$1,725,284	\$1,822,918	\$3,000,000
Total funds	\$1,725,284	\$1,822,918	\$3,000,000
FTEs	18.50	19.20	21.50

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Division of Health Promotion & Chronic Disease Prevention

Phone: 515-281-6650

www.idph.state.ia.us/iowansfitforlife www.idph.state.ia.us/nutritionnetwork



Sometimes learning better health habits just means trying something new. After a full day of food tasting classes, a nutrition educator recently went to the grocery store to buy more kiwi fruit for the next day's classes. The store didn't have enough...same story at the next store. Turns out the kids from the classes that day had bought up all the kiwis in town after school!

The IDPH Nutrition and Physical Activity programs help make lowans healthier – and help make it fun!

Did you know? Almost 65% of adult Iowans are overweight or obese, up from 55% in 1995.

# Why is Nutrition and Physical Activity important to promoting and protecting the health of lowans?

 Obesity-related health problems cost lowans \$783 million each year. Medicaid and Medicare cover about 46% of these costs. ■ Which Iowa Public Health Goals are we working to achieve?

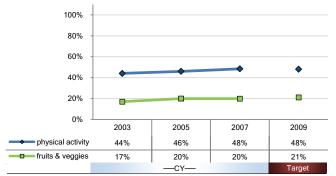
Promote healthy behaviors

- The rate of overweight and obese lowans has dramatically increased among adults, teens, and children.
- Less than 20% of lowans eat fruits and vegetables five or more times per day.
- Only 48% of lowans meet the recommended level of physical activity each day.
- lowans in poverty are more likely to eat less nutritious foods than those with higher incomes. lowans with incomes less than \$15,000 per year are more likely to be obese.
- Physical activity and good nutrition provide a better quality of life for lowans.
- lowans who are physically active and eat good foods are at a decreased risk for overweight and obesity, as well as cardiovascular disease, diabetes, cancer and osteoarthritis.
- Funding from the lowa Nutrition Network is very helpful to community partners who want to create healthier communities, but don't have the money to deliver effective nutrition and physical activity programs.

- Iowans Fit for Life brings state and local partners together to build a network of health partners dedicated to healthy nutrition and physical activity. There are currently more than 500 partners in the network.
- Create and promote effective nutrition and physical activity messages.
- Promote the use of research-proven methods to support changes in behavior.
- Provide funding to Iowa communities from the USDA Food Stamp Nutrition Education, Centers for Disease Control and Prevention, and the state of Iowa. This funding allows over 100 schools and congregate meal locations to provide services.

Percent of Iowa adults...

- eating 5 or more servings of fruits and vegetables per day.
- meeting the recommended level of physical activity.

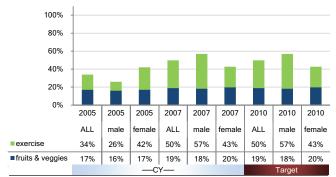


Data Source: Behavioral Risk Factor Surveillance System (BRFSS). Data are available every two years.

How are we doing? lowa's fruit and vegetable consumption is below the national median of 24% and did not meet our 2007 goal. We've revised our 2009 target to reflect slower progress. Only 48% of lowans are getting the recommended physical activity. This is a slight increase from 2005 and meets our 2007 and 2009 targets.

#### Percent of students...

- who ate 5 or more servings of fruits and vegetables per day during the past 7 days.
- who were physically active for a total of 60 minutes or more per day on 5 or more of the past 7 days.



Data Source: Youth Risk Behavior Surveillance System (YRBSS). Data are available every two years.

How are we doing? Overall, 19% of students in grades 9 through 12 ate five or more servings of fruit and vegetables per day during the past seven days. Almost 50% of students were physically active for a total of 60 minutes or more per day on five or more of the past seven days. This is a positive dramatic increase from 34% in 2005.

#### What can you do to help?

- 1. Learn more about healthy eating and physical activity at www.idph.state.ia.us/iowansfitforlife.
- 2. Encourage communities where schools have 50% or more children receiving free and reduced price lunches to apply for nutrition education funding. Go

www.idph.state.ia.us/nutritionnetwork/community\_ba sics.asp for details. Congregate meal, Head Start, and in-home visitation programs (like HOPE or NEST) may qualify for similar funding from the Food Assistance Program.

- 3. Visit the Iowa Hunger website (www.extension.iastate.edu/hunger) to see your county's poverty profile. Advocate for greater access to healthy foods in your community and help solve problems related to lack of access to healthy foods.
- 4. Find out about community programs that encourage healthy eating and physical activity. Go to www.idph.state.ia.us/pickabettersnack.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: WIC, Diabetes Prevention & Control, Heart Disease & Stroke.

Other organizations: Centers for Disease Control and Prevention, Iowa State University Extension, Iowa Department of Education, U.S. Department of Agriculture.



#### **Funding sources**

lowans Fit for Life: general fund, health care trust fund, federal grants, & private grants\*: K07-0751; K09-0953/0955; K29-2901; K30-3001; K56-5665; 0153-0524/0542/0752/0924/0934/0936/0938/0940/0944.

Nutrition Network: intra state receipts\* (Dept of Human Services): 0153-1108

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$60,031	\$914,906	\$962,268
Health care trust	\$176,922	\$182,344	\$143,643
Federal funds	\$393,645	\$949,442	\$1,986,148
Other funds*	\$1,092,086	\$1,131,942	\$1,567,099
Total funds	\$1,722,684	\$3,178,634	\$4,659,158
FTEs	7.99	12.71	13.75

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.

### Occupational Health & Safety Surveillance

Division of Environmental Health Phone: 1-800-972-2026



What if your job involved daily close calls, dangerous situations, and potential death? You might think only James Bond has a job like that. However, many lowans are injured or become ill each year from conditions on their jobs. In 2008, 93 lowans died on the job.

The Occupational Health and Safety Surveillance program protects the health of these lowa workers by tracking, analyzing, investigating, and reporting work-related illness and injuries, work-related deaths, and cases of pesticide poisoning. IDPH can give information to workers to protect themselves from work-related illness, injuries, and fatalities in the future.

Did you know? In 2008, Iowa employers reported 53,700 cases of non-fatal work-related injuries and illnesses.



- In 2008, the rate of work-related injury and illness incidence in Iowa was 5.0 per 100 FTE. An estimated 13,800 cases involved days away from work.
- In 2008, there were 93 occupational fatalities in Iowa.
- In 2008, there were 2,465 reports of pesticide poisoning in lowa.
- lowa was one of 7 states in 2007 with a rate > 20/100,000 adults tested who had blood lead levels greater than or equal to 25 micrograms per deciliter.

Which Iowa Public Health Goals are we working to achieve?

Protect against environmental hazards

Prevent epidemics & the spread of disease

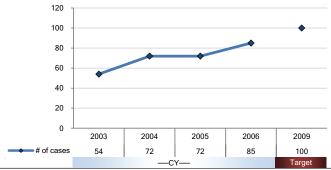
Promote healthy behaviors

Prevent injuries

Strengthen the public health infrastructure

- Carry out surveillance of 13 indicators of occupational safety and health and investigate unusual cases of occupational injury and disease.
- Provide information to the pesticide registration program at the Iowa Department of Agriculture and Land Stewardship (IDALS) so safety labels can be strengthened and more protection can be provided for people who live and work in areas where pesticides are used.
- Create an annual report with information about cases of pesticide poisoning for local health departments and healthcare providers.
- Conduct on-site investigations of fatal accidents so future accidents can be prevented.

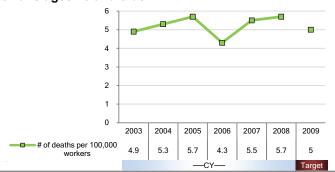
## • Number of cases of definite and probable pesticide poisoning.



Data Source: Pesticide Poisoning Surveillance Database. Data are available annually.

**How are we doing?** Currently, the number of cases is increasing. This reflects improved reporting rather than an actual increase in exposures. After reporting is improved and stable, the number of cases should start to decrease.

#### Number of occupational fatalities per 100,000 employed lowans ages 16 and older.



Data Source: Work-Related Fatal Injuries Program Data and U.S. Department of Labor. Preliminary data are available annually, with a 2-year delay for final data.

**How are we doing?** The rate of fatal workplace injuries decreased from 5.6 deaths per 100,000 workers (87 deaths) in 2000 to lower numbers in 2001-2003. The number increased again in 2008 to 5.7 per 100,000 workers (93 deaths).

### What can you do to help?

- 1. All lowans should be aware of the dangers of pesticides. Report all human pesticide exposures to by calling the lowa Statewide Poison Control Center at 800-972-2026. For more information, go to <a href="https://www.idph.state.ia.us/eh/pesticide">www.idph.state.ia.us/eh/pesticide</a> exposure.asp.
- 2. Adults can be exposed to lead on the job or through hobbies. For more information, go to www.idph.state.ia.us/eh/lead poisoning prevention.asp.
- 3. lowa workplaces should adopt safety practices to prevent fatal injuries. For more information, go to www.public-health.uiowa.edu/face/.

### Others working on similar issues

Other IDPH bureaus, offices, or programs: Iowa Office of the State Medical Examiner, State Office of Rural Health, Bureau of Disability and Violence Prevention, Bureau of Emergency Medical Services, Bureau of Family Health, Bureau of Lead Poisoning Prevention, Bureau of Environmental Health Services.

Other organizations: Iowa Department of Agriculture and Land Stewardship (IDALS), Iowa Center for Agricultural Safety and Health (I-CASH) at University of Iowa, Injury Prevention Research Center (IPRC) at University of Iowa, National Institute for Occupational Safety and Health.

### Funding sources

Federal grant: 0153-1708

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Federal funds	\$281,239	\$289,361	\$274,244
Total funds	\$281,239	\$289,361	\$274,244
FTEs	0.96	1.06	1.75

**Note:** Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.







www.idph.state.ia.us/hpcdp/oral health.asp



Smile! Everyone wants a bright, beautiful smile. But oral health is more than straight, shiny-white teeth. Did you know poor oral health in children can affect speech development? And, that 51 million school hours are lost each year to dental-related illness? Did you know poor oral health in adults has been linked to heart disease? Unfortunately, getting needed dental care is difficult for low-income and uninsured families in lowa. The IDPH Oral Health Bureau programs work to improve the oral health of all lowans, regardless of income.

The Oral Health Bureau (OHB) encourages local public health partners to provide preventive services, like fluoride applications and dental sealants, and to provide education and assist families in making dental appointments. As a result, twice as many Medicaid-enrolled children are receiving dental care than in 2000.

Expanding access to oral health care for all lowans is truly something to smile about.



Did you know? Nearly 95% of Iowa children have health insurance, but only about 81% have insurance for dental care.

#### Why are Oral Health programs important to promoting and protecting the health of lowans?

- Oral health directly affects the health and wellness of all lowans.
- Cavities can be prevented.
- 22% of Iowa third-graders have untreated cavities; one out of every five low-income children has untreated
- Many families don't know about the importance of oral health and know little about proper oral hygiene and preventive care.
- Access to dental care is a major problem for low-income lowa families. For children on Medicaid, 51% go without any dental services at all.
- Early access to preventive dental services saves money! For at-risk children, having fluoride applications as soon as teeth erupt reduces the chance that teeth get decayed and need fillings or crowns. A fluoride application costs just \$14. A small filling costs more than 3 times that.
- lowa's dental workforce is aging and decreasing in number, particularly in rural parts of the state.

#### What do we do?

- Coordinate the I-Smile<sup>™</sup> program, which helps local public health partners promote oral health, provide preventive services, and educate the public about the importance of early and regular oral health care.
- Increase awareness of children's oral health with physicians, nurses, and physician assistants, and train them to provide oral screenings and preventive care for
- Work with local public health partners to help families make appointments and find payment sources for dental
- Provide funding to public health agencies to provide screenings and dental sealants to low-income, uninsured, and underinsured children in grades 2-8.

Which Iowa Public Health Goals are we working to achieve?

Promote healthy behaviors

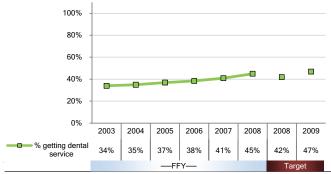
Strengthen the public health infrastructure

- Coordinate oral health surveillance to monitor and track lowans' oral health status and ability to access and pay for
- Oversee the school dental screening requirement for children newly enrolling in elementary and high school.
- Track services provided by dental hygienists working under public health supervision, to assure limited services are provided to underserved families.





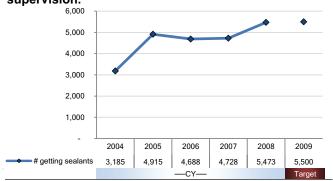
#### • Percent of Medicaid-enrolled children ages 1-5 who get a dental service.



Data Source: Centers for Medicare & Medicaid Services (CMS) Form 4.16. Data are available annually.

How are we doing? Gains have been seen annually. Since 2006, I-Smile™ is helping us achieve a larger annual increase.

#### Number of children ages 0-20 getting dental sealants from hygienists practicing under public health supervision.



Data Source: IDPH Public Health Supervision year-end reports. Data are available annually.

How are we doing? Public health supervision has been allowed since 2004, with gains in the number of children served each year.

#### What can you do to help?

- 1. Learn about the importance of good oral health and how to keep your mouth healthy.
- 2. Use the Oral Health Bureau as a trusted source for oral health information and policy development.
- 3. Encourage sufficient funding for the Oral Health Bureau to help the success of its programs.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: WIC. Maternal Health, Child Health, Health Care Access, Early Childhood, Covering Kids & Families/hawk-i Outreach, Tobacco Use Prevention & Control, Professional Licensure, Local Public Health Services, Multicultural Health, Healthy Communities, Acute Disease Epidemiology.

Other organizations: University of Iowa College of Dentistry, Delta Dental of Iowa Foundation, Iowa Dental Association, Iowa Dental Hygienists' Association, Iowa Head Start Association, Iowa Department of Human Services, Iowa-Nebraska Primary Care Association. Iowa Rural Health and Primary Care Advisory Council, University of Northern Iowa Center on Health Disparities, Iowa Prevention of Disabilities Policy Council, Iowa Public Health Association.



#### Funding sources

General fund, health care trust fund, federal funds, federal recovery & reinvestment (FRR) funds, intra state receipts\* (Dept of Human Services), & private grants\*. State funds are used for a 25% match for the Title V Maternal & Child Health Block Grant: K05-0503/0561; K56-5663; 0153-0502/0520/0528/1110

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$390,399	\$389,806	\$188,416
Health care trust	\$29,492	\$48,508	\$0
Federal funds	\$604,523	\$686,057	\$631,287
FRR	\$0	\$0	\$97,000
Other funds*	\$1,534,014	\$2,018,052	\$1,947,702
Total funds	\$2,558,428	\$3,142,423	\$3,052,820
FTEs	8.12	8.28	8.25

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Phone: 515-281-5944 www.state.ia.us/ibpe



A doctor may write the prescription to cure what ails you, but it's up to your local pharmacist to fill that prescription to the exact specifications of the physician. Pharmacists play a critical role in protecting the health of lowans. The lowa Board of Pharmacy assures the public that only qualified, competent pharmacists practice in lowa.

The lowa Board of Pharmacy strives to issue licenses and registrations quickly and efficiently. In addition, the Board receives and investigates complaints from lowans, and when necessary, disciplines pharmacists who have broken the law.

With more than 3,000 licensed pharmacists in Iowa, the Board of Pharmacy works to ensure each provides quality health services to Iowans.

Did you know? There are over 3,000 licensed pharmacists in Iowa.

# Why is the lowa Board of Pharmacy important to promoting and protecting the health of lowans?

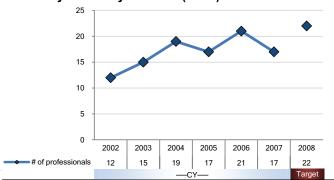
- The lowa Board of Pharmacy licenses pharmacists to ensure lowans receive competent, qualified care.
- The lowa Board of Pharmacy helps pharmacists who are battling addiction. Research shows that monitoring programs for impaired pharmacists are highly effective in reducing relapse.
- ➤ Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

• Licensure is an effective way to keep untrained and unethical individuals from practicing pharmacy in Iowa.

- License health professionals.
- Investigate complaints about health professionals.
- Discipline health professionals who have broken the law.
- Provide licensure and discipline data to the public, employers, and credentialers.
- Monitor disciplined and impaired health professionals so they can return to practice as soon as it is safe to do so.
- Speak to professional groups, students, and the public.

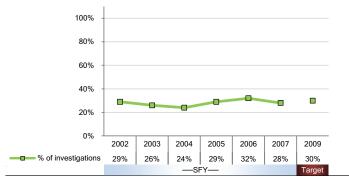
#### • Number of professionals participating in the lowa Pharmacy Recovery Network (IPRN).



Data Source: Manual counts. Data are available annually.

How are we doing? Participation in the IPRN is increasing. The trend is somewhat deceiving because the number of professionals who have successfully completed their contract terms and are thus dropping from the participant count is greater than the number of professionals who are entering the program.

#### **9** Percent of investigations resulting in formal discipline.



Data Source: Board database. Data are available annually.

How are we doing? The percentage of investigations resulting in formal discipline is steady at about 30%.

#### What can you do to help?

- 1. All lowans can contact the lowa Board of Pharmacy to verify that a pharmacist license is in good standing. For information, call 515-281-5944 or check the Board's online verifications at www.state.ia.us/ibpe/verification.html.
- 2. Health professionals can learn about ethics and rules.
- 3. Health professionals and their employers can go to www.iowarecovery.org to learn how to use the programs created to help impaired or potentially impaired professionals.

#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Dental Board, Board of Medicine, Board of Nursing, Professional Licensure.

Other organizations: Other states' boards, National Association of Boards of Pharmacy.

### Funding sources

Retained fees: K19-2092

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Retained fees	\$1,647,479	\$1,568,651	\$3,469,230
Total funds	\$1,647,479	\$1,568,651	\$3,469,230
FTEs	14.05	13.98	15.00

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.



Division of Environmental Health Phone: 1-800-222-1222 www.iowapoison.org





It's red, it tastes sweet, and the bottle has a smiling face on the label. To a child, it looks like fruit juice. Yum! But it's not. That red, sweet liquid is cough syrup and when taken incorrectly, it's poisonous. The lowa Statewide Poison Control Center (ISPCC) works to reduce illness and death from poisonings with its statewide round-theclock poison hotline. lowans need trusted information about poisons so they can get quick and correct advice about treatment. The Poison Control Center provides just that.

Besides the obvious life-saving information the Statewide Poison Control Center provides, it also serves a costsaving purpose. By giving parents and caregivers accurate information, unnecessary and costly emergency room visits and ambulance runs can be avoided. 75% of calls to ISPCC can be safely handled entirely by phone!

Did you know? In FY08, over 23,000 calls to the Iowa Statewide Poison Control Center were safely managed at home. That equals a healthcare savings of over \$7.3 million!

#### Why is the Poison Control Center important to promoting and protecting the health of lowans?

- Thousands of lowans are exposed to poisons each year. In FY2008, the Poison Control Center received 52,168 calls. Nearly 32,000 of those calls were human
- People of all ages are at risk of exposure to poisons. 52% of lowans being exposed to poisons are children.
- Poisonings rank as the 19<sup>th</sup> leading cause of death in
- A single phone contact is needed so lowans can get fast and correct information about treatment of possible poisoning.

Which lowa Public Health Goals are we working to achieve?

Prevent injuries

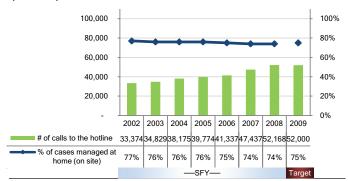
Protect against environmental hazards

Prepare for, respond to, & recover from public health emergencies

- The Poison Control Center can help prevent the use of outdated or harmful home remedies for poisonings.
- Every \$1 invested in the Poison Control Center saves nearly \$9 in medical spending.
- Poison centers eliminate unnecessary trips to the emergency department or doctor.

- Provide emergency poison information and advice 24 hours a day, 7 days per week.
- Provide reliable medical information for healthcare providers and the public.
- Doctors who specialize in poisons are available roundthe-clock for healthcare providers across the state.
- Promote poison prevention and awareness to all ages through education programs, media campaigns, the poison center Web site (<u>www.iowapoison.org</u>), and poison prevention brochures.
- Offer professional education to nurses, pharmacists, EMS personnel, and other healthcare providers.

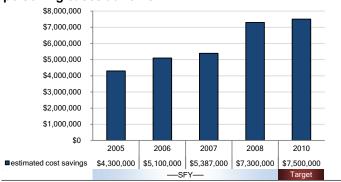
- Number of calls to the emergency hotline.
- Percent of poisoning cases safely managed at home (on site).



Data Source: Evaluation of call logs. Data are available annually.

How are we doing? Call volume has increased 56% since SFY2002, with very little increase in staffing. Three out of four poisoning cases can be safely managed at home. This is the primary economic benefit of the Poison Center, saving millions of dollars in unnecessary health care costs. It also allows more efficient and effective use of limited health care resources. Acuity has risen over the years because a board-certified physician toxicologist was hired in 2002.

#### S Estimated cost savings to low by safely managing poisoning cases at home.



Data Source: Evaluation of call logs. Data are available annually.

How are we doing? In FY08, over 23,000 children and adults were safely managed at home resulting in a net savings to Iowa's health care system of \$7.3 million. This is a 70% increase in savings compared to FY05.



#### What can you do to help?

- 1. All lowans need to be aware of and use, if needed, the emergency hotline for the lowa Statewide Poison Control Center. Call 1-800-222-1222.
- 2. Healthcare professionals need to use the Iowa Statewide Poison Control Center. Go to www.iowapoison.org to learn more.
- 3. All lowans need to be aware of potential poisons in their homes and how they can keep themselves and their children safe. To learn more, visit www.iowapoison.org.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Acute Disease Epidemiology, Lead Poisoning Prevention, Occupational Injury, Illness, & Death Surveillance.

Other organizations: American Association of Poison Control Centers, Agency for Toxic Substances on Disease Registry (ATSDR), National Toxicology Program (NTP).



#### Funding sources

General fund, tobacco fund, & federal recovery & reinvestment (FRR) funds: K19-1911; K92-9210

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$0	\$0	\$539,467
Tobacco funds	\$600,000	\$600,000	\$0
FRR funds	\$0	\$0	\$50,000
Total funds	\$600,000	\$600,000	\$589,467
FTEs	0.00	0.00	0.00

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Division of Acute Disease Prevention & Emergency Response Phone: TB - 515-281-7504 STD - 515-281-4936 www.idph.state.ia.us/adper/disease prevention immunization.asp



If money is tight, it can be difficult to pay for a trip to the doctor. But what if you are diagnosed with a disease that requires expensive medications? How will you pay for that, too? The Prescription Services program is there to help, providing free treatment for lowans with an STD or with TB infection or disease.

By treating 2000 lowans a year for latent TB infection, approximately 200 infectious cases of TB are avoided each year. The program also provides treatment for about 7,000 Chlamydia cases per year at a cost of \$1.81 per lowan. For lowans not treated soon enough, 10% will develop a serious complication called Pelvic Inflammatory Disease, costing at least \$1,167 per patient to treat.

Proper treatment prevents exposing others to diseases and their complications. The Prescription Services program provides treatment free of charge because going without treatment can be much more costly.



Did you know? Each year, this program provides medication to treat more than 20,000 Iowans for sexually transmitted diseases and TB infection and disease.

#### Why are Prescription Services important to promoting and protecting the health of lowans?

- TB disease remains a public health problem in Iowa with an average of 44 new cases reported every year. Many lowans are infected by TB, but haven't developed symptoms (latent TB infection or LTBI) and will need antibiotics to prevent them from getting the disease. About 150,000 lowans are currently infected
- Which Iowa Public Health Goals are we working to achieve?

Prevent epidemics & the spread of disease

Strengthen the public health infrastructure

- More than half of all Iowans will have an STD sometime in their life.
- Children and young adults are particularly at risk for STDs. In 2008, 74% of reported Chlamydia cases were among 15 to 24 year olds.
- Untreated STDs can lead to serious, even life-threatening complications.
- Early treatment saves money! For example, treating someone with a latent TB infection costs about \$15. Treating someone who has developed TB disease costs \$2,000.

#### What do we do?

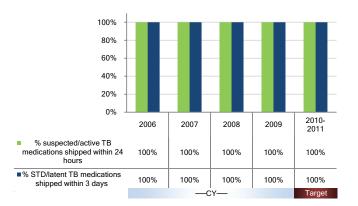
- Provide treatment for 2,000 lowans with LTBI or TB disease each year.
- Provide treatment for more than 15,000 lowans infected or exposed to chlamydial infection, gonorrhea, and syphilis each year.
- Ensure medications for active and suspected cases of TB are shipped within 24 hours of the prescription being written.
- Ensure medications for STD and LTBI are sent within three working days of the prescription being issued.
- Federal STD and TB grant funds cannot be used to buy medications for treating STD and TB patients. The Prescription Services program pays for medications that federal funds won't cover.

#### Page 102

- Percent of STD and latent TB infection medications shipped within three working days of the prescription request.
- Percent of medications for suspected/active cases of TB disease shipped within 24 hours of the prescription request.

Data Source: Contract pharmacy database. Data are available monthly.

How are we doing? 100% of medications are shipped within the desired timeframe.



### What can you do to help?

- 1. lowans of all ages should use safer sex practices, such as choosing one partner and knowing them well, regularly and correctly using latex condoms, or refraining from sex completely.
- 2. Iowans at risk of getting an STD should be tested, and if necessary, treated for STDs. To learn what puts you at risk of getting an STD, go to www.idph.state.ia.us/adper/std control.asp.
- 3. Maintain a healthy lifestyle, especially when visiting countries where TB is common.
- 4. Health care professionals need to know about the availability and benefits of the program. Lack of awareness adversely affects lowans who have no insurance or are underinsured.
- 5. Advocate for an increase in funding to continue these services. The rising costs of medication and no increases in program funding means fewer lowans can be served each year.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: HIV/AIDS & Viral Hepatitis, Tuberculosis (TB) Control, STD Prevention.

Other organizations: local health departments, lowar Department of Corrections, Iowa Department of Human Services, juvenile detention centers, family planning clinics, Planned Parenthood clinics.



#### Funding sources

General fund appropriation and federal recovery & reinvestment (FRR) funds: K15-1541

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$147,357	\$142,997	\$118,408
FRR funds	\$0	\$0	\$23,600
Total funds	\$147,357	\$142,997	\$142,008
FTEs	0.00	0.00	0.00

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.









When you go to a health provider, you expect a certain level of knowledge, competency, and ethical standards. In other words, you expect someone who knows what they're doing, and who does it in a courteous, professional manner. The IDPH Bureau of Professional Licensure works to protect the public and improve access to quality health services by licensing qualified professionals.

The Bureau of Professional Licensure also strives to make the process of licensing more convenient for professionals. Online license renewal and e-payment services have begun, with the goal of a modernized Webbased program that will allow license renewal in real time from any location.

The Bureau of Professional Licensure works to help ensure consistency and quality in lowa health services.



Did you know? You can verify the licensure status of any person or business regulated by the Bureau of Professional Licensure by name or license number. Go to www.licensediniowa.gov.

#### Why is Professional Licensure important to promoting and protecting the health of lowans?

- Thousands of lowans rely on the 44,000 professionals and 6,000 businesses regulated by Professional Licensure.
- All lowans benefit when health care is provided by competent, ethical professionals who hold active licenses.
- ▶ Which Iowa Public Health Goals are we working to achieve?
- Strengthen the public health infrastructure
- Open records and open meetings let the public have input into licensure requirements, rulemaking, continuing education, and discipline of licensees and businesses.
- Licensure boards are made up of professionals and public members who make sure licensure standards are safe, effective, and clearly communicated to the public.

#### What do we do?

- Process applications for initial licensure, license renewal, and reactivation of licenses.
- Coordinate, and in some cases, conduct examinations for licensure.
- Determine eligibility for licensee participation in the Volunteer Health Provider Program.
- Address all complaints and implement discipline at the licensing board's direction.
- Provide executive support to 19 licensure boards and direct services to licensees practicing in Iowa in the following professional categories:

Athletic Training Barbering **Behavioral Science** Chiropractic Optometry

Cosmetology Arts & Sciences

**Dietetics** 

Hearing Aid Dispensing

Massage Therapy Mortuary Science

**Nursing Home Administrators** 

Physician Assistants

Physical & Occupational Therapy

**Podiatry** Psychology

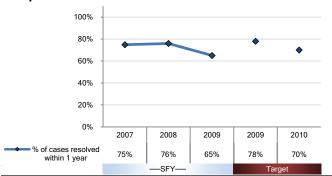
Respiratory Care Practitioners

Sign Language Interpreters & Transliterators

Speech Pathology & Audiology

Social Work

#### • Percent of cases resolved within one year of receiving a complaint.

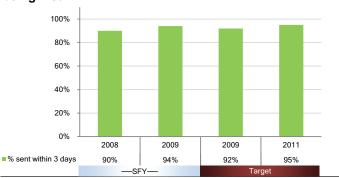


Data Source: Bureau database. Data are available monthly.

How are we doing? The boards respond to 100% of signed complaints. Following board review, some cases are referred for investigation to the Iowa Department of Inspections and Appeals. The overall number of investigations remains relatively constant. Resolution of a case within one year is related to the complexity of the complaint and the availability of evidence to make an informed decision.

In SFY09, the 19 boards received 415 complaints. Of these cases, 274 (66%) were resolved within one year. From July 2008 to June 2009, 213 cases were submitted for investigation and 202 investigations were completed.

#### Percent of licenses and certificates mailed to applicants within three working days of eligibility requirements being met.



Data Source: Bureau database. Data are available daily.

How are we doing? The Bureau prints renewal notices and licenses in-house. Licensure fees are processed and documented daily.

Between July 2008 and June 2009, the Bureau mailed 23,595 renewal notices to licensees 60 days before license expiration informing them of the online license renewal system. During this time, the Bureau printed and mailed 22,177 licenses and wallet cards. Printing is done within 1 working day and mailing is done within 3 working days.



#### What can you do to help?

- 1. Iowans are encouraged to report incompetent or unethical practice. Contact the board office by telephone at 515-281-0254 or submit a complaint online at www.idph.state.ia.us/licensure.
- 2. Professional organizations can inform the professional boards about current and emerging
- 3. Educators can attend open meetings to share new teaching methods and trends with the boards.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Acute Disease Epidemiology; Communication & Planning; Disaster Operations & Response; Health Care Access; Health Statistics; Iowa Boards of Medicine, Nursing, Pharmacy, & Dentistry; Local Public Health Services; Substance Abuse & Gambling Treatment Programs Regulation.

Other organizations: Iowa Departments of Human Services, Elder Affairs, and Human Rights; state and national professional organizations that advocate for the 39 categories of professionals licensed by the Bureau.



#### Funding sources

Retained fees: K19-2054

	FY2007 Actual	FY2008 Actual	FY2009 Estimate
Retained fees	\$1,738,628	\$1,943,150	\$2,219,420
Total funds	\$1,739,628	\$1,943,150	\$2,219,420
FTEs	15.99	15.96	17.00

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.







You can't see, smell, hear, or feel it. It can save lives, but also endanger lives. The use of radiation must be carefully monitored. The IDPH Bureau of Radiological Health protects lowans from unnecessary and potentially harmful exposure to radiation.

The machines that produce radiation (like x-ray or mammography machines) and the people who use them are tested and certified to ensure lowans are being treated by qualified professionals with safe equipment.

You've probably heard of radon – a naturally occurring gas that seeps into homes and can cause lung cancer. The Bureau of Radiological Health licenses experts who can stop radon from getting into a home. IDPH works each day to protect the health of lowans – even when the "enemy" is invisible!

Did you know? Iowa has one of the highest rates of indoor radon in the country. Radon is the 2<sup>nd</sup> leading cause of lung cancer behind smoking and the leading cause for those who have never smoked.

#### Why is Radiological Health important to promoting and protecting the health of lowans?

- Exposure to radiation in large amounts can cause immediate and long-term health effects, including cancer and death.
- lowans could be exposed to radiation at any time each day because of the common use of industrial and medical radioactive materials and machines.
- Radiation occurs naturally in the environment; however, anything beyond this natural exposure may be unnecessary and could be harmful.
- lowa has one of the highest rates of indoor radon levels in the country.
- High quality mammography machines and images are essential to finding breast cancer early.
- lowans of all ages are at risk for over-exposure from tanning beds.

#### Which Iowa Public Health Goals are we working to achieve?

Protect against environmental hazards

Strengthen the public health infrastructure

Prepare for, respond to, & recover from public health emergencies

Promote healthy behaviors

- Inspect, test, accredit, and certify mammography facilities, machines, radiologists, and technologists.
- Provide training, testing, and continuing education to medical professionals and issue Permits to Practice.
- Coordinate radiation emergency response by working with local, county, state, and federal agencies in case of an accident.
- License and inspect facilities that use radioactive materials.
- · Educate lowans about radon gas and credential radon measurement and mitigation specialists.
- Register tanning bed facilities and post health information about the risks of tanning.
- Register, investigate, and inspect X-ray machines.

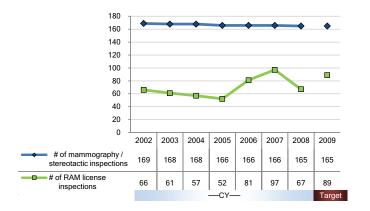
• Number of inspections of mammography and stereotactic facilities.

Data Source: Mammography database. Data are available annually.

Number of radioactive material (RAM) licenses

Data Source: RAM database. Data are available annually.

How are we doing? Consistent with number of licenses and percent of inspections based on rotation rules.



### What can you do to help?

- 1. All lowans can make themselves aware of the possibility of exposure to radiation, especially from medical procedures.
- 2. All lowans can report any misuse of radioactive materials by contacting the Bureau of Radiological Health at 515-281-3478 or mrasmuss@idph.state.ia.us.
- 3. All lowans should learn about radon gas and how to test for it in their homes. For more information about radon, visit www.idph.state.ia.us/eh/radon.asp.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Professional Licensure Boards, Disaster Operations & Response.

Other organizations: Nuclear Regulatory Commission, Environmental Protection Agency, Food and Drug Administration, Homeland Security, FEMA, HazMat teams, local and state law enforcement, county officials.



#### Funding sources

Federal grant, intra state receipts\* (Dept of Public Defense), private grant\*, & retained fees\*: K19-1915/1920; 0153-1922/1926

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Federal funds	\$252,843	\$226,073	\$260,684
Other funds*	\$1,150,747	\$1,124,296	\$2,436,047
Total funds	\$1,403,590	\$1,350,369	\$2,696,731
FTEs	13.52	12.35	13.50

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.

Iowa Department of Public Health ♦ Division of Environmental Health ♦ Radiological Health Phone: 515-281-3478 ♦ Fax: 515-281-4529 ♦ www.idph.state.ia.us/eh/radiological\_health.asp 5th Floor, Lucas Building ♦ 321 E. 12th Street ♦ Des Moines, IA 50319-0075

Mammography - Phone: 515-281-0405

Radioactive Materials - Phone: 515-281-0419

Tanning Facilities – Phone: 515-281-0415

Permits to Practice - Phone: 515-281-0415

**Radon** – Phone: 1-800-383-5992 or 515-281-4928

X-Ray Machines - Phone: 515-281-0415

Radiation Emergency Response - Phone: 515-281-3478





Division of Health Promotion & Chronic Disease Prevention

Phone: 515-281-7223

www.idph.state.ia.us/hpcdp/health care access.asp



If you watch a high-wire circus act closely, you'll notice that not only do the performers have a cable attached from the wire to their body, but there's also a safety net below. If the performer falls and the cable malfunctions, the safety net is there to protect the performer. That's a lot like the way the IDPH Safety Net Services work. They "catch" lowans in danger of falling through the health care system.

By focusing on community health centers, IDPH Safety Net Services are able to reach more than 130,000 lowans who would otherwise lack access to health care because of where they live, cultural differences, or having little or no health insurance. lowa has 13 community health centers across the state.

Good health should not be a tightrope walk for any lowan. The IDPH Safety Net Services provide the assurance of access and care.



Did you know? Nearly half (45%) of all Iowans live in rural areas where the population to provider ratio is twice as high as in urban areas. The disparity in the number of providers makes it difficult to get health care quickly, especially in case of an emergency.

### Why are Safety Net Services important to promoting and protecting the health of lowans?

- All lowans need to be able to get health care within a reasonable time, using primary care services in a timely fashion to prevent more serious health consequences
- and reduce unnecessary emergency room visits.
  Census figures show lowa ranks 47<sup>th</sup> in the nation in the number of psychiatrists and 46<sup>th</sup> in the nation in the number of psychologists. 84 of lowa's 99 counties are designated as Mental Health Professional Shortage Areas.
- Safety Net Services increase access to qualified health professionals and to quality health services for underserved and uninsured lowans. Safety Net Services, such as community health centers, provide needed comprehensive health care services to all lowans, regardless of ability to pay.
- Free clinics in Iowa are unable to recruit enough professionals to provide free services due to the lack of professional insurance coverage. The Volunteer Health Care Provider program (VHCPP) offers insurance coverage to volunteer health care providers. VHCPP free clinics have served more than 30,000 lowans to date.

# What do we do?

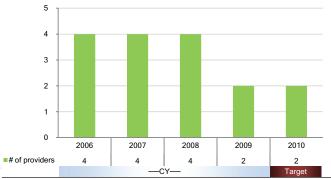
- Provide funding and contract management for a Safety Net Provider Network.
- Provide funding and contract management for the evaluation of the Safety Net Provider Network.
- Recruit physician assistants and advanced registered nurse practitioners to participate in a postgraduate medical training program so they can provide services in lowa's mental health shortage areas.
- Expand Web-based curriculum opportunities so the number of qualified mental health providers can be increased.
- Create a web of services to provide preventive health care, disease management, coordinated care, and comprehensive medical care.
- Provide insurance to health care professionals and free clinics through the Volunteer Health Care Provider program. Currently, more than 500 professionals are enrolled in the program.



▶ Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

#### • Number of advance level health care providers in postgraduate mental health training.

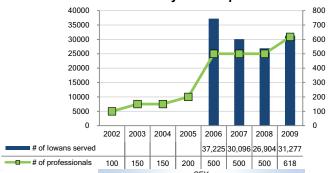


Data Source: Contracts executed. Data are available annually.

How are we doing? Two health care providers are in training and 24 nurses have been supported in obtaining advanced level mental health training. Depending on funding, 2 post graduate mental health trainees are forecasted to complete training and 20 additional nurses are forecasted to obtain advanced mental health training by 2011.

#### Number of providers enrolled in the Volunteer Health Care Provider Program (VHCPP).

#### Number of Iowans served by VHCPP professionals.



Data Source: Program database & clinic reports. Data are available annually.

How are we doing? New professions have been added each year, steadily increasing the number of participating providers. Information on the number of lowans served is unavailable before FY06 due to inconsistent reporting and no funding for IDPH staffing to work with the VHCPP.

# What can you do to help?

- 1. If you or someone you know needs health care services, go to http://ask.hrsa.gov/pc/ to find the health center nearest you.
- 2. Health professionals interested in participating in the IDPH Safety Net Services should call 515-281-7223 for more information.
- 3. All lowans can advocate for continued funding for advance level health care providers to receive postgraduate mental health training.
- 4. All lowans can volunteer to help free clinics with grant-writing, fundraising, and any general tasks needed to run the clinic.
- 5. Health care professionals wanting to volunteer at free clinics can visit the VHCPP Web site at www.idph.state.ia.us/hpcdp/volunteer healthcare pr ovider\_program.asp.

### Others working on similar issues

Other IDPH bureaus, offices, or programs: Access to Quality Health Services, Health Workforce.

Other organizations: Health Resources and Services Administration (HRSA), National Rural Recruitment and Retention Network (3Rnet).

#### Funding sources

General fund, health care trust fund, & intra state receipts\* (Dept of Human Services): K09-0965/0967; K60-6061/6067; 0153-0918

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$299,645	\$284,962	\$290,981
Health care trust	\$2,184,614	\$2,228,386	\$1,811,787
Other funds*	\$0	\$0	\$20,000
Total funds	\$2,484,259	\$2,513,348	\$2,122,768
FTEs	0.51	0.61	0.85

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.

lowa Department of Public Health ♦ Division of Health Promotion & Chronic Disease Prevention ♦ Safety Net Services Phone: 515-281-7223 Fax: 515-242-6384 www.idph.state.ia.us/hpcdp/health\_care\_access.asp 4th Floor, Lucas Building ♦ 321 E. 12th Street ♦ Des Moines, IA 50319-0075

Volunteer Health Care Provider Program

Phone: 515-242-6522 ♦ Fax: 515-242-6384 ♦ www.idph.state.ia.us/hpcdp/volunteer\_healthcare\_provider\_program.asp



Division of Acute Disease Prevention & Emergency Response Phone: 515-281-3031

www.idph.state.ia.us/adper/std control.asp





The symptoms are often invisible. Without early testing and treatment, complications can include Pelvic Inflammatory Disease (PID), chronic pelvic pain, tubal pregnancy, infertility, infecting an infant during childbirth, increased risk for HIV infection, and even death. Sexually transmitted diseases are a significant health threat in Iowa, with more than 11,000 STD infections diagnosed and treated in 2008. The Sexually Transmitted Disease (STD) Prevention program works to stop the spread of STDs in Iowa through reducing the number of Iowans who are infected without knowing they are infected, and providing treatment for those who are infected.

One of the best ways to find undetected STD infection is to screen patients during annual exams and to find, test, and treat the partners of people who are positive. The STD Program maintains a screening collaborative with 68 public clinics across lowa targeting those most at risk for adverse outcomes of undetected infection. In both the public and private sectors, the STD Program offers technical assistance for sexual health program development, promotes clinician/patient dialogue about STD prevention, and ensures proper testing and treatment of exposed partners.

Did you know? About 70% of reported Chlamydia and gonorrhea infections are found in young Iowans who are 15 to 24 years of age.

### Why is STD Prevention important to promoting and protecting the health of lowans?

- STD cases have increased steadily over the last ten years. The increase is due to widespread STD infections, more accurate tests to detect infection. strong public health investigation practices, and effective targeting of at-risk populations.
- In more than half of STD infections like Chlamydia, gonorrhea, and certain stages of syphilis, the symptoms are invisible, yet there can be internal damage that is irreversible.
- National studies suggest that every dollar spent on STD education and prevention saves an estimated \$43 on complications that can lead to hospitalization, surgery, infertility, and death.

► Which Iowa Public Health Goals are we working to achieve?

Prevent epidemics & the spread of disease

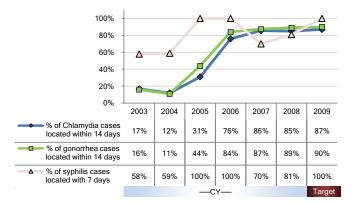
Strengthen the public health infrastructure

Promote healthy behaviors

- Provide funding for testing supplies and patient and provider education at 68 STD testing sites across Iowa.
- Offer confidential partner notification and counseling statewide to inform persons who might not otherwise know they have been exposed to an STD.
- Provide treatment medications to lowans with STDs to stop the spread of disease.
- Monitor the number of reportable STD cases and types of risk behaviors, so that appropriate educational programs and community outreach can occur.
- · Offer technical assistance to clinics, hospitals, and laboratories to ensure correct identification, treatment, and follow-up care of STD patients.
- · Identify and contain STD outbreaks to prevent further spread of infection.
- Develop and enforce legislation, rules, and policies to address emerging trends in STD infection transmission.

- Percent of all reported infectious cases of syphilis located by state and local disease prevention specialists (DPS) within seven working days.
- Percent of all reported cases of gonorrhea located by state and local DPS within 14 working days.
- Percent of all priority\*\* cases of Chlamydia located by state and local DPS within 14 working days.

Data Source: CDC software program - STD\*MIS. Data are available monthly and sent to state DPS and local health department clinic supervisors.



\*\* Due to the high volume of Chlamydia cases, not all are located. Priority cases include those under age 18, pregnant, seen in an E.R., coinfected with another STD, and/or not treated by the provider.

How are we doing? Better collaboration with medical providers and laboratories, combined with better use of the Internet to locate persons in need of services, allowed for improvements in the number of persons with syphilis located within 7 days. The ability to find persons with gonorrhea continues to improve for the same reasons. A steady increase in the number of Chlamydia cases, coupled with a decrease in resources to investigate these cases, have prompted the STD Program to assign only certain priority cases to public health investigators for follow-up.

# What can you do to help?

- 1. Promote accurate and comprehensive sexual education for youth. Sharing correct and complete information with those most at risk for infection will help those persons make different decisions about the behaviors that put them at risk.
- 2. Iowans of all ages should use safer sex practices, such as choosing only one partner and knowing them well, regularly and correctly using latex condoms, or refraining from sex completely.
- 3. Iowans at risk of getting an STD should be tested, and, if necessary, treated for STDs. To learn what puts you at risk for an STD, go to www.idph.state.ia.us/adper/std control.asp.
- 4. Health care providers, correctional systems, and educational systems should contact the IDPH STD Prevention Program at 515-281-3031 to get information about STD prevention.

#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Acute Disease Epidemiology, HIV/AIDS/Hepatitis, Tuberculosis (TB) Control, Substance Abuse Prevention and Treatment.

Other organizations: World Health Organization, Centers for Disease Control and Prevention (CDC), Kaiser Foundation, American Social Health Association, local health departments, and hospitals.

# Funding sources

General fund & federal grants; State funds are used for a 75% match for the Title V Block Grant: K15-1563; 0153-1564/1566

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$68,282	\$68,141	\$68,197
Federal funds	\$788,511	\$772,280	\$761,748
Total funds	\$856,793	\$840,421	\$829,945
FTEs	3.51	3.42	3.50

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Division of Health promotion & Chronic Disease Prevention Phone: 515-281-7613

www.idph.state.ia.us/hpcdp/family health.asp



"John and Nancy" were devastated when their infant son died of SIDS. The entire family was in shock for weeks. Thankfully, they would never know that the lowa Department of Public Health was working behind the scenes to prevent well-baby health reminders from being mailed to them after their baby's death.

The State Systems Development Initiative (SSDI) provides funding for a statewide data infrastructure to support comprehensive, community-based systems of care for Iowa's children. An important SSDI data integration feature provides child death information quickly to multiple data systems. Through this data integration effort, parents like John and Nancy are spared the heartache of receiving well-baby health reminders after their baby has died.

Did you know? Every month IDPH and its contractors send thousands of reminder letters to Iowa families about public health issues like immunizations and lead screenings.

#### Why is the State Systems Development Initiative important to promoting and protecting the health of lowans?

- lowa's maternal and child health (MCH) data systems must work together to provide the data that programs need. Iowa's SSDI project focuses on the state's ability to provide the MCH programs with policy and program relevant information and data.
- Public health professionals need to continuously develop the capacity to use data in making program decisions.
- A strong system-level data capacity is important to support the development of systems of care at the community level.

# ► Which Iowa Public Health Goals are we working to achieve?

Promote healthy behaviors

Prevent epidemics & the spread of disease

Strengthen the public health infrastructure

- Provide funding for the development, implementation, and analysis of the Iowa Child and Family Household Health Survey, a population-based survey used by state and local public health programs.
- Evaluate the ability of lowa's key maternal and child health data systems to provide the statewide program and local contract agencies with policy and program relevant information and data.
- Foster a collaborative inter-bureau culture within IDPH that allows several bureaus to work together on collecting, integrating, analyzing, and disseminating maternal and child health data. The collaborative interbureau culture is nurtured through regular interaction with long-term SSDI work groups.
- Strengthen lowa's maternal and child health infrastructure through increased capacity of the data workforce to meet data system development, maintenance, and integration needs.

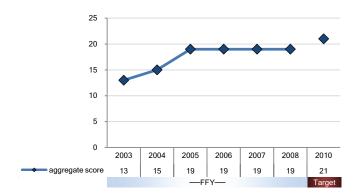
• Title V Health Systems Capacity Indicator #9(A): the ability of States to assure that the MCH program and Title V agency have access to policy and program relevant information and data.

Data Source: Iowa's annual Title V application to the US Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). Data are available annually when lowa's application is posted to the MCHB Web site www.mchb.hrsa.gov/.

How are we doing? Each year, Title V Health Systems Capacity Indicator #9(A) is scored on seven components. Each component is scored 1, 2, or 3 with 3 being the most positive score. The highest possible aggregate score is 21.



- 1. Linkage of infant birth/death records
- 2. Linkage of birth records & Medicaid claims files
- 3. Linkage of birth records & WIC files
- 4. Linkage of birth records & newborn screening files



- 5. Hospital discharge surveys
- 6. Birth defects surveillance
- 7. Survey of recent mothers.



### What can you do to help?

Public health professionals can

- 1. Use existing data available from state and national sources to guide policy development and program management.
- 2. Advocate that state and national data sources provide new data when you need it for decision-
- 3. Work with IDPH to form a strong state-local collaboration in determining and addressing data needs.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Health Statistics.

Other organizations: Health Services and Resources Administration (HRSA), National Center for Health Statistics, Public Health Informatics Institute.



### Funding sources

Federal grant: 0153-0684

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Federal funds	\$85,061	\$119,887	\$79,405
Total funds	\$85,061	\$119,887	\$79,405
FTEs	0.49	0.66	0.50

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.



# **Substance Abuse & Gambling Treatment Programs Regulation**

Division of Behavioral Health Phone: 515-242-6161 www.idph.state.ia.us/bh/admin regulation.asp Promoting & Protecting the Health of Iowans



The decision to seek help for substance abuse or problem gambling can be difficult. Finding a licensed and qualified treatment program should not be. The department's Bureau of Administration, Regulation, and Licensure licenses substance abuse and problem gambling programs to help ensure lowans receive quality treatment.

Did you know? Iowa currently has more than 100 licensed substance abuse treatment programs, with services available to residents of every county. The department funds nine licensed problem gambling treatment programs that provide services statewide.

### Why is regulating Substance Abuse & Gambling Treatment Programs important to promoting and protecting the health of lowans?

- Addiction to substances and problem gambling affect the health, family relationships, and employment of too many lowans. Addiction sometimes leads to problems with the law.
- Substance abuse and problem gambling impact all lowans. Each year, more than 60,000 lowans contact an addictions professional for help and 42,000 are admitted to some level of treatment.
- Iowa has experienced an epidemic of methamphetamine abuse. Nearly 4000 Iowans entered treatment because of meth use in 2009.
- Alcohol continues to be the most abuse substance for lowans. Marijuana is the second most common drug of abuse.
- lowa law requires licensing of substance abuse and gambling treatment programs.

# ► Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

Promote healthy behaviors

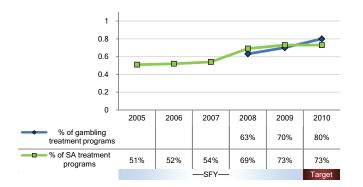
- Onsite licensing inspections of substance abuse and problem gambling treatment programs to assure they meet rules and regulations
- Complaint investigations and recommendations to the State Board of Health for possible discipline.
- Technical assistance to substance abuse and problem gambling treatment programs on operating and evaluating their services.
- Maintain a complete list of licensed programs, their status, and available services as a resource to the public.
- To learn more, go to www.idph.state.ia.us/bh/admin regulation.asp.

- Percent of substance abuse treatment programs with 3year licenses.
- **2** Percent of gambling treatment programs with 3-year licenses.

Data Source: Licensed SA & Gambling Treatment Programs List (see www.idph.state.ia.us/bh/admin regulation.asp). Data are available annually.

#### How are we doing?

Substance abuse and gambling treatment programs can be licensed for 270 days or for one, two, or three years. Threeyear licensed programs meet standards at the highest level or receive "deemed" status because of accreditation by a nationally recognized body such as CARF, COA, or JCAHO.



# What can you do to help?

- 1. lowans looking for information about local substance abuse and problem gambling treatment programs may contact the Iowa Substance Abuse Information Center at 1-866-242-4111 or go to www.drugfreeinfo.org.
- 2. Health and human service professionals interested in training or staff development opportunities related to substance abuse and problem gamlbing may contact Training Resources at 515-309-3315 or at www.trainingresources.org.



# Others working on similar issues

#### Other IDPH bureaus, offices, or programs:

Professional Licensure (Behavioral Health and Social Work Boards).

Other organizations: Substance Abuse & Mental Health Services Administration (SAMHSA), Iowa Board of Certification, National Council on Problem Gambling (NCPG), Association of Problem Gambling Service Administrators (APGSA).



# Funding sources

Federal grant & gambling fund: 0153-1968; K96-9604

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Gambling funds	\$100,000	\$93,447	\$0
Federal funds	\$332,014	\$362,227	\$395,090
Total funds	\$432,014	\$455,674	\$395,090
FTEs	4.70	4.82	4.10

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.



# Substance Abuse Prevention

Division of Behavioral Health Phone: 515-242-5934

www.idph.state.ia.us/bh/substance abuse.asp



"Josh" seemed like a typical lowa boy. At age 8, he chased frogs, played baseball, and loved cookies. But at age 12, he quit sports and made new friends his parents didn't like. At age 17, he quit school. At age 21, he was in jail. What happened? Drugs. Abuse and illegal use of alcohol, tobacco, and other drugs changes a person; not only causing health problems and heartbreak, but also costing lowans money. Research from lowa State University shows that every \$1 invested in overall prevention services yields a return of almost \$10. In terms of addiction, every \$1 dedicated to drug and alcohol prevention saves \$7-10 in costs of crime, incarceration, emergency room care, productivity, and premature death.

Maybe "Josh" didn't know about the dangers of using drugs or alcohol. Maybe he didn't know there were other ways to deal with the challenges every teenager faces. Maybe he didn't know that most teenagers choose not to use alcohol and other drugs. Maybe if he'd received and understood substance abuse prevention messages, his life would have been different. The IDPH Substance Abuse Prevention program strives to stop the pain and cost of substance abuse by preventing it from ever starting.

Did you know? Substance abuse is related to many serious health and social problems. At least 72 health problems that require hospitalization are caused completely or in part by substance abuse.

### Why is Substance Abuse Prevention important to promoting and protecting the health of lowans?

- Substance abuse and related problems are among society's most far-reaching health and social concerns. About 100,000 people in the U.S. die each year because of alcohol.
- It costs every person in the U.S. nearly \$1,000 each year for health care, law enforcement, motor vehicle crashes, crime, and lost productivity due to substance abuse.
- Which Iowa Public Health Goals are we working to achieve?

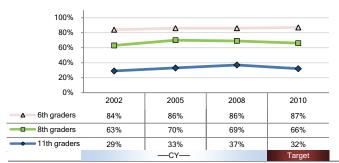
Promote healthy behaviors

Strengthen the public health infrastructure

Prevention works! According to the Iowa Youth Survey, the number of high school juniors who report binge drinking decreased from 41% in 1999 to 27% in 2008. In addition, the number of 11th grade students who used alcohol in the past 30 days decreased from 48% in 1999 to 37% in 2008.

- Fund organizations that use proven prevention programs to increase abstinence from alcohol, tobacco, and other drugs by people under age 21.
- Fund agencies that provide violence and substance abuse prevention programs for children and youth not normally served by state or federal agencies, or to those needing special services or additional resources.
- Fund proven prevention programs that focus on out-ofschool youth development opportunities for ages 5 to 18.
- Fund coalitions to prevent or reduce substance abuse in communities.
- Fund mentoring programs certified by the Iowa Mentoring Partnership to provide or support local mentoring services.
- Maintain an Epidemiological Workgroup to assess, analyze, interpret and communicate data about substance consumption and consequences.

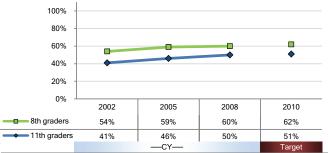
Percent of lowa students (grades 6, 8, & 11) who have never used alcohol.



Data Source: Iowa Youth Survey. Data are available every three years.

**How are we doing?** We have already met our 2010 targets for 8th and 11th graders.

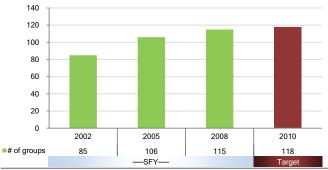
Percent of 8<sup>th</sup> and 11<sup>th</sup> grade students who think there is a possibility of "great risk or harm" in having three or more drinks of alcohol nearly every day.



Data Source: Iowa Youth Survey. Data are available every three years.

**How are we doing?** Through consistent prevention messages, more youth see risk or harm in daily alcohol use.

Number of state, county, community, and neighborhood collaborative groups to reduce problems of alcohol, tobacco, and other drugs.



Data Source: Regional Consultant Lists. Data are available annually.

**How are we doing?** We have increased the number of community groups from 106 in 2005 to 115 in 2008.

### What can you do to help?

- 1. If a family member or someone you know needs help with alcohol or drug problems, encourage them to get help by calling the lowa Substance Abuse Information Center Helpline 24 hours a day, 7 days a week at 1-866-242-4111.
- Learn about substance abuse by going to www.drugfreeinfo.org.
- Get involved with local prevention efforts. To find your local substance abuse prevention agency, go to www.drugfreeinfo.org/php/srchdir.html.
- 4. Check lowa Youth Survey reports for your county by going to www.iowayouthsurvey.org.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Gambling Prevention and Treatment, Substance Abuse Treatment, Tobacco Use Prevention and Control, and Violence Prevention.

Other state level organizations: Alliance of Coalitions for Change, Departments of Education and Human Rights, Governor's Office of Drug Control Policy, Governor's Traffic Safety Bureau, Iowa Behavioral Health Association, and Iowa Mentoring Partnership.

Other national organizations: Community Anti-Drug Coalitions of America (CADCA), National Institute on Alcohol Abuse and Alcoholism, National Institute on Drug Abuse (NIDA), Office of National Drug Control Policy, Substance Abuse & Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP).



#### **Funding sources**

General fund, tobacco fund, federal grants, federal recovery & reinvestment (FRR) funds, & intra state receipts\*: K01-0151/0154; K75-7502; 0153-0120/0152/0156/0166/0172/0174(30%)/0214(50%)

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$467,293	\$453,587	\$1,427,057
Tobacco funds	\$991,569	\$1,028,874	\$0
Federal funds	\$3,781,665	\$3,700,533	\$5,969,671
FRR funds	\$0	\$0	\$18,974
Other funds*	\$777,422	\$843,916	\$1,632,500
Total funds	\$6,017,949	\$6,026,910	\$9,048,202
FTEs	5.89	6.56	8.77

**Note:** Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Division of Behavioral Health Phone: 515-242-5934

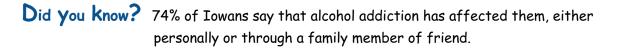
www.idph.state.ia.us/bh/substance\_abuse.asp



"It saved my life!" The grown man cried as he told his story of recovery from addiction to methamphetamine. After 8 months in treatment through Polk County providers, the man says he got his wife back, his kids regained their respect for him, and he has been working full-time. He gave credit to programs with staff that care, and treatment programs that allow flexibility and longer treatment.

The IDPH Substance Abuse Treatment program works to reduce the abuse of alcohol and other drugs with the ultimate goal of supporting addicted lowans in their personal recovery efforts.

The IDPH Substance Abuse Treatment program works to ensure lowans receive help where they are and when they ask for help.



# Why is Substance Abuse Treatment important to promoting and protecting the health of lowans?

- Substance abuse and related problems are among society's most far-reaching health and social concerns. About 100,000 people in the U.S. die each year because of alcohol alone.
- It costs every man, woman, and child in the U.S. nearly \$1,000 each year for health care, law enforcement, motor vehicle crashes, crime, and lost productivity related to substance abuse.
- lowa's children deserve to be raised by parents capable of caring for them and in homes free of toxic chemicals from making, selling, or using drugs.
- People who drink even relatively small amounts of alcohol contribute to alcohol-related deaths and injuries on the job and on our streets.

# ► Which Iowa Public Health Goals are we working to achieve?

Promote healthy behaviors

Strengthen the public health infrastructure

- Assessment and evaluation services: determining what kind of care a person needs
- Treatment services: residential treatment, day treatment, halfway house, intensive outpatient, extended outpatient and medication-assisted treatment.
- Continuing care and aftercare: designed to help the transition from primary treatment to ongoing recovery.
- Support specialized adult methamphetamine treatment.
- Collect substance abuse data from licensed providers to meet federal requirements, identify substance use trends and service needs, determine funding needs, and measure program performance.
- Provide recovery support services through the Access to Recovery program.
- Implement NIATx service system improvement activities.
- Assure that treatment is part of a larger recovery-oriented system of care that welcomes and engages lowans at any point and at all points in their personal recovery efforts.

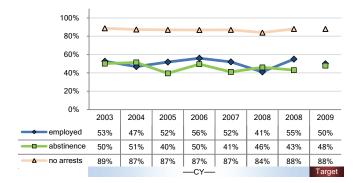


Treatment outcomes: Six months after treatment,

- Percent of clients not using their primary substance (abstinence).
- Percent of clients employed full-time.
- Percent of clients with no arrests.

Data Source: Outcomes Monitoring System. Data are available annually.

How are we doing? Since 2003, the rates of abstinence, no arrests, and employment after treatment are better than what clients report at admission.



#### What can you do to help?

- 1. If you know someone who needs help with alcohol or drug problems, encourage them to get help by calling the Iowa Substance Abuse Information Center's Helpline, 24 hours a day, 7 days a week at 1-866-242-4111.
- 2. Learn about the dangers of addiction. For more information, go to www.drugfreeinfo.org.
- 3. Learn more about Access to Recovery by going to www.idph.state.ia.us/atr or calling 1-866-923-1085.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Substance Abuse Prevention, Gambling Treatment, Violence Prevention.

Other organizations: Substance Abuse & Mental Health Services Administration (SAMHSA), Governor's Office of Drug Control Policy, Iowa Department of Human Services, Iowa Department of Corrections, Iowa Judicial Branch.



### Funding sources

General fund, gambling fund, health care trust fund, tobacco fund, federal grants, federal recovery & reinvestment (FRR) funds, & intra state receipts\* (Depts. of Education, Human Rights, & Human Services, & Office of Drug Control Policy); State funds are used for a required maintenance of effort match for the Substance Abuse Prevention & Treatment Block Grant: K01-0101/0103: K52-5221/5223: K91-9102: K97-9702; 0153-0102/0104/0108/0116/0124/0126/0128/ 0130/0172 (70%)/0206/0214 (50%)

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$1,064,241	\$1,016,287	\$16,119,194
Gambling funds	\$1,690,000	\$2,215,000	\$0
Health care trust	\$941,421	\$1,371,752	\$1,151,036
Tobacco funds	\$13,800,000	\$13,800,000	\$0
Federal funds	\$10,228,612	\$14,409,305	\$14,347,670
FRR funds	\$0	\$0	\$483,362
Other funds*	\$84,600	\$577,769	\$1,537,000
Total funds	\$27,808,874	\$33,390,113	\$33,638,262
FTEs	7.96	9.69	9.38

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Division of Behavioral Health Phone: 515-242-5122



When she was in middle school, Molly often said aloud that she wanted to kill herself. She was depressed and withdrawn and lacked self confidence. Looking back, the high school junior says she wasn't serious about her declarations, but the emotion behind such statements was real. "She seemed to hold things inside, and I could barely get her to talk," said her mother, Jennie. "She always looked like she was going to cry." Things are different now. Molly, 16, has dyed her hair coppery red and lost at least 40 pounds. More importantly, she's made friends. "Now, I don't want to cry," she said. The family ties Molly's transformation to TeenScreen, a program developed by Columbia University to identify kids who may be at risk for suicide, and the therapy sessions she started after school counselors identified her as at-risk in ninth grade. With a federal grant to bring TeenScreen to schools across the state, lowa officials hope Molly's story will become more common and that the number of suicides, the second-highest killer of teens in Iowa after vehicle accidents, will decrease.

Based on an article by Alison Gowans from the Cedar Rapids newspaper, The Gazette (November, 2007).

Did you know? Suicide was the 2nd leading cause of death for Iowans 15-40 years of age from 2002-2006?

### Why is Youth Suicide Prevention important to promoting and protecting the health of lowans?

- Suicide is not only the 2nd leading cause of death for lowans ages 15 to 40; it results in thousands of friends and families left behind to try to make sense of their loved one's tragic death.
- For every youth suicide death, there are an estimated 20-40 suicide attempts.
- In the 2008 Iowa Youth Survey, 13% of 11th graders admit to making one or more suicide attempts.
- Suicide is a preventable cause of tragic death and injury. It is estimated that 90% of those who died by suicide had a diagnosable mental health problem such as depression or bi-polar disorder.

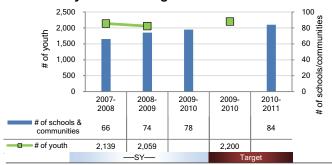
### ► Which Iowa Public Health Goals are we working to achieve?

Prevent injuries

Promote healthy behaviors

- Provide information about signs and symptoms of depression and suicide
- Provide funding and technical assistance through the Substance Abuse and Mental Health Services Administration's (SAMHSA) Youth Suicide Prevention through Mental Health Screening grant to local agencies so they can offer the Columbia University TeenScreen program to youth in Iowa schools.
- Provide resources for lowans on suicide and prevention strategies
- Develop suicide prevention strategies, with partners, in schools and communities
- Reduce the stigma associated with suicide, mental illness, and seeking help.

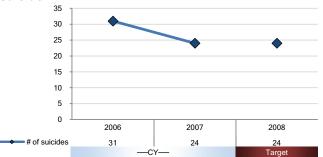
- Number of TeenScreen schools and communities.
- Number of youth receiving TeenScreen services.



Data Source: TeenScreen National Center for Mental Health Checkups at Columbia University. Data are available annually

How are we doing? IDPH promotes Teenscreen to communities and schools in Iowa. There has been a steady increase in the number of new active screening sites throughout the state. Although Iowa experienced a one-year decrease in the total number of youth receiving TeenScreen services, we anticipate that as new programs become established and market the program, more families will take advantage of the services.

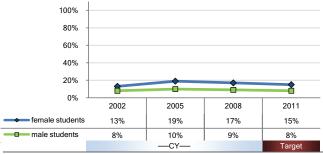
O Number of lowans age 19 & under who have died of suicide.



Data Source: IDPH Vital Statistics. Data are available annually

How are we doing? Through mental health screening and other suicide prevention strategies, the number of youth dying by suicide decreased from 2006 to 2007.

**9** Percent of Iowa 11<sup>th</sup> grade students who report they have made at least one suicide attempt.



Data Source: Iowa Youth Survey. Data are available every three years.

How are we doing? Since 2005, there has been a decrease of 2% in the number of lowa 11th graders reported attempting suicide at least once in their life.

## What can you do to help?

- 1. Learn about the facts about suicide and depression at www.suicidology.org/c/document\_library/get\_file?folderl d=232&name=DLFE-157.pdf.
- 2. Go to www.outofthedarkness.org/ to find out where to attend or how to organize a suicide awareness walk in your community.
- 3. Take comments about suicide seriously and support others efforts in seeking help for depression and suicidal thoughts. Go to www.afsp.org/index.cfm?page\_id=F2F25092-7E90-9BD4-C4658F1D2B5D19A0 to learn more.
- 4. Program the National Suicide Lifeline Hotline number (800-273-TALK) into your cell phone and call if you're concerned about yourself or someone else. Go to www.suicidepreventionlifeline.org for more support.
- 5. Learn about the warning signs of suicide at www.suicidology.org/web/guest/stats-andtools/warning-signs.



# Others working on similar issues

Other IDPH bureaus, offices, or programs: Child & Adolescent Health, Substance Abuse Prevention and Treatment, Violence Prevention.

Other organizations: SAMHSA, local grantees, lowa Departments of Education and Human Services, Polk County Suicide Prevention Coalition.



# Funding sources

Federal grant: 0153-0696

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Federal funds	\$110,898	\$241,652	\$369,683
Total funds	\$110,898	\$241,652	\$369,683
FTEs	1.16	1.19	1.15

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





**Tobacco Use Prevention & Control** 

www.idph.state.ia.us/tobacco



The Division of Tobacco Use Prevention and Control works to reduce tobacco use and the toll of tobacco-caused disease and death by preventing youth from starting, helping adults to stop, and preventing exposure to secondhand tobacco smoke.

For years, the health of non-smokers in Iowa suffered from breathing the secondhand smoke of others. In 2008, the Iowa Legislature approved and Governor Chet Culver signed into law the Smokefree Air Act, requiring most workplaces and public places to be nonsmoking. IDPH believes this will be a strong tool in helping to reduce use of the leading preventable cause of death of lowans - tobacco.

Cessation services for lowans were greatly expanded in 2008. On January 1, Quitline lowa began offering a free, two-week supply of nicotine patches or gum to any adult wanting to guit using tobacco, and 15 community health centers across the state began offering an eight-week supply of free cessation pharmaceuticals to low-income lowans.

Did you know? Over three quarters of adult tobacco users in Iowa say they want to quit. People who try to guit on their own without the help of coaching and nicotine patches or other cessation aides are successful less than 10% of the time. Using cessation aides along with Quitline Iowa telephone coaching doubles the likelihood that a tobacco user will guit for good.



- Tobacco is the leading preventable cause of death of lowans. More than 4,400 lowa adults die each year from smoking and as many as 480 die each year from secondhand smoke exposure.
- Smoking increases the risk of cancer, asthma, chronic obstructive pulmonary disease, and emphysema. Smoking causes coronary heart disease, lowa's leading cause of death.
- Which lowa Public Health Goals are we working to achieve?

Promote healthy behaviors

Protect against environmental hazards

Strengthen the public health infrastructure

Annual healthcare costs directly caused by smoking are now \$1 billion in Iowa. Iowa Medicaid covers approximately \$301 million of these costs.

#### What do we do?

- Just Eliminate Lies (JEL), Iowa's youth-led tobacco use prevention program supports peer education and antitobacco advertising to change attitudes about tobacco use. For information, go to www.jeliowa.org.
- Provide resources and information about the Iowa Smokefree Air Act at www.lowaSmokefreeAir.gov and 1-888-944-2247.
- Support Quitline Iowa (1-800-784-8669), which provides free, effective counseling and nicotine patches or gum to help lowans quit using tobacco.
- Collaborate with other state agencies to enforce laws prohibiting tobacco sales to minors and to enforce the Smokefree Air Act through education and compliance checks.

### Page 122

#### • Percent of adults and students that currently smoke cigarettes (past 30 days).

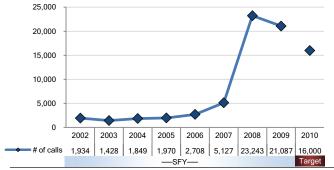
	2000	2002	2004	2006	2008	Cigarette smokers per 20 people
All lowa adults		23%	20%	18%	14%	14% (95% CI=12.5%-16.3%)*
	ts at or b e poverty			27%	21%	21% (95% Ci=17.1%-25.9%)*
High school students	33%	27%	20%	22%	20%	20% (95% CI=15.1%-24.7%)*
Middle school students	12%	7%	7%	4%	3%	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\

 $<sup>\</sup>blacksquare$  = smoker  $\blacksquare$  = non-smoker \* 95% CI: One can be 95% confident that the actual rate for the population of people in the demographic subgroup is included within this range of values.

Data Source: Iowa Youth Tobacco Survey (IYTS); Iowa Adult Tobacco Survey. Data are available every two years.

How are we doing? Smoking has continued to decline for middle school students and adults. High school smoking has decreased by 39% since 2000, but the rate of decline has slowed, with 20% smoking in 2008. Adult lowans living in households at or below 200% of the federal poverty level are more likely to be current smokers (21%) than lowans with higher incomes (12%).

#### Quitline call volume per year.



Data Source: Quitline database. Data are available quarterly.

How are we doing? In 2009, 21,087 lowans used Quitline lowa. This is more than the total number of callers since the Quitline began in 2000 and is due primarily to the fact that free nicotine patches and gum were offered for the first time in January 2008. Of the estimated 406,000 adult smokers in Iowa, about 5.6% called Quitline Iowa in 2008 (most state quitlines average less than 2% of smokers calling each year). Call volume is expected to remain well above 3% of current smokers through 2009.

# What can you do to help?

- 1. Iowans who use tobacco should try to quit. Call 1-800-QUIT-NOW (1-800-784-8669) for help.
- 2. Healthcare professionals should counsel patients who smoke or chew tobacco about the dangers and, if interested, refer them to Quitline Iowa.
- 3. Iowa youth can get involved in reducing tobacco use in Iowa. For information on how to become a JEL member, attend the annual JEL summit, Youth Advocacy Day, and other events. Go to www.jeliowa.org.
- 4. Help to ensure that every workplace is smokefree by going to www.lowaSmokefreeAir.gov or 1-888-944-2247 for information and resources about the smokefree workplace law or to register a complaint about violations of the law.
- 5. Iowans should support programs that work to change old social beliefs so that the use of tobacco becomes undesirable and unacceptable.

#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Asthma Control, Multicultural Health, Oral Health, Cancer, Diabetes, Maternal and Child Health, Nutrition and Health Promotion.

Other organizations: Tobacco Use Prevention & Control Commission, Iowa Consortium for Comprehensive Cancer Control, American Cancer Society, American Lung Association, American Heart Association, Iowa Tobacco Prevention Alliance, CAFE Iowa CAN, Campaign for Tobacco Free Kids, Americans for Nonsmoker's Rights.



#### **Funding sources**

General fund, tobacco fund, health care trust fund, federal grants, federal recovery & reinvestment (FRR) funds, receipts\*, & carryover\*: K01-0155/0203/0209/0211/ 0215/0217/0221; K52-5281/5283/5285/5287/5289; K93-9302/9308/9310/9312/9314/9352/9354/9356; 0153-9342

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$1,006,251	\$1,401,959	\$7,028,214
Tobacco funds	\$5,824,009	\$6,928,266	\$0
Health care trust	\$4,183,224	\$2,943,818	\$1,597,656
Federal funds	\$790,627	\$969,991	\$857,260
FRR funds	\$0	\$0	\$523,250
Other funds*	\$1,495	\$0	\$999,999
Total funds	\$11,805,606	\$12,244,034	\$11,006,379
FTEs	11.07	13.49	17.35

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.

lowa Department of Public Health ♦ Division of Tobacco Use Prevention & Control ♦ Tobacco Use Prevention & Control Phone: 515-281-6625 ♦ Fax: 515-281-6475 ♦ www.idph.state.ia.us/tobacco 4th Floor, Lucas Building ♦ 321 E. 12th Street ♦ Des Moines, IA 50319-0075

JEL (Just Eliminate Lies) - Phone: 515-281-4299 ◆ www.jeliowa.org

Quitline Iowa – Phone: 1-800-784-8669 (1-866-822-2857 for the hearing-impaired) ♦ www.quitlineiowa.org





Division of Acute Disease Prevention & Emergency Response Phone: 515-281-7504

www.idph.state.ia.us/adper/tb control.asp



It's a disease as old as antiquity. Archeologists have found mummies with signs of it. Your grandparents or greatgrandparents called it "consumption." Today, we know the disease as tuberculosis, or TB. Although an ancient disease, it's still around and the Iowa Department of Public Health's Tuberculosis Control program continues the fight against TB.

You may not know that Christmas Seals were introduced to help raise funds to fight TB. The organization that pioneered the Christmas Seals, the National Tuberculosis Association, became what's now known as the American Lung Association.

Less than two decades ago, lowa averaged 65 TB cases each year. Now, through the efforts of the TB Control program, the number of cases has fallen to an annual average of 44 cases.



Did you know? Patients who do not take their medications correctly or who are improperly treated can develop a virtually untreatable form of TB.

# Why is the TB Control program important to promoting and protecting the health of lowans?

- Tuberculosis remains a public health problem in Iowa with an average of 44 cases reported each year.
- Thousands of Iowans are diagnosed with latent TB infection each year. Latent TB infection (LTBI) can lead to future cases of TB disease.
- Infectious cases of TB must be treated to prevent others from becoming infected.

► Which Iowa Public Health Goals are we working to achieve?

Prevent epidemics & the spread of disease

Strengthen the public health infrastructure

Promote healthy behaviors

- Provide funding for local health departments to give TB tests, treatment, and chest x-rays for TB patients.
- Provide funding for the University of Iowa Hygienic Lab to perform TB testing.
- Maintain a system to ensure positive TB lab tests are reported to IDPH for surveillance and disease investigation.
- Advise healthcare providers who evaluate and treat lowans with TB and LTBI.

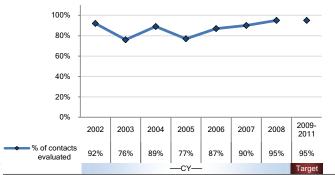
• Percent of patients with newly diagnosed TB, for whom therapy for one year or less is indicated, who complete therapy within 12 months.



Data Source: CDC software program - Tuberculosis Information Management System. Data are compiled annually, but possibly not complete until 9 months into the next year.

How are we doing? lowa consistently meets or exceeds the national program objective of 90%.

Percent of contacts to sputum AFB-smear positive TB cases evaluated for infection and disease.



Data Source: CDC software program - Tuberculosis Information Management System. Data are compiled annually, but possibly not complete until 9 months into the next year.

How are we doing? lowa is above the national average for this objective; however, lowa has not achieved the goal of 95%.

# What can you do to help?

- 1. Maintain a healthy lifestyle, especially when visiting other countries where TB is common. For more information, go to wwwn.cdc.gov/travel/yellowBookCh4-TB.aspx.
- 2. Local public health should follow recognized standards when caring for TB patients. For more information, go to www.idph.state.ia.us/adper/tb\_control.asp.
- 3. Clinicians should be vigilant about the early diagnosis of TB and ensure proper treatment. For more information, go to www.cdc.gov/tb/pubs/PDA TBGuidelines/default.htm.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: HIV/AIDS/Hepatitis, STD Prevention, Prescription Services, Acute Disease Epidemiology, Substance Abuse Prevention and Treatment.

Other organizations: World Health Organization, CDC, American Lung Association, America Thoracic Society, local health departments, hospitals.

#### Funding sources

General fund & federal grant: K15-1601; 0153-1602

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$61,247	\$61,735	\$63,594
Federal funds	\$425,817	\$365,764	\$354,508
Total funds	\$487,064	\$427,499	\$418,102
FTEs	2.38	1.52	2.00

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





# **Violence Prevention**

Division of Behavioral Health Phone: 515-281-5032

www.idph.state.ia.us/bh/domestic violence.asp

"Sheila" had been a victim of domestic abuse for years. When a beating sent her to a physician, both the doctor and nurse suspected abuse, but Sheila said no - she was just clumsy. Months passed and finally, Sheila had had enough. She left her husband and tried to get a restraining order, but she had no evidence of past abuse because she'd been threatened or beaten when she tried to call police. However, the doctor and nurse Sheila had seen months earlier had documented their suspicions. Thanks to the notes they took, the restraining order was issued and Sheila was safe.

The IDPH Violence Prevention program seeks to reduce the rate of injury and death from intentional violence, especially suicide and violence against women. By raising awareness of the issue, the healthcare community and the public are better able to recognize and help the victims of abuse.

Did you know? Intentional injuries, such as interpersonal violence and suicide, are among the leading causes of death and injury for younger Iowans.

### Why is Violence Prevention important to promoting and protecting the health of lowans?

- An average of 19 lowans die each year due to domestic violence homicide or suicide.
- One in ten lowans will experience sexual violence in their lifetime and one in twelve will experience domestic abuse.
- Children who see violence often suffer the consequences later in life, such as increased substance use, mental health problems, and other chronic health conditions.
- Research has shown that preventing the first act of sexual or domestic violence can stop the cycle of violence that often occurs in families and high-risk populations like women and low-income lowans.
- Public health methods are effective in preventing violence through community involvement, education, and challenging beliefs and habits that support violence.

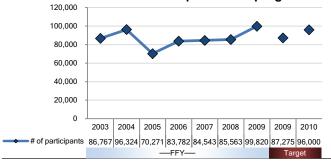
#### ► Which Iowa Public Health Goals are we working to achieve?

Prevent injuries

Promote healthy behaviors

- Analyze violence data (including domestic abuse homicides and suicides) and release reports on violence prevention issues.
- Provide training and technical assistance to identify, assess, intervene, report, and document domestic violence and sexual assault for healthcare providers and other community professionals.
- Coordinate public information campaigns to change social beliefs that contribute to violence.
- Provide funding, training, and technical assistance for targeted prevention campaigns aimed at individuals, organizations, and communities.
- Make recommendations to state officials, agencies, and community leaders on how to prevent violence.

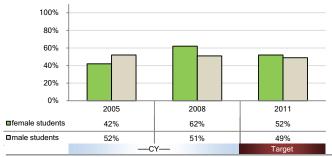
• Number of students and professionals participating in sexual and domestic violence prevention programs.



Data Source: Iowa Coalition Against Sexual Assault. Data are available annually.

**How are we doing?** State funding has allowed us to regain momentum after a decrease in 2005 due to a drop in federal funding.

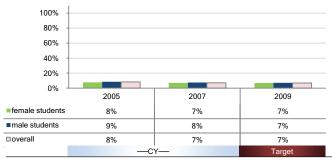
Percent of lowa students (grades 6, 8, & 11) who report experience with being bullied.



Data Source: Iowa Youth Survey. Data are available every three years.

How are we doing? Since 2005, the percentage of male students reduced slightly and the percentage of female students who reported experience being bullied increased by 50%.

Percent of lowa 9-12 grade students who report they were hit, slapped, or physically hurt on purpose by a boyfriend or girlfriend.



Data Source: Youth Risk Behavior Survey. Data are available every two years.

**How are we doing?** Since 2005, there has been a decrease of 1.4% in the number of lowa high school students reporting physical violence by a dating partner.



### What can you do to help?

- 1. Get involved when you see bullying, harassment, or other types of early violence to help stop the development of behavior that leads to more violence.
- Contact local victim service programs, hotlines, or law enforcement to report violence in domestic situations. For more information, contact the lowa Domestic Violence Hotline at 1-800-942-0333 or the lowa Sexual Abuse Hotline at 1-800-284-7821.
- Healthcare professionals can routinely screen for violence during patient visits, properly document findings, and refer patients for help when abuse is found. The Violence Prevention program offers training for hospitals and healthcare professionals. For more information, go to
  - www.idph.state.ia.us/bh/domestic violence.asp.
- lowa health and youth-serving professionals can incorporate information into their programs about risk factors for violence and protection against violence. To learn more, go to <a href="http://www.cdc.gov/ViolencePrevention/">www.icyd.org</a> or <a href="http://www.cdc.gov/ViolencePrevention/">http://www.cdc.gov/ViolencePrevention/</a>.



# Others working on similar issues

Other IDPH bureaus, offices, or programs: Child & Adolescent Health, Child Death Review Team, Family Planning, Maternal Health, Sexually Transmitted Disease Prevention, Substance Abuse Prevention.

Other organizations: Iowa Departments of Education, Justice, & Human Services; Iowa Coalition Against Domestic Violence, Iowa Coalition Against Sexual Assault, Iowa Collaboration for Youth Development, Prevent Child Abuse Iowa, Centers for Disease Control & Prevention – National Center for Injury Prevention & Control, Health Resources & Services Administration, National Sexual Violence Resource Center, Family Violence Prevention Fund, Prevention Connection.



#### **Funding sources**

General fund, federal grants, & intra state receipts\*: K19-1965; 0153-0694/1752/1756/1758

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$100,000	\$261,500	\$232,477
Federal funds	\$463,854	\$412,918	\$441,778
Other funds*	\$203,794	\$43,295	\$45,027
Total funds	\$767,648	\$717,713	\$719,282
FTEs	0.73	0.80	0.95

**Note:** Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.





Phone: 515-281-8722 www.idph.state.ia.us/eh/toxicology env health.asp



It's a steamy August day in Iowa. You've just finished mowing the lawn and head to the kitchen tap for a tall glass of cool water. You quench your thirst without a worry about whether the water is safe to drink. That's thanks, in large part, to the work of the IDPH Safe Drinking Water program. Iowa has not had a disease outbreak linked to contaminated drinking water for decades. IDPH programs identify, treat, and prevent sources of environmental contamination in drinking water through testing, treatment, and regulation.

Many lowa farmsteads still have old wells and cisterns on the property. Besides the danger of the water being contaminated, there is danger of children or animals falling into improperly capped or plugged wells. Through the IDPH Grants to Counties Water Well program, more than 8,000 abandoned wells have been plugged and 650 private wells have been reconstructed.

Keeping lowa's drinking water safe – it's the daily mission of the IDPH Safe Drinking Water program.



Did you know? It is estimated that there are 200,000 abandoned wells in Iowa. These wells are a risk to contaminating our groundwater supply as well as safety hazards.

### Why is Safe Drinking Water important to promoting and protecting the health of lowans?

- Plentiful safe drinking water is important to public
- About 20% of Iowans get their drinking water from private water wells.
- About 50% of those private wells typically produce an unsafe result for bacteria.
- Abandoned and decaying wells are at risk of allowing environmental contamination to enter the groundwater supply.
- Improperly installed plumbing poses a risk to drinking water systems by potentially allowing drinking water and wastewater to mix.
- Proper fluoridation of water is extremely important to good oral health.

### Which lowa Public Health Goals are we working to achieve?

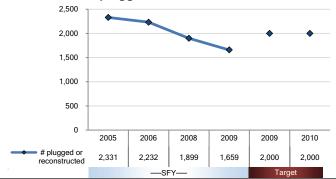
Protect against environmental hazards

Prevent epidemics & the spread of disease

Promote healthy behaviors

- lowa law requires that a water treatment system that claims to reduce health-related contaminants from drinking water be tested to show that the system achieves the reduction. The Safe Drinking Water program maintains a registry of systems that comply.
- The Grants to Counties Water Well program provides funding to local health departments for private well testing, plugging abandoned wells, and renovating existing wells.
- The Fluoridation program monitors the fluoridation of public water supplies, assists and trains water system operators, and helps communities with fluoridation projects.
- The Backflow Prevention Assembly Tester Registration program sets training standards for technicians who test backflow prevention devices and maintains a registry of qualified technicians.
- The Safe Drinking Water Program maintains the Iowa State Plumbing Code, the minimum standard for plumbing in Iowa cities.

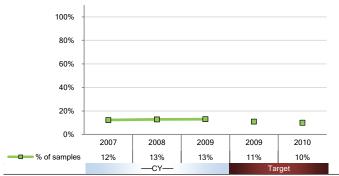
#### • Number of wells plugged and reconstructed.



Data Source: County reports to IDPH. Data are available annually.

How are we doing? Wells that need to be plugged cause a potential risk to the quality of our ground water as well as a hazard for humans and animals.

#### **9** Percent of samples showing that fluoridation was not occurring at optimal levels.



Data Source: IDPH sampling database. Data are available annually.

How are we doing? Currently, approximately 13% of samples show less than optimal fluoridation levels.

#### What can you do to help?

- 1. All lowans can contact their county environmental health office if they would like a free water test, or if they need help paying for the cost of plugging a well.
- 2. You can find out about the status of your community's public water fluoridation by visiting www.idph.state.ia.us/hpcdp/fluoride\_search.asp.
- 3. Make sure only registered professionals test or repair your backflow prevention assemblies.
- 4. Check with your city or county for more information about local plumbing inspection programs and for a list of licensed plumbers.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Acute Disease Epidemiology, Environmental Epidemiology.

Other organizations: Iowa Department of Natural Resources, Iowa Department of Agriculture & Land Stewardship, Environmental Protection Agency.



### Funding sources

General fund, intra state receipts\* (Dept of Natural Resources Groundwater Protection Fund), federal grant, & retained fees\*: K13-1402/1404; K19-1903/2041; 0153-1904

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$28,646	\$151,570	\$0
Federal funds	\$107,751	\$111,002	\$111,607
Other funds*	\$1,570,471	\$1,893,441	\$4,132,703
Total funds	\$1,706,868	\$2,156,013	\$4,244,310
FTEs	2.27	5.11	6.50

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.

Iowa Department of Public Health ♦ Division of Environmental Health ♦ Safe Drinking Water Phone: 515-281-8722 ♦ Fax: 515-281-4529 ♦ www.idph.state.ia.us/eh/toxicology\_env\_health.asp 5th Floor, Lucas Building ♦ 321 E. 12th Street ♦ Des Moines, IA 50319-0075

For information on backflow prevention: www.idph.state.ia.us/eh/backflow prevention.asp

For information on **fluoridation**: www.idph.state.ia.us/eh/fluoridation.asp

For information on grants-to-counties (well tests, plugging, and renovation): www.idph.state.ia.us/eh/toxicology\_grants.asp

For information on the state plumbing code: www.idph.state.ia.us/eh/plumbing\_code.asp

For information on water treatment system registration: www.idph.state.ia.us/eh/water\_treatment.asp





Division of Environmental Health Phone: 515-281-8722

www.idph.state.ia.us/eh/swimming pools.asp



Every summer in lowa, hundreds of thousands of lowans cool off with a dip in a pool. IDPH works to make sure people are the only thing swimming in that pool; not tiny critters that can make people sick. Cryptosporidiosis ("Crypto") is a disease caused by a parasite that results in diarrhea. People get sick when they swallow the parasite. The not-so-appetizing explanation: People get sick when they swallow swimming pool water someone else swam in when they had diarrhea.

That's just what happened in 2005, when a group of Crypto cases was traced to an lowa wading pool. Pool operators worked fast, closing the pool for special cleaning, and reopening as fast as possible. The Swimming Pools and Spas program helps keep lowans healthy by helping keep the waters they swim in healthy, too!

Did you know? The IDPH Swimming Pools and Spas program inspects about 1,300 pools, more than 420 spas, 260 wading pools, and 260 water slides at about 1,260 locations in Iowa.

#### Why is the Swimming Pools and Spas program important to promoting and protecting the health of lowans?

- lowans use public swimming pools and spas at a variety of locations: municipal pools, YMCA/YWCA, hotels and motels, health clubs, and water parks.
- There are many health concerns related to swimming pools and spas, including transmission of disease, injuries, and the potential for drowning.
- Swimming is a healthy form of exercise and recreation. Keeping pools safe with inspections and regulations lets lowans continue to stay active with few worries.
- lowa Code requires that IDPH inspect and regulate public swimming pools and spas.

#### Which Iowa Public Health Goals are we working to achieve?

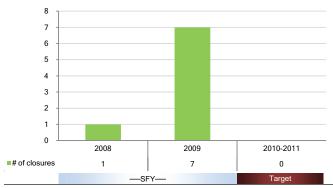
Protect against environmental hazards

Prevent epidemics & the spread of disease

Prevent injuries

- Contract with local health departments to do inspections at public swimming pools and spas.
- Register about 2,200 pools and spas in Iowa.
- Evaluate local health department inspection programs each year to be sure all state pools and spas are being inspected in the same way.
- Keep operators and inspectors up-to-date on swimming pool safety with face-to-face visits and a newsletter.
- Issue construction permits for new facilities or renovations to old ones.

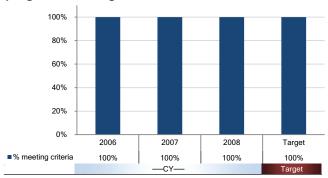
#### • Number of pool/spa closures.



Data Source: Local Inspector reports. Data are available annually.

How are we doing? In state fiscal year 2009, there were 7 pool/spa closure required. Our target for 2009-2011 is to achieve 0 closures.

#### Percent of local health department inspection programs meeting evaluation criteria.



Data Source: Program reports. New data are available annually.

How are we doing? Programs are evaluated on an annual basis. 100% of programs met criteria; some required slight modifications. Our target for 2010-2011 is to maintain this level of performance.

### What can you do to help?

- 1. Stay away from swimming pools, wading pools, and spas/hot tubs if you have or recently had diarrhea. Keep sick children away from these facilities.
- Practice good pool hygiene. Take a shower and wash your child thoroughly before swimming.
- 3. Avoid swallowing pool water. Discourage children from drinking from sprays and fountains in swimming pools and wading pools.

For more tips on healthy swimming, visit <a href="https://www.cdc.gov/healthyswimming">www.cdc.gov/healthyswimming</a>.

4. If you are responsible for managing or operating a pool, aggressively monitor the water and close facilities voluntarily if conditions warrant.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Acute Disease Epidemiology, Environmental Epidemiology.

Other organizations: local health departments, Centers for Disease Control and Prevention (CDC), National Swimming Pool Foundation (NSPF).



#### Funding sources

General fund: K19-1905

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
State funds	\$67,505	\$65,265	\$67,858
Total funds	\$67,505	\$65,265	\$67,858
FTEs	1.00	1.00	1.00

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.



Phone: 515-281-4919

www.idph.state.ia.us/wic/default.asp





When money is tight, difficult decisions must be made. For some lowans, that means buying a used car instead of a new one. But for others, the decision may be between paying the rent and buying food. The IDPH WIC program ensures that some of the most vulnerable lowans — low-income pregnant, breastfeeding, or postpartum women and their children up to age five — never have to go without good nutrition.

WIC services are the gateway to good health. Families looking for help with food though WIC also find access to other services such as prenatal care, well-child care, immunizations, lead screening, and many others that help families stay healthy.

Through WIC, all Iowa children and their mothers have access to a healthy start.

Did you know? Each month, the Iowa WIC Program serves over 75,000 women, infants, and children, which is approximately 88% of those estimated to be eligible for services.

#### Why is the WIC program important to promoting and protecting the health of lowans?

- More than 40% of infants born in Iowa receive WIC.
- One in every three pregnant women in Iowa receives WIC.
- Nearly one in five children in Iowa between ages 1 and 5 participates in WIC.
- WIC strengthens families by influencing lifetime nutrition and health behaviors.
- The WIC program coordinates services with many other programs including prenatal and postpartum care, well child care, immunizations, lead poisoning prevention programs, early intervention services, child care, Head Start, hawk-i, breastfeeding support, parenting education programs, food assistance programs, and more.

Which lowa Public Health Goals are we working to achieve?

Promote healthy behaviors

Strengthen the public health infrastructure

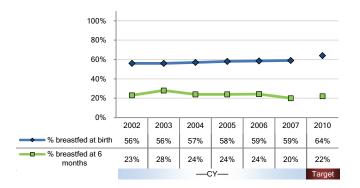
- Provide access to nutrient-rich foods.
- Offer nutrition education and support in making positive behavior changes in diet and physical activity.
- Provide breastfeeding education and support.
- Make referrals for health care and social services.
- Offer community-based services through 20 local
- Improve access to Iowa grown fruits and vegetables through the WIC Farmers Market Nutrition Project (in cooperation with the Iowa Department of Agriculture and Land Stewardship).
- Stimulate the lowa economy by buying over \$40 million dollars of food from 700 lowa grocery stores and pharmacies that accept WIC checks for the prescribed supplemental foods.
- Support Iowa agriculture by providing supplemental foods produced in the state (milk, fruit juice, whole wheat bread, fruit juice, and eggs).
- Provide statistics to local, state, and federal public health programs and organizations to monitor the nutrition and health status of women, infants, and children.

- Percent of WIC infants breastfed at birth.
- Percent of WIC infants breastfeeding at 6 months.

Data Source: CDC Pediatric Nutrition Surveillance Data. Data are available annually with the release determined by CDC priorities.

How are we doing? Initiation rates continue to increase slowly, just as the rates for all lowa infants are increasing. Of all Iowa infants born in 2005, 74% of were ever breastfed (Data Source: National Immunization Survey).

Duration rates have increased, but at a much slower pace. The rise in 2003 and the fall in 2004 do not appear to be connected to any changes in service delivery. Duration rates are particularly a challenge because lowa has the highest rate of maternal employment for families with children under age 6. The women served by WIC are also more likely to work in places that do not support breastfeeding. Of all Iowa infants born in 2005, 40% were still being breastfed at 6 months of age (Data Source: National Immunization Survey).







### What can you do to help?

- 1. All lowans can promote and support breastfeeding. Breastfeeding is the best way to feed healthy newborns. To learn more about breastfeeding, go to www.idph.state.ia.us/wic/breast\_feeding.asp.
- 2. All lowans can refer potentially eligible families to WIC. For more information about WIC, go to www.idph.state.ia.us/wic/families.asp.
- 3. All lowans can provide information about WIC services in your community. Free outreach materials are available from the state WIC office. Go to www.idph.state.ia.us/wic/others.asp to download and print an order form.



#### Others working on similar issues

Other IDPH bureaus, offices, or programs: Child Health, Early Childhood, Maternal Health, Nutrition & Physical Activity.

Other organizations: Polk County Commodity Supplemental Food Program; USDA-funded child nutrition programs including Child and Adult Care Food Program, School Lunch, School Breakfast, Summer Feeding Programs (Iowa Department of Education); WIC Farmer's Market Nutrition Program (Iowa Department of Agriculture and Land Stewardship); Expanded Food and Nutrition Education Program, Family Nutrition Program (Iowa State University Extension Service); Food Assistance Program, hawk-i (Iowa Department of Human Services).



#### Funding sources

#### Federal funds:

0153-0508/0512/0514/0516/0608/0614/0652/0678

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Federal funds	\$47,061,839	\$50,981,073	\$43,178,949
Total funds	\$47,061,839	\$50,981,073	\$43,178,949
FTEs	12.88	13.59	14.00

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information





Division of Health Promotion & Chronic Disease Prevention Phone: 515-242-6388 www.womenshealthiowa.info



Remember Wonder Woman, in her red, white, and blue superhero costume, her indestructible bracelets, and her "lasso of truth?" Wonder Woman, is of course, a fictional character. But many women today try to be a modernday version of the comic book character, taking care of family, work, school, and more - and forgetting about their own health and well-being.

Women have unique and specific health concerns and challenges. The IDPH Office of Women's Health works to raise awareness of women's health issues throughout life. The office also serves as a link between the national Office on Women's Health and the state of lowa.

Women are often so busy taking care of others that they forget to take care of themselves! The IDPH Office of Women's Health serves as an information center on all topics that affect women.



Did you know? Research clearly shows women and men respond very differently to diseases, treatments, and medications.

### Why is Women's Health important to promoting and protecting the health of lowans?

- Historically, most research about disease and disorders has been done on men, but when the findings are applied to women, the results aren't always good. Focusing on women's health leads to better treatments and outcomes.
- Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

- Improving access to accurate information gives women reliable information they can count on.
- Being aware of information about a variety of women's health-related information gives lowans the opportunity to influence women's health policy.
- The Iowa Women's Information Center Web site (www.womenshealthiowa.info) provides free, objective, and medically-accurate health information for lowa women.

- Assure coordination of primary care, preventive services, and mental health services for lowa women.
- Improve women's knowledge about health so they can make good choices about health.
- Improve access to women's health information by making existing resources better.
- Create a complete list of IDPH women's health-related programs. The list is available at www.idph.state.ia.us/common/pdf/publications/womens health related programs.pdf.



Each IDPH program has its own measures. National, state, and county health statistics for a variety of topics, such as demographics, mortality, access to care, infections and chronic disease, reproductive health, maternal health, mental health, violence and abuse, and prevention can be found at www.womenshealth.gov/quickhealthdata/. In addition, each of the IDPH women's health-related programs described includes contact information. Most of the programs included reference Web sites where more information is available.



### What can you do to help?

- 1. All lowans can visit the Iowa Women's Health Information Center at www.womenshealthiowa.info for information on a wide variety of subjects. Topics from A to Z can be searched from this Web site.
- 2. All lowans may read about IDPH women's health-related programs at www.idph.state.ia.us/common/pdf/publications/womens health related programs.pdf for a wealth of information on women's health related programs.
- 3. All lowans can practice healthy behaviors to improve their quality of life or that of a loved one.



### Others working on similar issues

Other IDPH bureaus, offices, or programs: Gambling Treatment, Substance Abuse Treatment, Tobacco Use Prevention & Control, Asthma Control, Cancer, Heart Disease & Stroke Prevention, Diabetes Prevention & Control, Disability Prevention, Family Planning, Congenital & Inherited Disorders, Nutrition & Physical Activity, Maternal Health, Multicultural Health, Oral Health, Sexually Transmitted Disease (STD) Prevention, Violence Prevention, WIC.

Other organizations: Iowa Women's Health Information Center Web Site, National Women's Health Information Center (http://womenshealth.gov); Iowa State University Extension; U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA).



# Funding sources

Federal grant: 0153-0962

	FY2008 Actual	FY2009 Actual	FY2010 Estimate
Federal funds	\$0	\$4,000	\$4,000
Total funds	\$0	\$4,000	\$4,000
FTEs	0.00	0.00	0.00

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.