

May 2007

Newton named new director

By Don McCormick*

On April 30, Governor Chet Culver appointed Tom Newton as director of the Iowa Department of Public Health (IDPH). Prior to this appointment, Director Newton served as the director of the IDPH Division of Environmental Health.

"I am thrilled that Tom Newton has agreed to serve as director of this important state agency," said Governor Culver. "Tom has more than 10 years of experience in public health. In addition, he has skillfully managed the Division of Environmental Health and has the experience necessary to lead the team as Public Health director."

Newton became division director in 2002. Among his many accomplishments in this position, Newton has provided leadership and guidance to the Redesigning Public Health in Iowa project. This statewide effort between local and state public health focuses on developing a baseline of standards for public health service delivery statewide.

"This is an important time for public health in our state," Newton said. "I am greatly honored that Governor Culver has given me this opportunity and will work hard to ensure that IDPH continues to fulfill its mission of promoting and protecting

the health of Iowans, no matter where they live in the state."

Originally from Story County, Newton's background in both local and state public health in Iowa makes him an ideal choice for the role of department director. Newton began his career



IDPH Director Tom Newton

in 1996 as a sanitarian in Washington County. From 1997 to 2000, he served as a public health officer for the Black Hawk County Health Department in Waterloo.

In 2000, Newton joined IDPH as a community health consultant. In this position, he provided technical assis-

tance and direct consultations to local boards of health, local environmental health officials, local boards of supervisors, and local public health nursing practitioners on environmental health issues.

"Whether you're talking about environmental health, health promotion, emergency preparedness, behavioral health or tobacco use prevention, the connection to local public health agencies and partners cannot be underestimated," Newton said. "I look forward to building upon IDPH's current relationships, and to forging new partnerships."

Newton has a Bachelor of Arts degree in environmental planning and political science and a Master of Public Policy degree from the University of Northern Iowa. Newton has served as president of the Iowa Environmental Health Association, and is also a member of the National Environmental Health Association, the Iowa Public Health Association, and the American Public Health Association. In 2004, Newton received the Governor's Golden Dome Leader of the Year award within the Department of Public Health.

* Don McCormick is the editor of Iowa Health Focus.



Planned and 'real' challenges part of exercise

By Don McCormick*

Approximately 1,500 participants took part in a functional and full-scale pandemic influenza exercise sponsored by the Iowa Department of Public Health (IDPH), April 9-12. The exercise, called Operation SPRING (Survey of Pan-flu Readiness in Iowa, the Nation, and the Globe), was unique in that it was the first in the nation to test the federal government's plan for distributing antiviral medication during a pandemic.

"All participating agencies were professional and worked together extremely well," said Bill Yeager, coordinator of the Wayne County Emergency Management Agency. "We had an incredible response to our request for first responders to report at the (antiviral) point of delivery, which was impressive given the exercise was simulated in the middle of the work day."

Other participating counties included Cass, Clay, Chickasaw, Dallas, Dubuque, Lucas, O'Brien, Polk, and Pottawattamie. Participants came to the exercise from a variety of disciplines, including animal services, businesses, elected local officials, emergency management, emergency medical services, environmental health, law enforcement, public health, hospitals, public information, and schools.

Weather plays an unexpected role

Mother Nature was also a participant on the third day of the exercise. She provided a real world challenge by dumping unseasonable snow and ice over large parts of the state. After leaving the receipt, storage, and staging facility in Polk County, the front of one truck carrying supplies to Dubuque became so packed with snow that it overheated. Another shipment headed in the same direction was slowed down after its escort vehicle went into a ditch due to road conditions.



Retired elementary school teacher Lana Schrock reviews registration papers as community volunteers line up to receive medication as part of Operation SPRING in Adel, Dallas County.

IDPH [Center for Disaster Operations and Response](#) Bureau Chief, Rebecca Curtiss said that the weather supported the premise that unexpected circumstances do occur and that Iowa needs to be ready when they do. "Even in the controlled environment of an exercise, we treat every piece of information as real and act accordingly," Curtiss said. "While exercise play may have slowed down a bit due to the weather conditions, there was no doubt the state was able to handle this. Every single thing, real or simulated, that happens during an exercise improves our ability to respond to public health emergencies."

Recovery tabletop another first

IDPH Education/Exercise Coordinator, DeAnne Sesker noted that response means much more than handling short-term needs. "With that in mind, the final day of the exercise included a tabletop session that focused on things Iowa would have to do to recover from such a large scale public health emergency," Sesker said. "Using an extended scenario as a foundation for discussion, participants discussed such issues as community services, finan-

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Preparedness messages delivered across Iowa

By Nicole Peckumn*

Communities across the state explored ways to help vulnerable populations prepare for public health emergencies during National Public Health Week (NPHW), April 2-8. Statewide, local public health agencies and other organizations sponsored events and activities for the week, including recognizing Monday, April 2, as Protect Iowa Health Day.

Organized by the [American Public Health Association](#) for the past 12 years, NPHW focused this year on "Preparedness and Public Health Threats: Addressing the Unique Needs of the Nation's Vulnerable Populations." In Iowa, those populations included mothers with young children, hourly-wage workers, and people with chronic illnesses and disability. K-12 schools and preschools were encouraged to prepare for public health emergencies.

Activities in Iowa were supported by the efforts of the [Iowa NPHW Workgroup](#), which consisted of 32 leaders from across Iowa, representing education, elder affairs, health care providers, Iowa's public health association, public health, state and federal agencies, and workforce development.

"Every Iowa household needs to be prepared for the unexpected," said Mary Jones, director of the Division of Acute Disease Prevention and Emergency Response at the Iowa Department of Public Health (IDPH). "Local and state response

officials work hard to ensure our communities are ready. It's just as important that Iowans take personal responsibility and be part of the preparedness efforts."

The percentage of Iowans preparing for an emergency has doubled to 32 percent since the start of the [Protect Iowa Health](#) campaign. Protect Iowa Health, launched in 2005 by IDPH, local public health, hospitals and emergency medical services, educates Iowans about personal preparedness and the role of public health in emergencies.

Grocery stores help deliver messages

The [Cerro Gordo County Department of Public Health](#) worked with three grocery stores in Mason City to help residents learn about the importance of creating an emergency supply kit. Michele Appelgate, public information officer and Jodi Willemsen, public health preparedness service manager, coordinated efforts at each store to display a shopping cart filled with emergency prepared-



School nurse Jolene Peters visits Shannon Hansen's first grade classroom at Jefferson Elementary to show students an emergency kit. Photo Courtesy of Greene County Medical Center.

ness items. Resources were also featured, including the Pandemic Flu Tool Kit created by the Cerro Gordo County Department of Public Health.

Hy-Vee and Fareway store managers provided a customer prize drawing for all the items in each shopping cart. In order to enter the drawing, customers completed a preparedness survey.

"Our grocery store partners went above and beyond to make this project a success," said Appelgate. "Through this partnership, hundreds of residents were educated about the importance of having an emergency supply kit."

Serving others requires personal preparedness

In Independence, the Buchanan County Public Health Department educated the county's health

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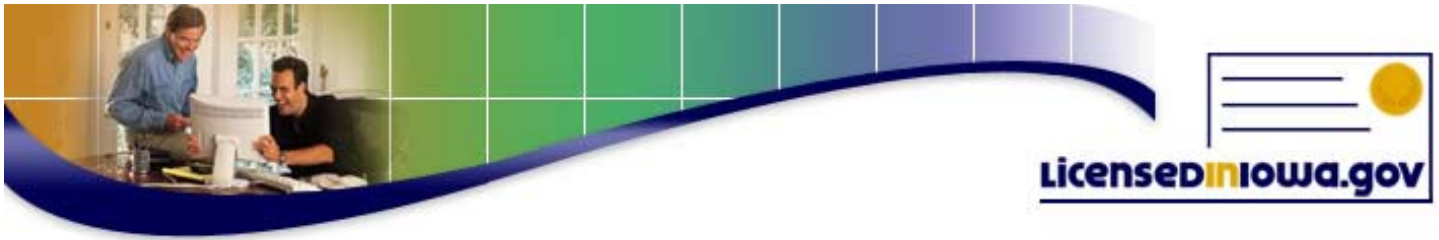


Iowa Department of Public Health

Advancing Health Through the Generations

Online license renewal, verification now available for more professions

By Eileen Gloor*



A new online process makes renewing a license to practice a health-related profession easier, more convenient, and faster for more than 42,000 Iowans and 5,000 businesses. Additionally, for no charge, employers, licensees and the public may now verify and print the licensure status of professionals and establishments regulated by the [Bureau of Professional Licensure](http://www.idph.state.ia.us/licensure) at the Iowa Department of Public Health (IDPH). Both services can be done through a new Web site, www.licensediniowa.gov.

"We hear from licensees and employers throughout the state that these services make a difference because they are easy and save valuable time," said Karla Hoover, an assistant to six professional licensure boards at IDPH.

Individuals with an active license now receive a postcard as a reminder to renew their license online. A licensee can renew online up to 60 days before the current license expires and must verify that continuing education requirements have been met. Renewing a license can be completed 30 days after the current license expires but requires a \$60 late fee. Those

choosing not to renew online may download a paper renewal form at www.idph.state.ia.us/licensure or call 515-281-0254.

"The best part is that licensees who renew online can't make mistakes like forgetting to send a check or skipping an answer," said Hoover. "They immediately know they have renewed successfully and this may save the cost of a late fee for returned materials."

IDPH's Bureau of Professional Licensure has 19 licensure boards regulating 39 professions, including: athletic training, barbering, chiropractic, cosmetology arts and sciences, dietetics, hearing aid dispensers, massage therapy, marital and family therapy, mental health counselors, mortuary science, nursing home administrators, optometry, physical and occupational therapy, physician assistants, podiatry, psychology, respiratory care, sign language interpreters and transliterators, social work, and speech pathology and audiology.

** Eileen Gloor is chief of the IDPH Bureau of Professional Licensure*

Kelly Wessels (center) and her employer, [Fox 47](http://www.fox47.com), were recipients of the 2007 Public Health Partnership Award from the [Cerro Gordo County Department of Public Health](http://www.cerrogordocountyia.gov). Wessels and Fox 17 were recognized for their continuous partnership in the department's ongoing efforts to build a healthy community. Pictured here with Health Director, Ron Osterholm and Public Information Officer, Michele Appelgate, Wessels accepted the award at the county's Board of Health meeting in April.



Iowa Department of Public Health

Advancing Health Through the Generations

Stroke: a young family's story

The following is taken from a speech given by Ellen Pieper and her 9-year-old son, Calvin, at two events this year to raise awareness about stroke.

Calvin:

Can you believe this woman is a stroke survivor? She doesn't exactly fit the stereotype, does she? My mom eats mostly healthy foods, exercises every day, and doesn't drink alcohol, smoke, or do drugs. And you know what...she was like that long before I was born. That didn't protect her from having a massive stroke just before my second birthday, though.

You shouldn't really be too surprised by that. After all, stroke is the number one cause of long-term disability and number three cause of death in America. Only heart disease and cancer kill more Americans each year.

My mom didn't have any stroke risk factors but one of the main arteries in her brain had a blow-out anyway. You can't tell from looking at her, but she almost died. The doctors told Dad she had a 10 percent chance of living, and look at her now! Of course it probably helped that she was only 33 at the time and that she takes good care of herself. Mom was in the hospital for four months and had to have brain surgery three times.

I was too young to remember when Mom had her stroke, but she and Dad have explained it to me. That's probably why I know more about stroke than most people 10 times my age. That's why Mom doesn't have any trouble getting my brother and me to wear helmets when we ride our bikes. She's also been helping us learn the warning signs of stroke. You're never too old or too young to learn them. Mom learned them a few years too late for her own good but now she goes around trying to get others to learn them, too.

The parts of Mom's brain that got lost caused some changes in our family. I was so young when it happened Mom will have to tell you about that...

Ellen:

Well, for starters, I don't work outside the home anymore. You see, living with a brain injury is incredibly tiring. If I try to forge ahead when I'm tired, things don't go so well. It's like my brain just shuts down. When that happens, I may have an entire conversation with someone and have no recollection of it as soon as we're done talking. It just flows right through my brain like it never happened! That means my family has to plan ahead when they need to tell me something, otherwise a miscommunication is likely to occur.

One really weird thing I have to deal with now is my "new" sense of smell. I couldn't smell anything for about six years after my stroke and then, WHAM! One day it was back. The bad news is that some of the wiring related to my sense of

smell got scrambled. As a result, I'm now allergic to some smells and have to carry medicine with me in case I get too close to a smell that makes it hard for me to breathe.

One thing I have to watch very carefully is the tendency to lose my temper more quickly and severely than I'd like. After figuring out what it feels like when I'm about to blow a gasket, I made a deal with Grant and Calvin. When I tell them I feel a snap coming on, they know they've pushed their luck too far and need to shape-up!

A related problem is what I call flooding. Sometimes I start crying about something without any warning. If we're out in public and I have enough warning, I tell the boys we're under a flood watch. They know that means we'd better get moving unless they want to be seen with someone who's crying her eyes out.

These annoyances make life a bit challenging but I'm incredibly grateful to be alive.



Stroke warning signs include:

- ♥ Sudden numbness or weakness of the face, arm or leg
- ♥ Sudden confusion or trouble communicating
- ♥ Sudden trouble walking, dizziness or loss of balance or coordination
- ♥ Sudden trouble seeing in one or both eyes
- ♥ Sudden severe headache with no known cause

If given within three hours, a clot-busting drug can reduce long-term disability for the most common type of stroke.

Operation SPRING gets great local support

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cial, economic, and mental health recovery.”

Observers pointed out that Iowa was the first in the nation to include a recovery tabletop as part of an exercise like this.

Exercise builds capacity of local areas

Overall, the exercise was a success, local partners reported. “We were able to participate on a higher level to prepare us for a public health emergency,” said Lynn Royer, incident commander in Dallas County during the exercise. “We were prepared at a local level and had exercised various aspects of our plans. In this exercise, we as a county were able to exercise the entire county and various plans.”

“This exercise was unique in that several community partners that have not been involved in previous community disaster drills, worked well together to focus on planning and the impact on



Iowa Health Alert Network Chief, Tom Boeckmann, and IPDH Communications Officer, Nicole Peckum participated from the Joint Forces Headquarters in Johnston.

our community in the event of a pandemic influenza outbreak,” said Alice Prochaska, chairperson for Emergency Preparedness at Mercy Medical Center-Dubuque. “The drill exposed our weaknesses and strengths. It also focused on recovery and how a community needs to work together to heal following such an event.”

“From start to finish, the local jurisdictions had a phenomenal amount of support from policy makers,” Sesker added. “In an actual emergency, local boards of health and supervisors would be involved in the response. Their participation in Operation SPRING gave them insight into the kinds of decisions they would be faced with to make for their own county.”

** Don McCormick is the editor of Iowa Health Focus.*

Quad City residents are reminded that child abuse hurts children through three billboards placed in central Davenport and Bettendorf. The billboards, which ran throughout April to recognize National Child Abuse Prevention Month, are supported by IDPH funding for Iowa's [Child Protection Centers](#).



Iowa Department of Public Health

Advancing Health Through the Generations

Local partners foster preparedness during NPHW

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center employees about the importance of personal preparedness.

"We are not prepared to serve others, until we first prepare ourselves," said Buchanan County Public Health Director, Amy Marlow. "It will be difficult for health care workers, or any helping profession, to leave their families to report to duty if their family is not prepared."

A hallway of the facility was decorated with preparedness messages and provided ideas on how employees can prepare for specific public health emergencies such as disease outbreaks and natural disasters. Information was displayed regarding preparedness, including a family prepared-

ness kit. Facility employees were sent email communication highlighting preparedness, received copies of the Protect Iowa Health guidebook and watched a DVD on preparedness.

Kids take messages home

First grade students at Jefferson-Scranton Elementary School in Jefferson received a valuable lesson from School Nurse Jolene Peters. Peters had examples of many items recommended for such a kit and urged children and parents to talk about being prepared in the case of an emergency.



To win the shopping cart full of emergency supplies, store visitors had to complete a brief survey. This helped the Cerro Gordo County Department of Public Health determine the level of current preparedness among those who entered the drawing.

"Enlisting the help of children in the preparedness process involves them in sharing this safety message with their families," said Peters, who is also a member of the the Greene County Medical Center Public Health Department staff. "Being prepared is another of the important safety and health concepts we convey to children who become our partners in preparing for emergency situations."

For a list of activities held across the state and to view resources

provided by the Iowa NPHW Workgroup this year, visit www.idph.state.ia.us/do/nphw_2007.asp.

** Nicole Peckumn was a communications officer at IDPH during National Public Health Week.*



protectiowahealth.org



Iowa Department of Public Health

Advancing Health Through the Generations

New directions discussed at Public Health Conference

By Lilian Hu*

The 2007 Iowa Public Health Conference brought together 550 public and environmental health professionals from across the state to discuss "New Directions in Public Health." Held in Ames April 3-4, the conference offered more than 40 concurrent sessions, poster sessions and statewide association meetings.

Mary J. Jones, who was serving as interim director of the Iowa Department of Public Health (IDPH) at the time, opened the event. She began by looking back at a few of public health's notable accomplishments since 1900, including the increase in average life expectancy from 40 to 80 years.

"The past successes of public health were accomplished with very little fiscal investment - less than 3 percent of the total health dollar," Jones pointed out. "But minimal investment will no longer work. The dramatic increase in life expectancy achieved by public health efforts has resulted in one of our greatest challenges today—an aging population. This means that the focus of public health must turn to health span versus life span."

New draft of standards released

The Work Group for [Redesigning Public Health in Iowa](#) released a new draft of the Iowa Public Health Standards at the Public Health Conference on April 3, 2007. This new version adds state-level responsibilities to the standards developed in 2006. Several standards were rewritten to fit both local and state responsibilities and several local criteria were added to reflect ongoing discussions about what is expected from local and state public health.

The standards are available on the Redesigning Public Health Web site, www.idph.state.ia.us/rphi. The Work Group is asking for comments and suggestions about the state criteria in the Iowa Public Health Standards from all interested parties now through June 1, 2007. Comments can be made through the Web site or to Martha Gelhaus, Iowa Department of Public Health, mgelhaus@idph.state.ia.us or 515-242-5224.

The two-day conference featured three key speakers. The first was Mike Fraser, deputy executive director of the [National Association of County and City Health Officials](#). In his light-hearted yet thought-provoking presentation, *New Directions in Local Pub-*

lic Health—A National Perspective, Fraser discussed how intersections of public health and other disciplines have led to changes for many public health practitioners. He also introduced a new method of branding public health—a logo designed to be as recognizable as a police badge or emergency medical services symbol.

The second day of the conference opened with a presentation by Terie Dreussi-Smith, a trainer, grant writer, and social program manager for youth-based service agencies, community coalitions and schools. Her presentation, *Bridging Into Health and Wellness: Why Should Poverty Matter*, covered the importance of providing bridges out of poverty. "People in poverty are problem solvers," she reminded participants. "They need to be brought to the table."

The final featured speaker, Steve Siemens, founder and CEO of [Siemens People Builders](#), gave a motivational speech titled *Staying Up in an Upside-down World*. His entertaining presentation was a fitting end to a conference at which people considered how to achieve the goals defined by new directions in public health. "Do whatever it takes," Siemens said, "and then some."

* Lilian Hu is an intern in the IDPH Office of Community Education and a Master of Public Health student at the University of Iowa College of Public Health.



The new logo for public health uses a three-point symmetry to illustrate the three core functions of public health: prevention, promotion and protection.

Innovative approaches to reach Iowa teens during Adolescent Pregnancy Prevention Month

By Lindsay Miller and Carol Hinton*

Despite significant progress during the past decade, 34 percent of teen girls in the United States become pregnant at least once before age 20. The vast majority (78 percent) of these teen pregnancies are unintended. To combat this daunting statistic, the Iowa Department of Public Health (IDPH) and local partners are reaching out to teens during Adolescent Pregnancy Prevention Month in May by encouraging them to take an online quiz and enter the Stay Teen contest.

"In order to keep Iowa's teen pregnancy rate on the decline, we must reach out to teens with developmentally appropriate messages in the environments in which they spend the most

time," said Jane Borst, chief of the IDPH [Bureau of Family Health](#). "For many teens, this is on the Internet. We must ensure that our youth are educated and provided with the information and resources they need to make the best, positive, healthy choices."

The online quiz, developed by the [National Campaign to Prevent Teen Pregnancy](#), is available at www.teenpregnancy.org. Hundreds of Iowa teens are expected to participate in the short, engaging, and informative quiz that asks users to reflect on the best course of action in a number of tough and realistic sexual situations.

The National Campaign is also launching a new public service ad campaign for teens beginning in May. The new series of ads, tied together with the theme "Stay Teen," is a bold, innovative approach to delivering a teen pregnancy prevention message to young people that will work well in the media environments where they spend the most time: on TV, online and in print media.

As part of the Stay Teen launch, the National Campaign partnered with MySpace.com, a social networking Web site, which many Iowa teens frequent-

Iowa partners in Adolescent Pregnancy Prevention Month

[Family Planning Council of Iowa](#)

[FutureNet](#), Iowa's network for adolescent pregnancy prevention, parenting and sexual health

[i am](#), Iowa's Abstinence Mission

Iowa Department of Public Health

[Iowa Department of Human Services](#)

Local community-based agencies

ly visit. Iowa teens are able to visit MySpace and enter a contest that allows them to create their own ads. If they win, their work will be featured prominently on MySpace, StayTeen.org and possibly on national broadcast, cable and Internet outlets.

For more information about the National Campaign to Prevent Teen Pregnancy, please visit the National Campaign's web site at www.teenpregnancy.org/national.

** Lindsay Miller is the Abstinence Education program coordinator at IDPH. Carol Hinton is the Adolescent Health program coordinator at IDPH.*



Iowa Department of Public Health

Advancing Health Through the Generations

Reporting system gets positive test results

By Joyce Allard*

The [Iowa Disease Surveillance System](#) (IDSS), a Web-based tool being developed to modernize and streamline disease reporting in Iowa, underwent an important performance test on April 5. The goal of the test was to see what would happen when 30 users performed the same action at the same time.

"IDSS has been designed to minimize the delays that sluggish Internet communication can cause," said John Satre, IDSS coordinator at the Iowa Department of Public Health (IDPH). "However, there are communication points where information is pushed to and from user terminals and the IDSS central database. Disease reporting is time-sensitive so we had to find out what kind of 'wait time' this test would produce."

Positive test results and user feedback

Overall, the results of the tests were positive. The tests targeted routine steps necessary for reporting and investigation. Average response times for these steps ranged from under two seconds to 11 seconds.

Other tests focused on the process of generating reports. Average response times for producing a report was between 15 and 47 seconds. The bottom line was that IDSS proved responsive enough to allow a user to complete his or her work with less than one minute of total wait time. This greatly streamlines current reporting methods.



Commissioned by IDPH, the new reporting system began its current pilot phase on March 13. When completely functional, IDSS will serve as a single, consistent, and secure source of information for everyone involved with infectious diseases.

The new system will not change underlying epidemiologic methods or the existing list of reportable diseases in Iowa.

"Using IDSS is an efficient way to receive, gather, and store reportable disease information," said Johnson County Public Health Nurse, Annette Scheib. "I like the ease of use of IDSS and the fact that it will be a paperless system."

Julie Slater, manager of the Iowa Methodist Medical Center Laboratory, also said the new system is easy to use. "I think it will streamline the disease reporting processes to which it is applicable," Slater said. "I hope that we will soon be reporting our positive HIVs this way also."

Statewide implementation, second stage coming soon

Work towards the statewide roll-out of the IDSS application to local public health agencies and hospitals is underway. Facilities have already started returning information to IDPH, such as identifying users at their facilities for training, which is scheduled for July and early August of this year.

A second phase of development is planned and should begin shortly. The main focus of this second phase will be to establish electronic laboratory reporting from the University Hygienic Laboratory before expanding this method of reporting to larger facilities in Iowa and national laboratories.

For more information, visit www.idph.state.ia.us/adper/idss.asp.

* Joyce Allard is the community education coordinator at IDPH.



Iowa Department of Public Health

Advancing Health Through the Generations

IDPH

Team Voices

Office of Multicultural Health

Recently, Janice Edmunds-Wells, a consultant for the **Office of Multicultural Health (OMH)** spoke to **Focus** about the office and its role within IDPH and the state.

What is OMH's mission?

We recently completed a new strategic plan with a three-part mission: to reduce health disparities; to assure that a sufficient, appropriate and effective infrastructure exists to address the health care needs; and to build public, professional and policymaker support for programs and policies to improve the health of the people we serve. Our target populations include minorities, migrants, immigrants and refugees and their families.

What programs and services does OMH provide to accomplish this mission?

We provide consultation from community-based groups to national organizations. For example, I recently provided technical assistance for a city-wide health fair in Cedar Rapids started by a community church group. The health fair included culturally appropriate material and information. It had over 40 vendors and 300 attendees.

Another program under the OMH is the Refugee Health Services. This program provides health assessments and follow-

up care for refugees and assists health care providers and refugees in managing health problems.

What does "multicultural" mean? It doesn't just mean minority or immigrant populations, does it?

That's right. The word "multicultural" encompasses much more. It includes generational differences; grandparents versus the next generations, for example, need to be reached in different ways. But they are not the only populations. I like to say that Iowa is a little hidden treasure. It affords a lot of people with a lot of opportunities.

Who partners with OMH and how have those partnerships been advantageous?

OMH transcends all public health programs. There is no area that OMH does not touch. We partner with all IDPH divisions and bureaus and many national organizations such as the American Cancer Society. These partnerships increase resources, networks, collaborations within state, regional, local, county, and city entities regarding services, education and awareness

about multicultural health issues.

It seems Iowa's population is becoming more diverse. What does this mean for public health?

Between 1990 and 2000, Iowa experienced a 97 percent increase in its minority population and is ranked eighth in the U.S. in minority population growth. Each culture has its own set of health issues and beliefs. We need to do assessments so that we know how to address this diversity.

What challenges has OMH faced?

Limited staff has been our biggest challenge.

Now that our new five-year strategic plan is complete, we hope to expand our program.

What is coming up for OMH?

We plan to activate the OMH Advisory Council and expand the number of multicultural health coalitions in Iowa. Currently, there are only two: Polk County Minority Health Coalition and Blackhawk County Minority Health Coalition. Expansion will lead to increased support, visibility, networks, and advocates for multicultural health and help accomplish our mission.



An important part of Edmunds-Wells' job is keeping informed of trends in multicultural health and sharing ideas across Iowa.

Special pictorial feature: Iowa's Mobile Health Care Facility

On March 30, the Iowa Department of Public Health's Logistical Support and Response Team set up several Mobile Health Care Facility (MHCF) structures at Lake Ahquabi near Indianola. The activity provided support for the "Polar Plunge" Special Olympics Fundraising event and gave the team an opportunity to train new members.



1. All MHCF structures are transported in sturdy, weather-resistant metal containers that can be opened quickly.

2. Ease of assembly allows volunteers to assist with shelter set up.



3. The roof (shown here) and sidewalls include an insulation package.

4. Electrical outlet strips and light fixtures are installed.



6. The shelter is now ready for use. Iowa has seven MHCF structures, all of which may be connected to one another depending on need.



5. All shelters include heating and air conditioning units.



Governor's Homeland Security Conference, July 16-18

The [Iowa Homeland Security and Emergency Management Division](#) will host the fourth annual [Governor's Homeland Security Conference](#), July 16-18 at the Polk County Convention Complex in Des Moines. This year's theme is "Teaming for Success."

Plenary sessions on day one include presentations from:

Richard Hainje, regional administrator, [FEMA Region VII](#) on The New FEMA;

Anthony Cahill, director, Division of Disability and Health Policy, [Center for Development and Disability](#), University of New Mexico School of Medicine on Planning for Special Needs People;

Dr. Haven Simmons, associate professor, [Salisbury University](#) on The Need for Public Information Officers; and

John Metzgar, primary firearms instructor and Firearms Training Systems Simulation instructor from the [Iowa Law Enforcement Academy](#) on Planning for School Terrorism.

Breakout sessions on day two include: developing training; special needs planning; utilization of the public information officer; automated critical management systems; Safeguard Iowa; the hazards of e-85 production; National Incident Management System requirements and compliancy issues; alert notification systems; homeland security grants; exercise issues; and lessons learned information systems.

For more information or to register, visit www.iowahomelandsecurity.org and click on the conference link at the top of the page.



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Iowa Department of Public Health

Lucas State Office Building
321 E. 12th Street
Des Moines, IA 50319-0075
Phone: 515-281-7689
www.idph.state.ia.us

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