

Gerd W. Clabaugh, MPA Director, Iowa Department of Public Health

December 20, 2016

Smoke-free mandate

The U.S. Department of Housing and Urban Development (HUD) announced that public housing developments in the U.S will now be <u>required to provide a smoke-free</u> <u>environment</u> for their residents. The Iowa Department of Public Health's Smoke-Free Homes initiative provides tools and resources to property managers seeking to provide smoke-free housing, and also gives Iowans a <u>searchable registry</u> to find smoke-free housing in which to live. There are currently 934 smoke-free properties registered with IDPH.

IDPH intern's work highlighted

The <u>University of Iowa College of Public Health</u> has highlighted the work of an IDPH summer intern, <u>Laurel Tuggle</u>. Laurel recently completed an internship with IDPH's Bureau of Chronic Disease Prevention and Management, in which she worked to increase awareness of prediabetes, screening for diabetes and referrals to the National Diabetes Prevention Program (NDPP) in Poweshiek and Tama counties. IDPH is committed to providing quality <u>internships</u> to students seeking public health-related careers. Each year, dozens of interns gain valuable experience while assisting the department's work.

I-Smile™ Silver expands

<u>I-Smile[™] Silver</u> is a two-year pilot project, modeled after the <u>I-Smile[™]</u> program for children, which aims to achieve optimal dental care for older Iowans. In addition to continuing activities through contracts with the Scott and Lee County Boards of Health (Lee County's service area also includes Van Buren and Des Moines Counties), a new

contract announced last month with the Webster County Board of Health expands I-Smile[™] Silver into a six-county region in northwest Iowa.

WIC challenge

The <u>Iowa WIC program</u> recently challenged local agencies to improve their promotional strategies to increase participant use of <u>wichealth.org</u>, an online alternative WIC participants can use to complete the required nutrition education component of the WIC program. Wichealth.org allows local WIC agencies to provide a higher percentage of completed nutrition contacts with the same amount of personnel and financial resources. Local agencies were challenged to a 20 percent increase in lessons, from the 6,633 lessons completed in FFY15 to at least 7,960 completed lessons in FFY16. WIC agencies really stepped up their promotion game and 11,882 wichealth.org lessons were completed in FFY16.

Congrats and kudos

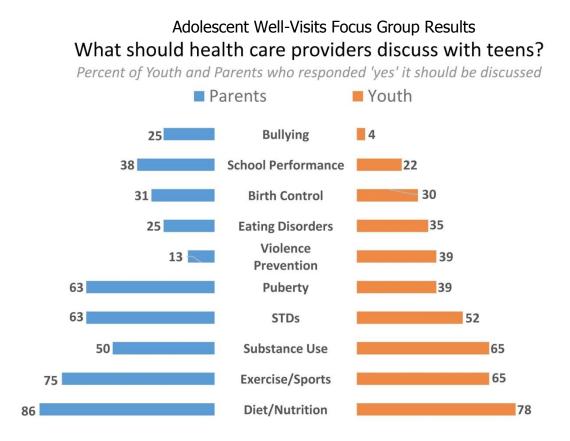
<u>Avera Holy Family Hospital</u> in Estherville has been chosen by the national <u>Critical Access</u> <u>Hospital (CAH) Technical Assistance and Service Center</u> as one of the top four CAHs nationally for excellence. The hospital was honored for its demonstration of innovation in the area of emergency medical services (EMS). The <u>IDPH Flex program</u> nominated Avera Holy Family Hospital for the award.

<u>Iowa Students for Tobacco Education and Prevention</u> (ISTEP) membership increased by three chapters and 86 members statewide last month, bringing total membership in grades 7-12 to 2,386 youth, representing 103 chapters in 56 counties.

Kevin Gabbert, Michele Tilotta and Monica Wilke-Brown Tilotta of the IDPH Bureau of Substance Abuse were recognized last week by Major General Timothy Orr, The Adjutant General of the Iowa Army National Guard, for their work in the <u>Iowa –</u> <u>Screening, Brief Intervention and Referral to Treatment</u> (SBIRT) program.

Monthly data snapshot

Data are essential to the practice of public health. Each month, Quick Reads highlights selected tidbits to help create awareness of IDPH data and epidemiology.



As part of the Adolescent and Young Adult Health Collaborative Innovation and Improvement Network (AYAH CoIIN), IDPH focuses on strategies to encourage more adolescents to receive well-visits. In the spring of 2016, IDPH conducted focus groups with adolescents and parents of adolescents to identify levels of awareness about the existence of adolescent well-visits and their content, as well as barriers to and motivators for a well-visit. Two focus groups of parents with adolescent-aged children averaging 15 years of age (n=16) and two focus groups of youth averaging 17 years of age (n=23) were completed in Iowa. Each group also shared what they believed providers should talk about during the well-visit (Figure 1). Using the focus groups' results can prove valuable when structuring the well-visit experience to meet the needs of both young people and their parents. For more information, visit http://idph.iowa.gov/adolescent-health.

Stay informed, share your story

To contribute a news item or smart practice, please write to Polly Carver-Kimm at <u>Polly.Carver-Kimm@idph.iowa.gov</u>.

To everyone in public health and all our partners, keep up the great work!

— Gerd