

GRANTEE Update

May 25, 2009

The Update is a bi-weekly Web newsletter published by the Iowa Department of Public Health's Bureau of Family Health. It is posted the second and fourth week of every month, and provides useful job resource information for departmental health care professionals, information on training opportunities, intradepartmental reports and meetings, and additional information pertinent to health care professionals.



Diabetes and Pregnancy

Diabetes is often detected in women during their childbearing years and can affect the health of both the mother and her unborn child. Poor control of diabetes in a woman who is pregnant increases the chances for birth defects and other problems for the baby. It might cause serious complications for the woman, also. Proper health care before and during pregnancy will help prevent birth defects and other poor outcomes, such as miscarriage or stillbirth.

Diabetes is a condition in which the body cannot use the sugars and starches (carbohydrates) it takes in as food to make energy. The body either makes too little insulin in the pancreas or cannot use the insulin it makes to change those sugars and starches into energy. As a result, the body collects extra sugar in the blood and gets rid of some sugar in the urine. The extra sugar in the blood can damage organs of the body, such as the heart, eyes, and kidneys, if it is allowed to collect in the body too long. The three most common types of diabetes are type 1, type 2 and gestational.

How does gestational diabetes differ from type 1 or type 2 diabetes? Gestational diabetes happens in a woman who develops diabetes during pregnancy.

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Diabetes and Pregnancy *continued*

Some women have more than one pregnancy affected by diabetes that disappears after the pregnancy ends. About half of women with gestational diabetes will develop type 2 diabetes later.

If not controlled, gestational diabetes can cause the baby to grow extra large and lead to problems with delivery for the mother and the baby. Gestational diabetes might be controlled with diet and exercise, or it might take insulin as well as diet and exercise to get control.

Type 1 and type 2 diabetes often are present before a woman gets pregnant. If not controlled before and during pregnancy, type 1 and type 2 diabetes can cause the baby to have birth defects and cause the mother to have problems (or her problems to worsen if they are already present), such as high blood pressure, kidney disease, nerve damage, heart disease, or blindness. Type 1 diabetes must be controlled with a balance of diet, exercise, and insulin. Type 2 diabetes might be controlled with diet and exercise, or it might take diabetes pills or insulin or both as well as diet and exercise to get control.

How can a woman with diabetes who wants to get pregnant prevent problems to herself and her baby?

Plan the pregnancy. It is very important for a woman with diabetes to get her body ready before she becomes pregnant.

See her doctor. Her doctor needs to look at the effects that diabetes has had on her body already, talk with her about getting and keeping control of her blood sugar, change medications if needed, and plan for frequent follow up.

Monitor blood sugar often. A pregnant woman with diabetes needs to check her blood sugar more often, sometimes 6 to 8 times a day, which might be higher than when she is not pregnant.

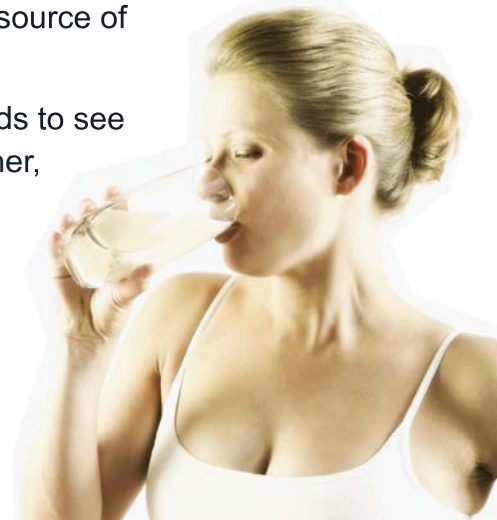
Take medications on time. If insulin is ordered by a doctor, a pregnant woman with diabetes should take it when it's needed.

Control and treat low blood sugar quickly. Keeping tight blood sugar control can lead to a chance of low blood sugar at times. A pregnant woman with diabetes should have a ready source of carbohydrates, such as glucose tablets or gel, on hand at all times.

Follow up with the doctor regularly. A pregnant woman with diabetes needs to see her doctor more often than does a pregnant woman without diabetes. Together, the woman can work with her doctor to prevent or catch problems early.

For more information, go to www.cdc.gov/Features/DiabetesPregnancy.

Controlling diabetes before and during pregnancy will help prevent birth defects and other poor outcomes, such as miscarriage or stillbirth.



Program Management

Bureau of Family Health Grantee Committee Meeting

The next Bureau of Family Health Grantee Committee Meeting is scheduled for June 18, 2009 from 9-11 a.m. via the ICN. A listing of ICN sites and a draft agenda are available on pages 7-9 of **The Update**. *This is a required meeting for Bureau of Family Health contract agencies.*

Effective Strategies to Budget Reductions

Information presented during the *Effective Strategies to Budget Reductions* phone conference held on May 7, 2009 is available on pages 10-12 of **The Update**.

Supporting Healthy Communities Through the American Recovery and Reinvestment Act of 2009

Funds from the American Recovery and Reinvestment Act of 2009 that President Barack Obama recently signed into law provide state and local policy-makers with an opportunity to create healthier environments for children and families. To learn how recovery act funds can be used to increase opportunities for physical activity and access to healthy foods in your community, go to www.leadershipforhealthycommunities.org/index.php?option=com_content&task=view&id=274.

First Years First Notice of Available Funding - Update

The Iowa Department of Management, Office of Empowerment, would like to update communities on the status of First Years First funding, given that there was a \$2 million reduction in First Years First funding. The department has now been approved to move forward with the remaining funding (approximately \$200,000), which will reduce the number of projects to be funded. The RFP is due to be released on June 24, 2009 and can be accessed from the Iowa Empowerment Web site.

If you have questions, please submit these in writing to Sonni Vierling at sonni.vierling@iowa.gov. These questions will be compiled into a Frequently Asked Questions document as a companion piece to the RFP.

First Years First Q & A RFP Questions are available on page 13 of **The Update**.

W O R T H N O T I N G

New Dental Provider Type to Improve Access in Minnesota

by Tracy Rodgers, IDPH Oral Health Bureau

On May 16, Minnesota's governor signed a bill into law creating a new dental provider type as a means to improve access to care for underinsured Minnesotans. The bill was passed with overwhelming legislative support.

Two new practitioner types are now recognized - a dental therapist and an advanced dental therapist. Figure 1.1 (page 14 of **The Update**) outlines the education, supervision and scope of practice for each therapist level.

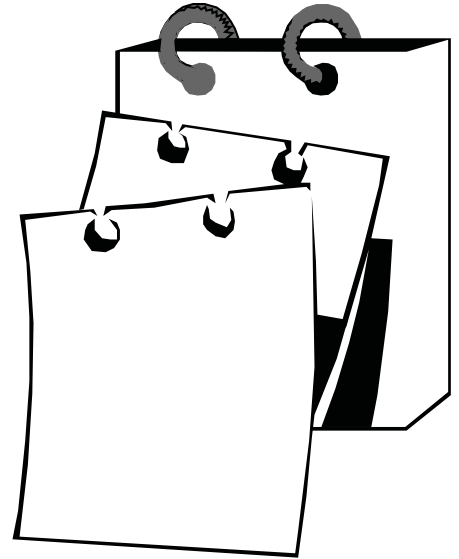
The University of Minnesota (UM) will offer a four-year dental therapist program. The four-year program will not require participants to have prior dental experience. In addition, UM and the Minnesota state college system will offer a two-year master's program to dental hygienists who have a baccalaureate degree in dental hygiene for the advanced dental therapist provider level. Courses will begin this fall.

The Minnesota Board of Dentistry will report to the state legislature in January 2014 regarding the dental therapists' effect on delivery of services. In Iowa, stakeholders will be closely monitoring the impact of the therapist model in Minnesota. Although programs like I-Smile™ have advanced oral health in our state, there is still a great need for affordable and accessible care, such as the early interceptive treatment that will be available through dental therapists in Minnesota. As we work to build a system that addresses equitable access to dental care for all Iowans, it will be important to use lessons learned in other states in developing our state policies.

Although programs like I-Smile™ have advanced oral health in our state, there is still a great need for affordable and accessible care, such as the early interceptive treatment that will be available through dental therapists in Minnesota.



CALENDAR OF EVENTS



May 21, 2009

20th Annual Breastfeeding Conference

8:45 a.m. - 4 p.m., Sheraton in West Des Moines

For more information, contact Holly Szcodronski at (515) 281-5024.

June 10-11, 2009

2009 Immunization Statewide Conference (The evening of the 10th will begin with a lecture by Dr. Paul Offit and end with a small awards ceremony. June 11th will be the full conference day with nationally known speakers including Dr. Paul Offit, Dr. William Atkinson, Dr. Steven Rinderknecht, Dr. Jody Murph, and Dr. Ari Brown).

6-9 p.m. (Day 1)

8 a.m. - 4 p.m. (Day 2)

Hy-Vee Hall, Downtown Des Moines, 730 3rd Street

For more information, contact Bridget Konz at 1-800-831-6293, ext. 7.

*June 18, 2009

Bureau of Family Health Grantee Committee Meeting

9-11 a.m., ICN

For more information, contact Heather Hobert Hoch at (515) 281-6880 or hhobert@idph.state.ia.us.

*Required meeting

GRANTEE Update

Phone Directory

Bureau of Family Health: 1-800-383-3826

Teen Line: 1-800-443-8336

Healthy Families Line: 1-800-369-2229

FAX: 515-242-6013

NAME	PHONE	E-MAIL
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Wheeler, Denise	281-4907	dwheeler@idph.state.ia.us

Area code is 515

BUREAU OF FAMILY HEALTH GRANTEE COMMITTEE MEETING
June 18, 2009
9-11 a.m.
ICN Sites

<p>Ames Iowa State University – 7 Lagomarcino Hall, Room N147 Corner of Knoll Road and Pamel Drive Phone: 515-294-4111 Primary Local Site Contact: <i>Dustin Hiatt – 515-294-9428</i></p>	<p>Grinnell Iowa Valley Community College 123 6th Avenue West, Room 121 Phone: 641-236-0513 Primary Local Site Contact: <i>Diane Karr - 641-236-0513</i></p>
<p>Anamosa Anamosa High School 209 Sadie Street, Room 113 Phone: 319-462-3594 Primary Local Site Contact: <i>Liz Scott – 319-462-3594 x211</i></p>	<p>Hiawatha Hiawatha Public Library 150 West Willman Street, Meeting Room Phone: 319-393-1414 Primary Local Site Contact: <i>Pat Struttmann – 319-393-1414</i></p>
<p>Bedford Bedford High School 906 Pennsylvania Avenue, Fiber Optic Room Phone: 712-523-2114 Primary Local Site Contact: <i>Cheryl Fletcher – 712-523-2114</i></p>	<p>Iowa City Iowa City Public Library 123 South Linn Street, Meeting Room D Phone: 319-356-5200 Primary Local Site Contact: <i>Brian Visser – 319-887-6025</i></p>
<p>Burlington Notre Dame High School 702 South Roosevelt Avenue Phone: 319-754-8431 Primary Local Site Contact: <i>Rosemary Smith – 319-754-8431 x358</i></p>	<p>Marshalltown Marshalltown High School 1602 South 2nd Avenue, Room 173 Phone: 641-754-1130 Primary Local Site Contact: <i>Al Paxson– 641-754-1130</i></p>
<p>Carroll DMACC –Carroll Campus 906 North Grant Road, Room 144 Phone: 712-792-1755 Primary Local Site Contact: <i>Jane Riley - 712-792-8317</i></p>	<p>Mason City North Iowa Area Community College - 1 500 College Drive, Activity Center, Room 106 Phone: 641-423-1264 Primary Local Site Contact: <i>Linda Rourick – 641-422-4336</i></p>
<p>Cedar Rapids Kirkwood Community College 6301 Kirkwood Boulevard SW, Linn Hall, Room 203B Phone: 319-398-5452 Primary Local Site Contact: <i>Jan Robertson – 319-398-5452</i></p>	<p>Muscatine Muscatine Community College 152 Colorado Street, Larson Hall, Room 60 Phone: 563-288-6001 Primary Local Site Contact: <i>Jeff Armstrong - 563-288-6001</i></p>
<p>Council Bluffs Iowa School for the Deaf - 2 3501 Harry Langdon Boulevard, 1st Floor Phone: 712-366-3647 Primary Local Site Contact: <i>Christy Nash – 712-366-3647</i></p>	<p>Ottumwa Great Prairie AEA 1 2814 N Court Street Phone: 641-682-8591 Primary Local Site Contact: <i>Shirley Walker – 641-682-8591 x5220</i></p>

<p>Creston Creston High School 601 West Townline Road, Room 404 Phone: 641-782-2116 Primary Local Site Contact: <i>Jeff Norman – 641-782-2116</i></p>	<p>Pleasantville Pleasantville High School 415 Jones Street, Room 18 Phone: 515-848-0541 Primary Local Site Contact: <i>Rose Mary Thiel – 515-848-0562</i></p>
<p>Davenport Eastern Iowa Community College - 1 326 West 3rd Street, Kahl Educational Center, Room 300 Phone: 563-336-5200 Primary Local Site Contact: <i>Jane Voss – 563-336-5228</i></p>	<p>Remsen Remsen–Union High School 511 Roosevelt Phone: 712-786-1101 Primary Local Site Contact: <i>Stacey Galles – 712-786-1101</i></p>
<p>Decorah Decorah Public Library 202 Winnebago Street Phone: 563-382-3717 Primary Local Site Contact: <i>Lorraine Borowski – 563-382-3717</i></p>	<p>Sioux City Department of Human Services Trospar-Hoyt County Services Bldg, 4th Floor 822 Douglas Street Phone: 712-255-0833 Primary Local Site Contact: <i>Linda Sanchez – 712-255-0833 x2000</i></p>
<p>*Des Moines – Origination Site State Library 3 East 12th and Grand Avenue, Ola Babcock Bldg, 3rd Floor Phone: 515-281-4316 Primary Local Site Contact: <i>Jackie Kokke – 515-281-4316</i></p>	<p>Storm Lake Buena Vista University - 1 610 West 4th Street, Technology Center, Room 7A Phone: 712-749-2218 Primary Local Site Contact: <i>Betty Rohr- 712-749-1880</i></p>
<p>Dubuque Senior High School 1800 Clarke Drive, Room A-123 Phone: 563-552-5500 Primary Local Site Contact: <i>Deb Oleson - 563-552-5521</i></p>	<p>Washington Kirkwood Learning Center 111 Westview Drive Phone: 319-653-4655 Primary Local Site Contact: <i>Nancy Rash- 319-653-4655</i></p>
<p>Fort Dodge Iowa Central Community College 1 Triton Circle, Library Bldg, Room 206 Phone: 515-576-7201 Primary Local Site Contact: <i>Kathy Goebel – 515-574-1103</i></p>	<p>Waterloo Department of Human Services Pinecrest Office Bldg, 1407 Independence Ave Phone: 319-291-2441 Primary Local Site Contact: <i>Vickie Westendorf – 319-292-2430</i></p>

*Origination site

BFH Grantee Committee Meeting
June 18, 2009
9-11 a.m.
ICN

*BFH Required Meeting

Draft

Agenda

9:00 a.m.	Call to Order Introductions & Roll Call	<i>Gloria Witzberger</i>
9:15 a.m.	Announcements Approval of Minutes FY10 Meeting Dates	<i>Gloria Witzberger</i> <i>Gloria Witzberger</i>
9:20 a.m.	Grantee Dialogue (Stimulus Dollars)	<i>Gloria Witzberger</i>
9:40 a.m.	Workgroup Reports	
10:00 a.m.	Questions for State Staff	<i>Heather Hobert Hoch</i>
10:15 a.m.	Budget/Legislative Update	<i>Jane Borst/Julie McMahon</i>
10:35 a.m.	Update on the Implementation of SF 389	<i>To be determined</i>
10:50 a.m.	I-Smile Media Campaign	<i>Tracy Rodgers/ Shaela Meister</i>
10:55 a.m.	Agenda Items for Next Meeting	<i>Gloria Witzberger</i>
	Adjournment	

*This is a required meeting for Bureau of Family Health contractors (Maternal Health, Child Health, and Family Planning).

Grantee Conference Call May 7, 2009

Effective Strategies to Budget Reductions

Allen Women's Health, Sandy Kahler

- Stopped home visits for MH clients (agency was losing \$20/visit).
 - Collaborated with partners (HOPEs, Early Head Start, OB dept., social services within hospital) to assure new moms would still receive parenting supports
- Reduced time/hours available to clients.
 - No longer seeing MH patients on Fridays.
- Cut nurses at WIC clinics in outlying counties.

Jane Borst

- Agency had to apply for an exception to policy and provide assurance that families would be served by community resources.
- Services must be available to every county in service area. Need to work with county on how to serve clients in those counties not being physically present..

Mid-Iowa Community Action, Lindsey Drew

- Benton County – ended services.
 - Provided letter notifying closing chart.
- Tama County – MH nurse working only 16 hours at WIC clinic.
 - Only allowed 10 home visits per month.
- Story County – eliminated two clinic days.
- Marshall County – eliminated four clinic days.
- Hardin County – eliminated one clinic day. No clinic in Ackley.
- Cut back staff hours

Kate Pergande

- Cut staff hours in CH and move staff to other programs, when possible.
- Clerk positions at WIC clinics not funded with CH dollars.
- HCCI only providing services funded through Empowerment.

Pat Hildebrand

- Cut contracts with PHN agencies.
 - No longer seeing MH patients on Fridays
- HCCI only providing services funded through Empowerment.
- Agency provided dollars for MCH programs.

Grinnell Regional Medical Center, Vicki Nolton

- Reduced the number of meetings (hosting and attending).
- Cut staff hours (especially MH) and tried to shift staff to other programs.
- Limited vouchers for uninsured children. Helped families apply for Medicaid and *hawk-i*.
- No longer covering prenatal classes – asking hospitals to cover as in-kind.
- No longer covering prenatal vitamins.

- Reduced contracts with other agencies.
- Notified local providers on how cuts will impact families served.

Unity Public Health, Mary O'Dell

- Reduced hours of WIC clinic in Louisa County.
- Reduced CCNC hours. Previous CCNC resigned, another nurse being trained.
- Interpreter now doing data entry rather than RN.
- Worked closely with LBOH in Muscatine County and received LPHS grant to provide health education for MCH families.
- Group/population-based education now rather than individual.

Budget Update

Julie McMahon

- Social Services Block Grant can be used in 85 counties declared disaster areas due to 2008 floods.
 - Grant effective 3/1 through June 2011.
 - Dubuque VNS did not qualify because agency had not expended 75% of funds.
 - Agencies who did not previously qualify can reapply for funds that begin July 1.
 - Funds can be used for MCH services - \$150,000 set aside for family support/home visiting.
- IDPH received a \$7.5 million cut to budget, but received \$3 million from stimulus distribution.
 - \$700,000 for elderly wellness (PHN & Home Care Aide)
 - Money will be used to create or restore positions and restore CH dollars to local agencies.
- \$4.2 million still to be cut from state budget.
- Important to educate public about impact of budget cuts. Legislators need to understand the impact on families.

Jane Borst & Kelly Schulte

- 1st Five sustainability RFP will be released May 15.
- The Dept. of Education has received nearly 4 million dollars of ARRA funds for IDEA Part C (Early ACCESS). Over 3 million of that allocation will be distributed to the AEAs according to the DE funding formula (Population and Poverty).
- AEAs have 75% of their allocation to spend on needs of their AEA and 25% of their allocation must be designated to strengthen system of services with Signatory Agency partners. Many AEAs have already started meeting with signatory partners (Title V, CHSC and DHS) to discuss collaborative projects for which they can use the 25% of their allocation.
- AEAs need to have their application for funding completed and turned in to the Dept. of Education by June 15. They have been provided with possible ideas of interagency projects and those ideas were sent to all Child Health Coordinators on 5/18/09 by Jane Borst. Funds are limited to the use of these ideas but should get AEAs thinking about possible options.

- Agencies encouraged to “get to the table” with AEAs.
- Emphasized that bureau has made significant cuts because of budget reductions.
 - Bureau no longer has capacity to respond as quickly to grantees.

Jane Borst

- Emphasized that bureau has made significant cuts because of budget reductions.
 - Bureau may not be able to respond as quickly to grantees as previously.

First Years First Q & A RFP Questions

Private Match

Q: Is a local foundation considered a local match?

A: Yes.

Q: Is a casino foundation considered private match?

A: Yes.

Q: If a member of your board is a member of a local foundation, would that be a conflict?

A: No, this is not a conflict provided that the member excuses him/herself from the board discussion related to the RFP.

Funding Cycle

Q: If the grant proposal includes expansion through the completion of a building project, how much of the new building must be complete within the grant time frame?

A: Completion must be within the two year time frame.

Q: Even though we applied for funds from the community foundation before the FYF RFP comes out, if we are awarded these funds and the community foundation gives their approval to be a business partner, could we use what we receive as our private sector match, even though we applied for it *before* FYF was ready?

A: Yes.

Applicants per CEA or County

Q: Will there be a maximum number of applicants per area or county?

A: No, the criteria for funding are based on the eligibility requirements and quality of projects submitted.

Q: How many awards will be awarded?

A: Given that there is a finite amount of funding available, this will be contingent on the amount of funding requested by and funding approved for applicants.

Coordinating with Empowerment Board

Q: What is meant by coordinating with Empowerment board?

A: Coordination includes a letter of support by the local empowerment board to ensure explicit approval. At a minimum, the local empowerment board will serve as a coordinating body between the proposed project and other existing early childhood programs in the area.

Eligibility

Q: Would a local government or 28E status be eligible to apply?

A: Yes.

Figure 1.1 Minnesota dental therapist and advanced dental therapist

Dental Therapist	Advanced Dental Therapist
Graduates from baccalaureate dental therapy education program	Graduates from master’s advanced dental therapy education program
Practices under supervision of a MN-licensed dentist (must have a written collaborative agreement)	Practices under supervision of a MN-licensed dentist (must have a written collaborative agreement)
Practices in settings serving low-income, uninsured, and underserved patients or in a dental HPSA	Practices in settings serving low-income, uninsured, and underserved patients or in a dental HPSA
<p>Under general supervision, may*:</p> <ul style="list-style-type: none"> • Provide education • Chart oral conditions • Take X-rays • Polish teeth • Apply fluoride and sealants • Test pulp vitality • Make mouth guards • Place temporary fillings • Perform atraumatic restorative therapy • Administer local anesthesia and nitrous oxide <p>Under indirect supervision, may*:</p> <ul style="list-style-type: none"> • Provide emergency palliative treatment of dental pain • Place and remove space maintainers • Perform cavity preparations • Restore teeth • Place temporary crowns • Prepare and place preformed crowns • Perform pulpotomies on primary teeth • Extract primary teeth • Repair prosthetic devices • Recement crowns 	<p>Under general supervision, may:</p> <ul style="list-style-type: none"> • Perform <u>all</u> of the functions allowable to dental therapists • Evaluate dental disease and create treatment plans • Perform non-surgical extractions of permanent teeth
<p>May dispense:</p> <ul style="list-style-type: none"> • Analgesics, anti-inflammatories, and antibiotics 	<p>May dispense:</p> <ul style="list-style-type: none"> • Analgesics, anti-inflammatories, and antibiotics

*for a complete list of allowable services and procedures, see: M.F.2083
<https://www.revisor.leg.state.mn.us/bin/bldbill.php?bill=S2083.3.html&session=ls86>