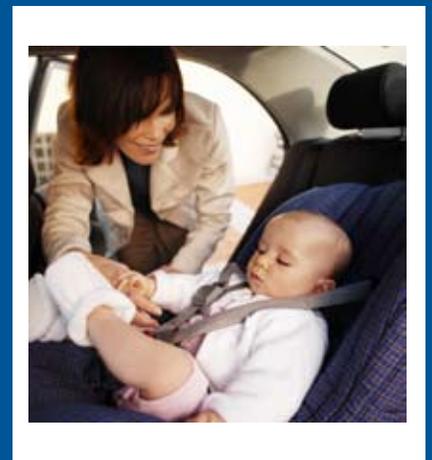
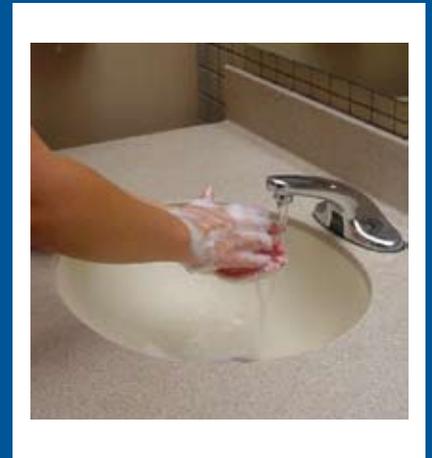


Iowa Department of Public Health



2010



Annual Report &
Budget Summary

Promoting and protecting the health of Iowans

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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
- Office of Health Information Technology
- 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

- Office of Disability, Injury, and Violence Prevention
- Office of Gambling Treatment and Prevention
- Bureau of HIV, Sexually Transmitted Diseases, and Hepatitis
- Bureau of Substance Abuse Prevention and Treatment

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 the Plumbing and Mechanical Systems Board

Division of Health Promotion and Chronic Disease Prevention

Julie McMahon, Division Director

515-281-3104

- Bureau of Chronic Disease Prevention and Management
- Center for Congenital and Inherited Disorders
- Bureau of Family Health
- Bureau of Health Care Access
- Office for Healthy Communities
- Bureau of Local Public Health Services
- Office of Minority and 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

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

A Message from the Director



Public health in Iowa has seen a lot of changes in the last year. And somehow, that's nothing new. In fact, one could say that adapting to continually changing priorities is one of the few constants in the field of public health.

To meet the challenges of evolving health needs and a transitioning health care system, IDPH must act as both a leader and a partner in promoting and protecting the health of Iowans. In making Iowa the healthiest state in the nation, one of the department's goals is to ensure that the general system of health in our state is strong. How is the department doing this? Here are some examples.

Iowa e-Health

When people talk about a "strong system," they're often referring to those systems that work hardest for the people they were designed for. We appreciate the interconnectedness of our streets, the reliability of customer service centers, and the accuracy of automated teller machines. A major initiative last year in creating a strong system of health in Iowa is that of planning and promoting the adoption of health information technology in our state. The Iowa e-Health project represents an important opportunity to improve the way providers collect and share patient information through the use of electronic health records and a statewide health information exchange. Real-time health information helps practitioners make the best health care decisions, provides patients with continuity of care regardless of the provider they visit, and enhances population health through use and analysis of the data collected and maintained throughout the system. In 2011, IDPH will work with the legislatively directed Electronic Health Information Executive Committee on proposals to allow Iowa e-Health to procure, install, and operate the technology required for the Iowa health information exchange to serve the needs of Iowans and their health care providers.

Workforce

Just as most businesses can't function without the hard work and talent of their employees, the health of Iowans depends heavily on a highly trained, valued, and specialized workforce. According to Iowa Workforce Development, however, the health care industry has the highest number of vacancies among all industries in the state. To help address these shortages, IDPH received federal funding last year for the Direct Care Workforce Initiative. Based on the recommendations of the legislatively-directed Iowa Direct Care Worker Advisory Council, this project will develop and pilot a training and credentialing model for direct care professionals in Iowa—one of the first such models in the nation. Also last year, IDPH worked closely with the Health and Long-Term Care Access Advisory Council to present a strategic plan to the Iowa General Assembly and the governor. Among the initial recommendations, the council highlighted the importance of codifying the Iowa Health Workforce Center for coordinating

health workforce concerns in Iowa; funding loan repayment programs and other recruitment and retention efforts; and supporting educational institutions and other entities in creating or updating training, curricula and practicum experiences.

Medical Homes

One of the most powerful allies in promoting and protecting the health of Iowans is, of course, Iowans themselves. When people are engaged and invested in their own health, the entire system benefits, including providers, insurers, health advocates, and public health partners. This is why the department's work with the Medical Home System Advisory Council is so important. By promoting the use of medical homes, the council is helping make the patient an integral part of the health care team, allowing them to make decisions with their personal provider and accept responsibility for important aspects of self-care. Studies show that focusing health care around the patient's preferences and needs can improve both patient satisfaction and clinical outcomes. Last year, the council issued their first issue brief, which described the vision for patient-centered care in Iowa. In 2011, IDPH will support the council as it continues to collaborate with Medicaid in the development of the IowaCare Medical Home Model, outlined in the 2010 Health Care Reform Act. As directed by the council, IDPH will also work this year on drafting and adopting rules for the certification of medical homes.

Public Health Modernization

Building on the Public Health Modernization Act of 2009, IDPH took a giant step forward last year in strengthening the current public health system. Just as law enforcement agencies, schools, and even day care centers go through an accreditation process to ensure that their services meet certain standards, IDPH is preparing to take part in a national voluntary accreditation system for governmental public health departments. In 2010, Iowa continued its tradition of leadership by participating in a "beta test" of the national Public Health Accreditation Board's accreditation process. One of only eight state health departments to take part in the beta test, this experience provided IDPH with valuable insight into its current strengths and weaknesses. For 2011, IDPH staff will address areas for improvement and build upon some strong practices identified in the beta test so that IDPH can operate at a higher capacity.

Healthy Iowans

Another important activity for ensuring a strong system of health in our state is that of performing regular assessment and planning activities. Late last year, Healthy People 2020—the nation's health plan for the coming decade—was released. Concurrently, plans had gotten underway in Iowa to develop Healthy Iowans, the statewide plan for addressing our state's health needs and issues over the next five years. Scheduled for completion in October 2011, Healthy Iowans will be based on recommendations from a broad array of more than 120 partners. This will include local public health departments, legislatively-directed and ad hoc

health-related committees, state agencies, the business sector, and other organizations whose work directly or indirectly affects the health of Iowans.

Prevention and Chronic Care Management

As Iowans continue to live longer, chronic disease prevention and management is becoming increasingly important. Chronic diseases, including heart disease, cancer, obesity, and diabetes, now account for 70 percent of deaths in our state. They affect the quality of life for tens of thousands of Iowans and have a dramatic impact on the individual and the community, both in terms of health care costs and the quality of life. The good news is that 80 percent of chronic conditions can be prevented. The trick is creating a culture and a system of health in which prevention is front and center. Toward this end, the IDPH-facilitated Prevention and Chronic Care Management Advisory Council released two policy briefs last year on the topics of chronic disease prevention and chronic care management, each of which contains Iowa-specific data and smart practices. In 2011, the council will develop a state plan for coordinating care for individuals with diabetes who receive care through safety net providers. Also on their to-do list is developing recommendations for collecting and providing data concerning chronic disease in groups of racial and ethnic diversity in Iowa.

Community Wellness

Since 2005, 44 counties in Iowa have benefited from the department's Iowa Healthy Communities Initiative Grant Program. Using a mixture of federal and state funds, this program maximizes community involvement by bringing together groups of people, in collaboration with local boards of health, to rally around issues impacting the health of local residents. Highlights from last year include Decatur County bringing together 50 volunteers who contributed nearly 1,000 hours to complete construction of a local trail. In Black Hawk County, referrals for behavioral issues in schools have decreased by 12 percent thanks to expanded mental health services. And in Woodbury County, 85 percent of businesses surveyed said that they offer a worksite wellness program, up from 66 percent the previous year. As more grants are awarded in 2011, IDPH staff will focus their attention on providing technical assistance that aids coalition development, evaluation planning, and sustainable smart practices.

Working to ensure that the general system of health in our state is strong is, of course, just one of the things IDPH does. Making Iowa the healthiest state in the nation requires both big-picture thinking and strategic programming. I hope that you will find this Annual Report and Budget Summary a helpful resource in learning more about how IDPH works to 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 decision-making 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 85 programs and employing more than 425 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.

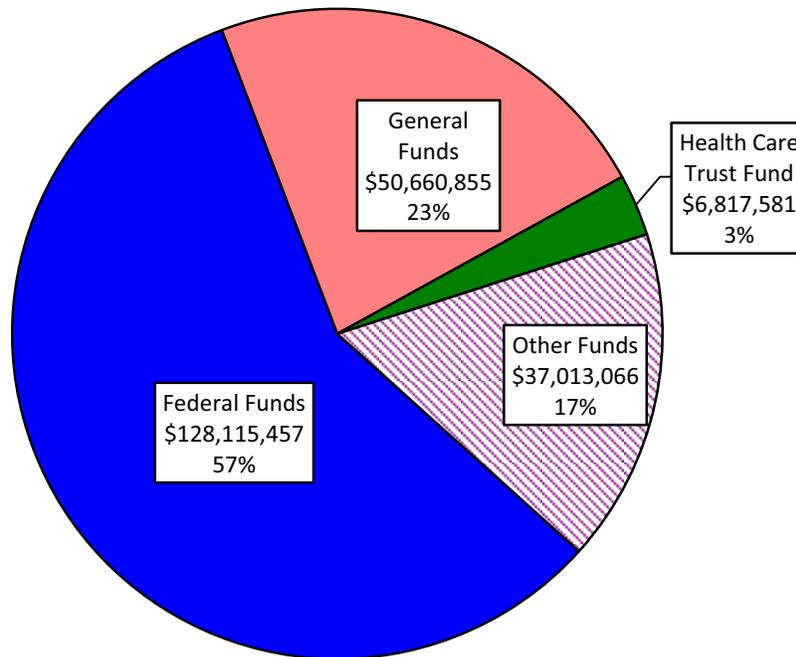
1. Director’s Office
2. Division of Acute Disease Prevention and Emergency Response
3. Division of Administration and Professional Licensure
4. Division of Behavioral Health
5. Division of Environmental Health
6. Division of Health Promotion and Chronic Disease Prevention
7. Division of Tobacco Use Prevention 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 925 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 FY2010 were \$222,606,959. 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, Rebuild Iowa Infrastructure (RIFF) funds, Technology Reinvestment funds, and Underground Storage Tank funds.

The following table shows fiscal year 2009, 2010, and 2011 expenditure information for the department. This Annual Report and Budget Summary also includes fiscal year 2009, 2010, and 2011 expenditure information for department programs and services.

Table 1. Iowa Department of Public Health Budget Summary

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State General Fund	\$27,204,083	\$50,660,855	\$55,657,774
Healthy Iowans Tobacco Trust Fund	\$24,588,990	\$0	\$0
Health Care Trust Fund	\$8,773,538	\$6,817,581	\$0
Gambling Fund	\$6,420,102	\$0	\$0
Federal funds	\$123,337,602	\$128,115,457	\$125,997,500
Other funds	\$26,290,770	\$37,013,066	\$45,938,044
Total funds	\$216,615,085	\$222,606,959	\$227,593,318
FTEs	459.17	451.64	497.60

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 2009, 2010, and 2011 expenditure information.

If the measures of progress appeared in our 2010 department performance plan, the 2010 target will be included. The year 2010 refers to the state fiscal year in which the data was reported, not the 2010 calendar year. Not all programs will have 2010 data. In these cases, the data for the most recent year available is reported for the measure. Overall, programs met targets or showed progress toward meeting targets for 82 (66%) of the 124 reported measures in the profiles for which there were targets, an increase from last year in which 65% of targets were met. 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 www.idph.state.ia.us/WhatWeDo.

Access to Quality Rural Health Services

Promoting & Protecting the Health of Iowans

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 Iowa has a lot going for it: open spaces, green grass, fresh air, and a canvas of stars at night. Life in rural Iowa 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 Rural Health Services programs work to ensure rural Iowans 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 Iowa 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 Rural Health Services programs strive to make health care within arm's reach for all Iowans.

Did you know? Nearly half (43%) of Iowans live in rural areas. A greater proportion of rural residents than urban residents are uninsured or covered through public sources (23% compared to 19%). Fewer rural Americans receive insurance through their employer than their urban counterparts (64% compared to 71%). A higher number of self-employed people live in rural America. Rural workers pay higher costs for health insurance plans than urban workers.

Why is Access to Quality Rural Health Services important to promoting and protecting the health of Iowans?

- All Iowans need to be able to get timely emergency health care access.
- With the Affordable Care Act, Iowa will be adjusting to new systems of care. IDPH is assisting facilities in addressing these changes.
- All Iowans 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 Rural Health Care programs maintain Iowa's commitment to healthier Iowans and communities.

Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

What do we do?

- Provide funding to rural hospitals and health systems to pay for projects that enhance health care.
- Award sub-contracts to hospitals and health systems for a variety of improvement activities including: project management, staffing, education, technology purchases, and community engagement initiatives.
- Collect and distribute information on the local, state, and national levels on rural health issues.
- 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 Iowa.
- Coordinate Health Care Reform efforts for Health and Long Term Care and for the Direct Care Workforce.
- The Bureau of Health Care Access's three health delivery system programs (State Office of Rural Health, FLEX - Medicare Rural Hospital Flexibility Program, and SHIP - Small Rural Hospital Improvement Program) use federal-state partnerships to find and solve problems regarding rural health care access.

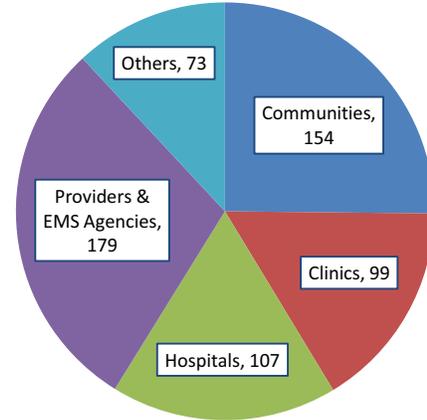
▶ How do we measure our progress?

❶ Number of unduplicated technical assistance encounters (substantive information, advice, education, and training) provided to Iowa communities, clinics, hospitals, providers and others, FY 2010.

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

How are we doing? We assisted a total of 612 communities, clinics, hospitals, providers and others to serve Iowans in FY2010.

FY 2010



▶ What can Iowans do to help?

1. Learn more about the Bureau of Health Care Access and the importance of rural health care access by visiting www.idph.state.ia.us/hpcdp/health_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 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, underground storage tank fund (USTF) federal grant; State funds are used for a 3:1 match for the Office of Rural Health Grant: K07-0767; K09-0905/0979 (40%); K32-3201; K60-6709.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$540,089	\$447,314	\$525,847
Tobacco funds	\$100,000	\$0	\$0
USTF	\$0	\$0	\$150,000
Federal funds	\$1,361,100	\$1,017,831	\$1,364,402
Total funds	\$2,001,189	\$1,465,145	\$2,040,249
FTEs	9.68	7.33	10.95

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.

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: 515-242-6383 ♦ 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

Acute Disease Epidemiology

Promoting & Protecting the Health of Iowans

Division of Acute Disease Prevention & Emergency Response

Phone: 1-800-362-2736

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 Iowa history with nearly 1,000 cases reported to the Center for Acute Disease Epidemiology (CADE).

CADE works to keep Iowans 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 Iowans?

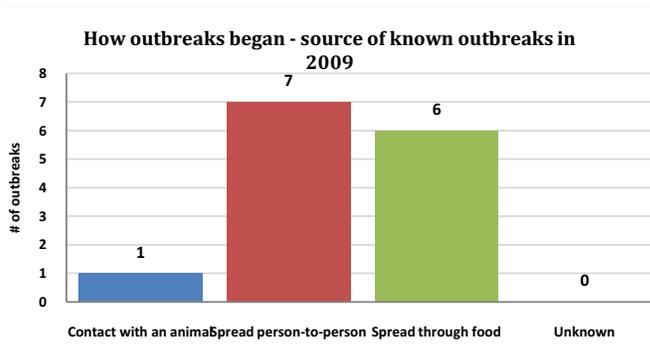
- All Iowans are affected by disease. CADE receives an average of 20 disease reports daily (about 5,000 per year) that must be investigated.
- Epidemiology (the study of disease) helps track illness to determine when there is a widespread threat to your health.
- Disease is spread in many ways. With 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

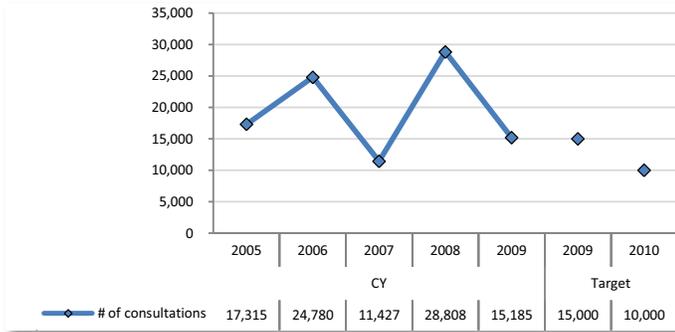


What do we do?

- 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.

How do we measure our progress?

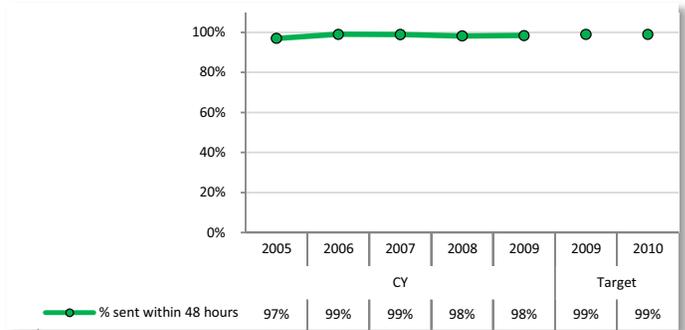
- ❶ Number of infectious disease consultations provided to clinicians, local public health officials, hospital infection control staff, and the public.



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

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

- ❷ 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 Iowans do to help?

1. All Iowans 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 Iowans 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 and healthcare providers—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 funds, & private grants*: K15-1501; 0153-1506/1510/1512/1514/AR20.

	FY2009 Actual	FY2010 Actual	FY 2011 Estimate
State funds	\$549,236	\$456,322	\$476,686
Federal funds	\$1,377,596	\$1,276,538	\$1,936,799
Other funds*	\$70,573	\$276,815	\$211,191
Total funds	\$1,997,405	\$2,009,675	\$2,624,676
FTEs	8.57	10.39	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.

Brain Injury

Promoting & Protecting the Health of Iowans

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 Iowans will suffer from a brain injury this year. 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 daily 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 Iowans?

- Each year, over 2,500 Iowans will be diagnosed with a brain injury.
- Brain injuries happen in a wide variety of ways. The top causes include falls, vehicle crashes, being hit by an object, and assaults.
- Falls, which can result in brain injury, are the leading cause of injury to elderly Iowans.
- 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?

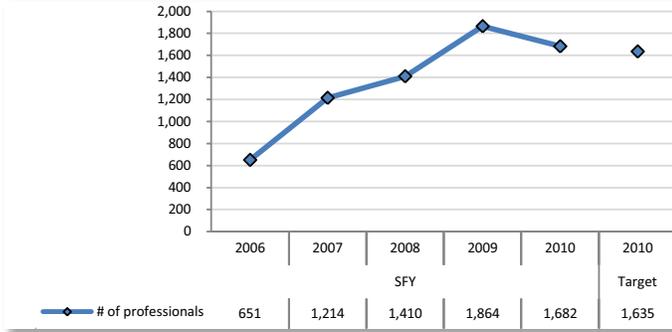
- Prevent injuries
- Promote healthy behaviors
- Strengthen the public health infrastructure

What do we do?

- Promote and carry out brain injury prevention activities.
- Provide brain injury information, awareness, and learning opportunities.
- Work through the Brain Injury Association of Iowa to match Iowans 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 for provider training through the Iowa Association of Community Providers.

How do we measure our progress?

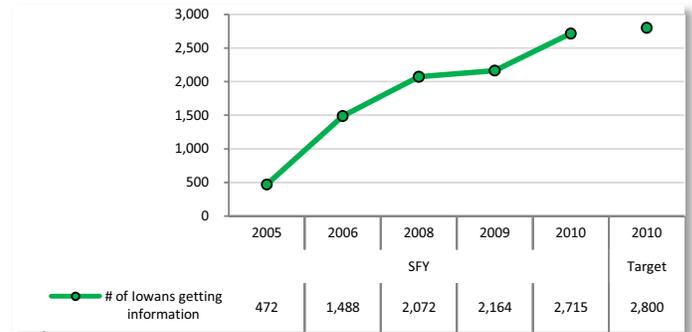
1 Number of health professionals receiving brain injury training.



Data Source: Program records. Data are available annually.

How are we doing? We continue to increase the number of health professionals trained on providing services for people experiencing brain injury. In SFY2010, 60 trainings were held with attendees representing 123 provider sites.

2 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 annually.

How are we doing? The number of lowans getting information about brain injury has increased more than 500% from 2005 to 2010.

What can lowans do to help?

1. lowans 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 www.biaia.org 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/iowa/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, Injury Prevention & Emergency Medical Services for Children, Violence Prevention, Chronic Disease Prevention.

Other organizations: Brain Injury Association of Iowa; Iowa Department for the Blind; Iowa Departments of 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 funds, & intra state receipts*: K07-0853/0854; 0153-1802.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$538,045	\$493,356	\$469,020
Federal funds	\$88,046	\$203,134	\$220,850
Other funds*	\$0	\$9,762	\$0
Total funds	\$626,091	\$706,252	\$689,870
FTEs	0.93	0.89	1.95

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.

Cancer

Promoting & Protecting the Health of Iowans

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 16,400 Iowans will be diagnosed with cancer this year and 6,400 will die. But cancer statistics are more than numbers. They represent real people – you, your relatives, neighbors, co-workers, and friends. The Iowa 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.”

Did you know? Cancer is the leading cause of premature death for Iowans.

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

- Cancer affects nearly all Iowans, either as cancer in oneself, someone in their family, co-workers, or friends.
- Many types of cancer can be prevented, or when detected early, can be successfully treated.
- More than half of Iowans diagnosed with cancer will survive it.

Which Iowa Public Health Goals are we working to achieve?

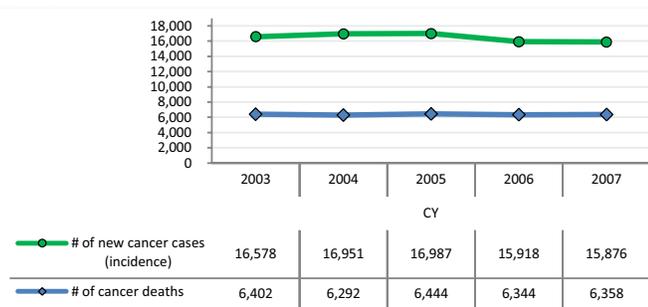
- Promote healthy behaviors
- Strengthen the public health infrastructure

What do we do?

- The Comprehensive Cancer Control (CCC) program works with the Iowa Cancer Consortium (ICC) 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 Iowa. For more information on the state cancer control plan, go to www.canceriowa.org or www.idph.state.ia.us/hpcdp/iowas_cancer_plan.asp.
- The CCC program works to raise awareness of the ways to reduce skin cancer risk among preschool and school age children.
- 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 through a new Iowa Get Screened: Colorectal Cancer Program funded by the Centers for Disease Control and Prevention (CDC). Up to 600 Iowans are expected to receive colorectal cancer screening through this program.
- The Iowa Care for Yourself Breast and Cervical Cancer Early Detection Program helps 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 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.

How do we measure our progress?

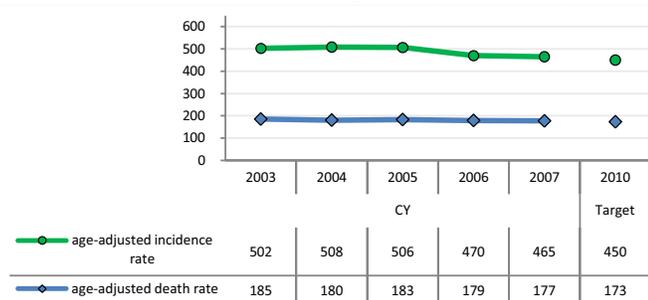
1 Number of new cancer cases (incidence) and deaths due to cancer.



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 declined since 2006.

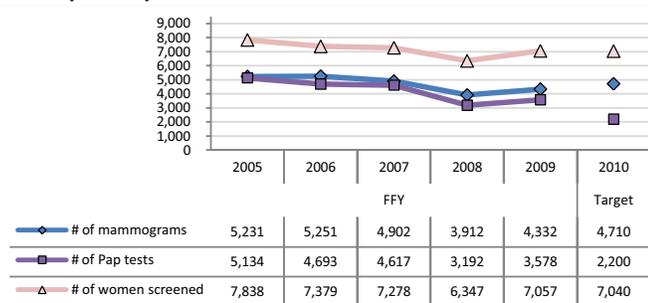
2 Cancer incidence and death rates (per 100,000 Iowans).



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? In 2007, the age-adjusted death rate for cancer (177) surpassed the corresponding death rate for heart disease (173) for the first time.

2 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 FFY2009, the program screened 7,057 women. Data from 2003 show that the Iowa program screens about 25% of eligible women ages 40–64 with mammography. The number of women that can be screened depends on CDC funding, other grants, and private donations. Over the past 3 years, CDC has reduced funding. Other funding was obtained, which allowed for growth in the number of women being served.

What can Iowans do to help?

1. All Iowans can learn more about cancer prevention, early detection, treatment, and survivorship. Visit www.canceriowa.org to learn more about cancer.
2. All Iowans 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. Iowa Cancer Consortium

Funding sources

CCC: general fund, health care trust fund, federal funds, & private grant*: K07-0865; K58-5865; 0153-0416/0430/0598/0762/0970.

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

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$0	\$42,838	\$554,352
Health care trust	\$705,195	\$554,353	\$0
Federal funds	\$3,097,591	\$3,165,640	\$3,727,734
Other funds*	\$354,387	\$368,803	\$456,495
Total funds	\$4,157,173	\$4,131,634	\$4,738,581
FTEs	7.35	7.57	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.

Iowa 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

Child Health

Promoting & Protecting the Health of Iowans

Division of Health Promotion & Chronic Disease Prevention
Phone: 1-800-383-3826
www.idph.state.ia.us/hpcdp/family_health.asp



Successful promotion of children's health is rooted in a partnership of families, community, health care providers, and public health providers. Iowa's Child Health programs promote the development of local systems of health care to ensure that all Iowa 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 Iowa children.

Did you know? In FFY 2010, 164,376 Iowa children accessed health care services through Iowa's community-based Child Health centers.

Why are Child Health programs important to promoting and protecting the health of Iowans?

- Research shows that for every \$1 invested in early health care and education of a young child, Iowa will see an economic return of \$17 per child.
- Child Health programs emphasize the importance of regular preventive health care services for children.
- Child Health programs reach out to underserved populations, who are least likely to access preventive health services.
- Child Health programs address barriers to accessing preventive health services including health care coverage, transportation, and interpretation.
- While barriers affect all Iowa children and families, Child Health programs focus on those most at-risk: low-income children, adolescents, and minorities.
- Child Health programs link families to community-based services based upon family needs.

Which Iowa Public Health Goals are we working to achieve?

Promote healthy behaviors

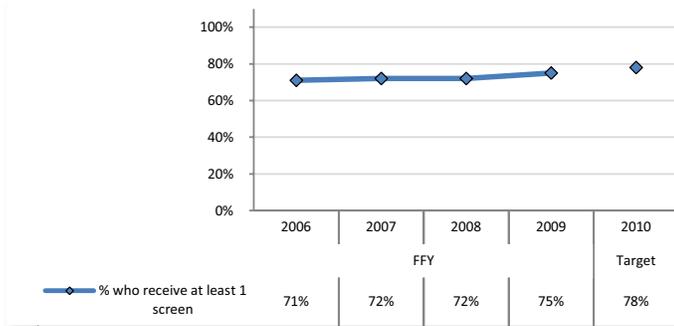
Strengthen the public health infrastructure

What do we do?

- Provide funding for 22 Child Health 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 family-centered, 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.

How do we measure our progress?

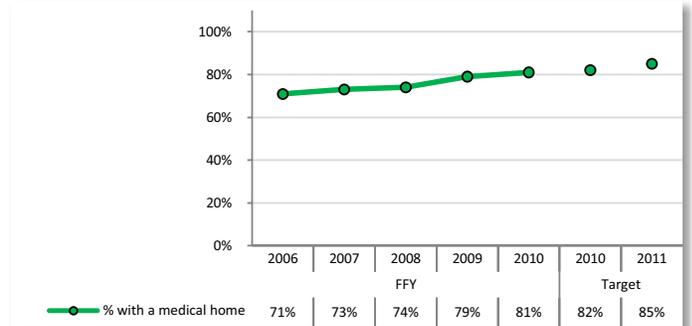
1 Percent of Medicaid enrolled children who receive at least one recommended well child exam.



Data Source: Federal CMS 416 report. Data are available annually.

How are we doing? This indicator of children receiving at least one recommended well child exam in a year increased by three percent during FFY 2009.

2 Percent of children served in Child Health programs 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 Child Health programs have a medical home.

What can Iowans do to help?

1. Learn more about community-based child health services by going to http://www.idph.state.ia.us/hpcdp/family_health.asp
http://www.idph.state.ia.us/hpcdp/child_health_centers.asp
http://www.idph.state.ia.us/hpcdp/epsdt_care_for_kids.asp
2. Learn more about the healthy development of children. Go to <http://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.

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: Early Childhood Iowa, 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/EPST, 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, & 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.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$929,739	\$842,430	\$890,444
Health care trust	\$10,000	\$0	\$0
RIFF funds	\$130,000	\$130,000	\$100,000
Federal funds	\$2,006,469	\$1,519,602	\$2,077,335
Other funds*	\$1,569,245	\$3,220,951	\$4,260,669
Total funds	\$4,645,453	\$5,712,982	\$7,328,448
FTEs	14.05	13.67	18.95

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.

Iowa Department of Public Health ♦ Division of Health Promotion & Chronic Disease Prevention ♦ Child Health

Phone: 1-800-383-3826 or 515-281-4911 ♦ Fax: 515-242-6013 ♦ www.idph.state.ia.us/hpcdp/family_health.asp

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

Child Health Specialty Clinics

Promoting & Protecting the Health of Iowans

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 many 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 Iowans?

- Research suggests that about 15 to 20% of all children 0 to 18 years of age have some type of special health care need.
- Children and youth with special health care needs require services that are more intensive and comprehensive than children and youth without special care needs require. These specialty services are often not available or accessible.
- Research shows that specialty services are an important addition to primary care services for children and youth 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 and youth with special health care needs.

Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

Promote healthy behaviors

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 service system for all children and youth 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 and partnering family advocacy groups.
- Promote spread of the medical home model among community-based primary care providers, especially for improving quality of care for children and youth with special health care needs.

How do we measure our progress?

- ❶ **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%.

- ❷ **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%.

- ❹ **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%.

- ❺ **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 Iowans do to help?

1. Iowans who have or know of children or youth with special needs can contact CHSC by calling 319-356-1117 or visiting www.uihealthcare.com/chsc.
2. All Iowans can recognize the essential public health role CHSC play as Iowa's Title V program for children and youth with special health care needs.
3. All Iowans can tell their state legislators about the important role CHSC plays in the lives of children and youth with special health care needs.

Others working on similar issues

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

Other organizations: Iowa Department of Education, IDEA Part C (Early ACCESS), University of Iowa Center for Disabilities and Development, Child Serve, Mental Health Disabilities Services Commission, other child and adolescent residential care facilities for mental health.

Funding sources

General fund, health care trust fund, underground storage tank fund (USTF), & federal funds: K07-0703; K58-5863; K67-6705; 0153-0706.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$458,865	\$500,159	\$788,303
Health care trust	\$473,981	\$344,944	\$0
USTF	\$0	\$0	\$15,000
Federal funds	\$3,916,314	\$1,775,672	\$2,185,719
Total funds	\$4,849,160	\$2,620,775	\$2,989,022
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.

Child Protection Centers

Promoting & Protecting the Health of Iowans

Division of Behavioral Health
Phone: 515-281-4816
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? In state fiscal year 2010, 2,950 children were served in one of the Iowa Department of Public Health (IDPH) funded Child Protection Centers.

Why are Child Protection Centers important to promoting and protecting the health of Iowans?

- 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.
- IDPH manages four Child Protection Centers in Iowa, including Mercy Child Advocacy in Sioux City, Mississippi Valley Child Protection Center in Muscatine, Regional Child Protection Center in Des Moines (Blank), and St. Luke's Child Protection Center in Hiawatha.

Which Iowa Public Health Goals are we working to achieve?
Strengthen the public health infrastructure

What do Child Protection Centers do?

- Provides a comprehensive, culturally competent, multidisciplinary team response to allegations of child abuse in a dedicated, child-friendly setting.
- Provides a multidisciplinary team including: law enforcement, counties attorneys, physicians and nurses, mental health professionals, family advocacy and child protection center staff to ensure children and families are not subjected to duplication of efforts.
- Provides a comfortable, private, child-friendly setting that is both physically and psychologically safe for children.
- Builds community awareness and understanding of child abuse.
- Coordinates and tracks investigation efforts so cases do not "fall through the cracks."
- Improves prosecution of child abuse cases; thus, holding more offenders accountable.

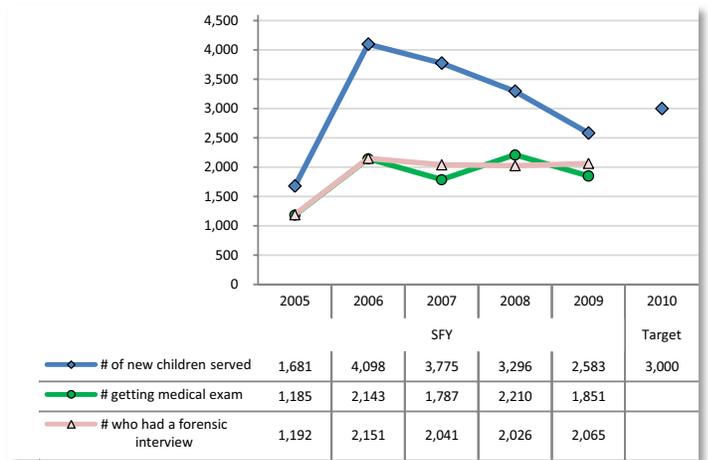
How do we measure our progress?

- ❶ Number of new children served.
- ❷ Number that had a medical exam.
- ❸ 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 Iowans 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 an interactive map of county office locations and contact information, go to www.dhs.state.ia.us/Consumers/Find_Help/MapLocations.html, or
 - ✓ CALL Iowa'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 Iowans 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.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
Other funds*	\$1,042,571	\$960,885	\$988,285
Total funds	\$1,042,571	\$960,885	\$988,285
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.

Iowa Department of Public Health ♦ Division of Behavioral Health ♦ Child Protection Centers

Phone: 515-281-4816 ♦ Fax: 515-281-4535 ♦ www.nca-online.org

6th Floor, Lucas Building ♦ 321 E. 12th Street ♦ Des Moines, IA 50319-0075

Communication & Planning

Promoting & Protecting the Health of Iowans

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 Iowans?

- All Iowans 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 www.idph.state.ia.us/mphi/standards.asp to learn more about “Modernizing Public Health in Iowa.”
- Clear and accurate information helps Iowans 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.

Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

What do we do?

- Provide accurate information to the media and the public about health-related issues.
- Provide information to legislators about policies, services, legal requirements, and administrative rules.
- Help identify critical health issues and needs for the state.
- Help set health goals, create plans to meet them, and track the progress toward meeting those goals.
- Help counties find out the health condition of their communities and plan for health improvements.
- Help improve how services are delivered to Iowans
- 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.
- Work to find, hire, train, and retain a qualified, professional workforce for IDPH.

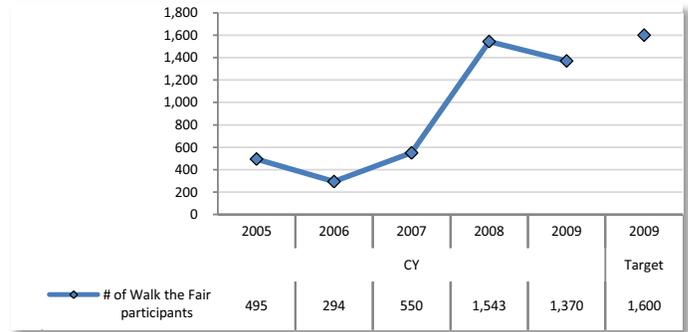
How do we measure our progress?

1 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 Iowans do to help?

1. All Iowans 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 Iowans.
3. All Iowans 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/mp/hi/.
4. Learn about Iowa's health plan, Healthy Iowans, at www.idph.state.ia.us/adper/healthy_iowans.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, private grants*, private donations*, & registration fees*: K09-0969; K19-1963; K21-2211; K60-6071; 0153-0954/2110/2236/2238/2240/2242.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$347,101	\$367,526	\$418,277
Health care trust	\$72,279	\$55,215	\$0
Federal funds	\$1,208,845	\$1,098,118	\$1,122,000
Other funds*	\$91,867	\$517,713	\$292,839
Total funds	\$1,720,092	\$2,038,572	\$1,833,116
FTEs	17.53	16.36	16.95

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.

Congenital & Inherited Disorders

Promoting & Protecting the Health of Iowans

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 Iowans?

- 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

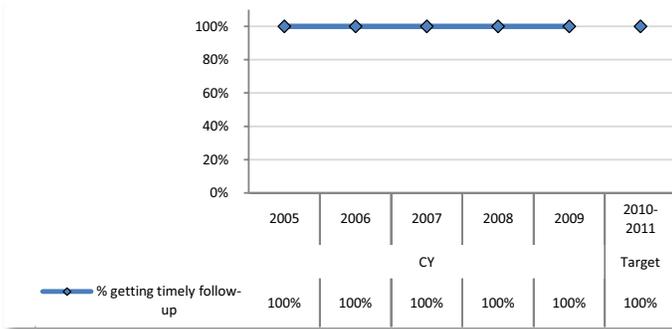
What do we do?

CCID provides the structure through which comprehensive genetic health care services, laboratory services, and surveillance are developed and implemented as vital parts of Iowa'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 Prenatal Screening Program – conducts prenatal testing to screen for congenital/inherited disorders of the fetus.

How do we measure our progress?

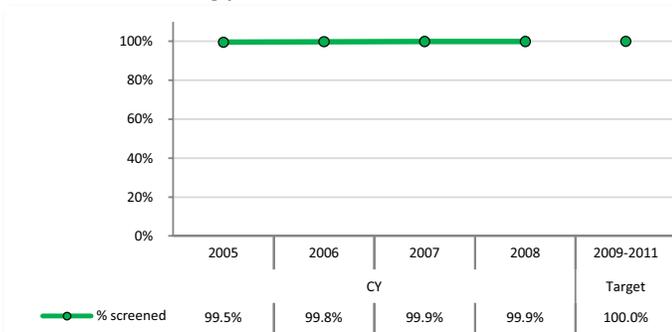
- ❶ Percent of screen positive newborns who get timely follow up to definite diagnosis and clinical management for condition(s) mandated by their state-sponsored newborn screening programs.



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

How are we doing? In 2009, all 571 children with a presumptive positive screen received timely follow-up services.

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



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

How are we doing? Nearly all Iowa newborns are screened using the Iowa newborn screening panel. There were 57 NBS waivers signed in CY2009.

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; Hemophilia of Iowa; March of Dimes; Healthy birthDay.

What can Iowans do to help?

All Iowans can

1. Go to www.idph.state.ia.us/genetics/ 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/committee_roster.pdf for a committee roster.

Health care professionals can

1. Teach patients about the benefits of newborn screening.
2. Provide information to pregnant women about monitoring the activity of their fetus.
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, including public health surveillance.

Funding sources

General fund, health care trust fund, tobacco fund, underground storage tank fund (USTF), federal funds, private grants*, & retained fees*: K07-0705/0709/0765; 0830-0830; K56-5667; K58-5867; K67-6703; K81-8102; K84-8402; 0153-0714/0718/0720/ 0722/0724.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$934,105	\$957,327	\$957,138
Health care trust	\$5,869	\$0	\$0
Tobacco funds	\$119,384	\$0	\$0
USTF	\$0	\$0	\$20,000
Federal funds	\$434,526	\$481,623	\$625,204
Other funds*	\$37,432	\$3,455	\$60,000
Total funds	\$1,531,316	\$1,442,405	\$1,662,342
FTEs	2.01	2.32	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.

Iowa Dental Board

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

Promoting & Protecting the Health of Iowans



Did you know the practice of dentistry dates back to Egyptian times? A tomb from 2600 BC marks the death of Hsy-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 Iowa Dental Board helps keep Iowans healthy by making sure only qualified dentists, dental hygienists, and dental assistants practice in Iowa. By licensing health professionals, Iowans can be confident they are receiving competent care.

Did you know? There are more than 8,424 dentists, dental hygienists, and dental assistants licensed in Iowa.

Why is the Iowa Dental Board important to promoting and protecting the health of Iowans?

- All Iowans 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?

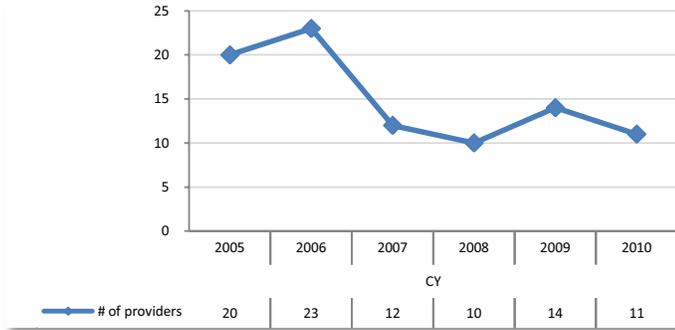
Strengthen the public health infrastructure

What do we do?

- 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 Iowa.

How do we measure our progress?

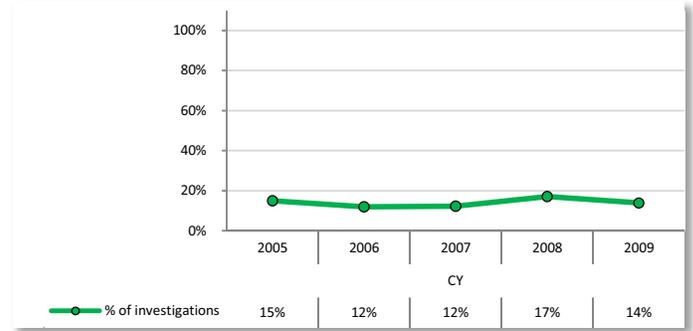
1 Number of providers participating in the Iowa practitioner recovery program.



Data Source: Manual counts. Data are available annually.

How are we doing? As of November 2010, there were 11 providers participating in our IPRC program.

2 Percent of investigations resulting in formal discipline.



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

How are we doing? Out of 230 complaints filed in 2009, 32 formal discipline cases were filed.

What can Iowans do to help?

1. All Iowans can learn more about the Iowa Dental Board by going to www.dentalboard.iowa.gov.
2. Health professionals should learn how to comply with Iowa 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

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
Retained fees	\$713,590	\$1,219,979	\$1,057,549
Total funds	\$713,590	\$1,219,979	\$1,057,549
FTEs	7.65	7.85	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.

Iowa Department of Public Health ♦ Iowa Dental Board

Phone: 515-281-5157 ♦ Fax: 515-281-7969 ♦ www.dentalboard.iowa.gov

400 SW 8th Street, Suite D ♦ Des Moines, IA 50309-4687

Diabetes Prevention & Control

Promoting & Protecting the Health of Iowans

Division of Health Promotion & Chronic Disease Prevention

Phone: 515-242-6204

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 Iowans learn about the disease and how to live with it.

A young woman in Central Iowa was diagnosed with type 1 diabetes and, after attending several educational sessions, told program staff that “getting diabetes and receiving this information has probably saved my life”. The education and support she received helped her make some dramatic lifestyle changes.

Diabetes is preventable and controllable. IDPH helps Iowans 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 Iowans?

- Approximately 175,000 (7.6%) adult Iowans have been told by a doctor that they have diabetes.
- The likelihood of having diabetes increases as we age.
- 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

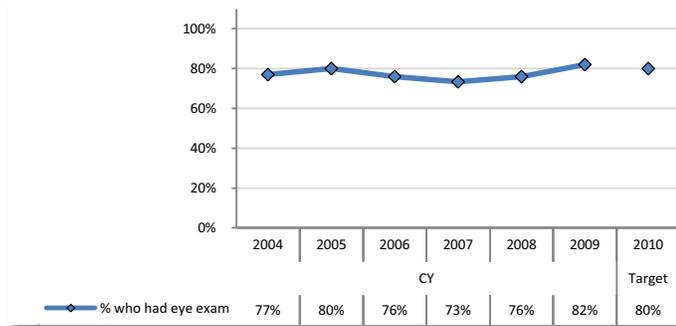
Strengthen the public health infrastructure

What do we do?

- 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 programs, like tobacco and colorectal cancer, to increase awareness of chronic disease risk factors and management strategies.

How do we measure our progress?

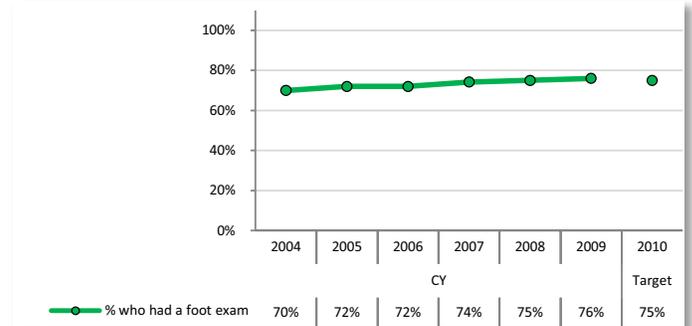
1 Percent of Iowa adults with diabetes who had a dilated eye exam in the last year.



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

How are we doing? We have exceeded our Healthy Iowans 2010 target for annual dilated eye exams.

2 Percent of Iowa adults with diabetes who had a foot exam in the last year.



Data Source: BRFSS. Data are available annually.

How are we doing? We have exceeded our Healthy Iowans 2010 target for annual foot exams.

What can Iowans do to help?

1. All Iowans 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 and Physical Activity, Tobacco Use Prevention and Control, Cancer, Multicultural Health, Heart Disease and Stroke, WISEWOMAN.

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

Diabetes: Federal funds: 0153-1966

Prevention & Chronic Care Management: general fund: K07-0861

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$25,331	\$164,135	\$132,025
Federal funds	\$187,598	\$172,851	\$192,380
Total funds	\$212,929	\$336,986	\$324,405
FTEs	1.35	2.50	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.

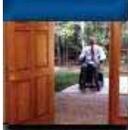
Disability Prevention

Promoting & Protecting the Health of Iowans

Division of Behavioral Health

Phone: 515-242-6336

www.idph.state.ia.us/bh/disability_health.asp



Two Rivers Independent Living Center (TRILC) in Sioux City provides peer support, information and referral, and independent living skill development for people with disabilities in the Siouxland area. In collaboration with the IDPH Disability Prevention program, Joanie and Jeannie completed the Community Access Project training in emergency preparedness for people with disabilities. Now they provide emergency preparedness guidance through group and individual presentations. TRILC has become an asset to local emergency responders in planning for people with disabilities. Both Joanie and Jeannie use wheelchairs for mobility and understand the importance of including people with disabilities in all phases of emergency planning.

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 Iowans with disabilities live well and have full access to community services. This helps all Iowans toward healthier, more productive lives.

Did you know? Nearly 19% of Iowa adults report having a disability; 90% of those involve physical limitations. Iowans with disability are more likely to have other chronic conditions, such as arthritis, high blood pressure, and diabetes. 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 Iowans?

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

Which Iowa Public Health Goals are we working to achieve?

Prevent injuries

Promote healthy behaviors

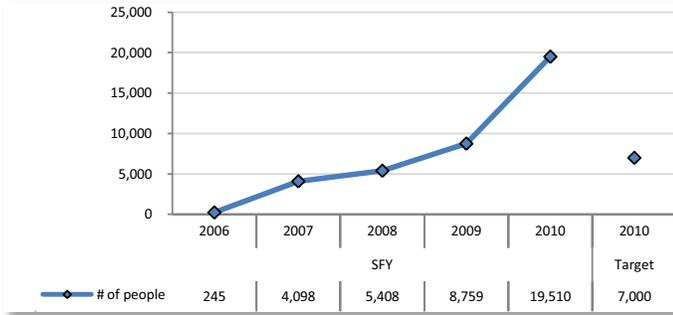
Strengthen the public health infrastructure

What do we do?

- Provide training and assistance so community health providers can improve accessibility following Americans with Disabilities Act (ADA) guidelines.
- Prepare Iowans with disabilities and their families for what to do in an emergency.
- Provide Continuity of Operations Planning to community providers to maintain essential services during an emergency or disaster.
- Work with the Commission on Persons with Disabilities to provide education and technical assistance on ADA compliance and accessibility.
- 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."
- Work with state and local responders and planners on establishing accessible sheltering locations and locate resources that will help people with disabilities remain independent during a disaster.
- Provide technical assistance to builders and contractors to make home and business modifications for accessibility.

How do we measure our progress?

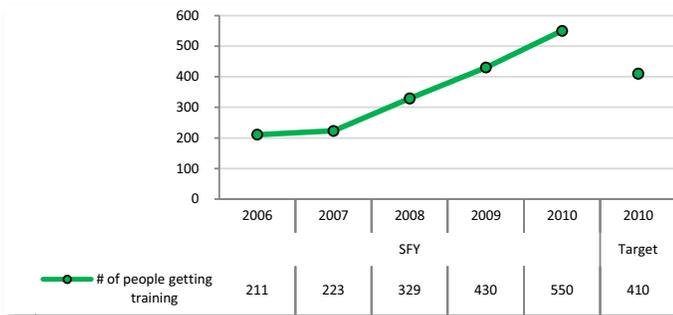
1 Number of people accessing disability-related resources.



Data Source: Program reports. Data are available annually.

How are we doing? We exceeded our 2010 target. We continue to increase the number of people we reach with disability resource information as well as the type of information we provide by expanding the information available via the Internet and through distribution of hard copies.

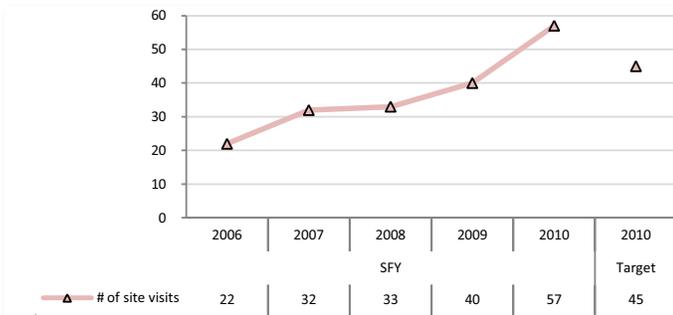
2 Number of people with disabilities and community service providers receiving training.



Data Source: Program reports. Data are available annually.

How are we doing? We exceeded our 2010 target and have expanded our training to include ADA education and compliance, Continuity of Operations Planning, Emergency Preparedness planning, and establishing ADA compliant General Population Shelters.

3 Number of ADA site visits completed.



Data Source: Program reports. Data are available annually.

How are we doing? We exceeded our 2010 target and increased our scope of work to include site visits and technical assistance to emergency shelter locations.

What can Iowans 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.
2. Iowans with disabilities, family members, response personnel, and planners should know the importance of emergency preparedness. General population shelters need to meet minimum American's with Disabilities Act compliance and have access to durable medical equipment and consumable goods. To learn more, go to www.idph.state.ia.us/bh/disability_emergency_prep.asp or call 515-242-6336.
3. Technical assistance, site visits, and accessibility audits are available to meet minimum ADA compliance. An access survey is available at www.state.ia.us/government/dhr/pd/publications/index.html 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, Healthy Iowans, FitNet, Substance Abuse Prevention, Gambling Prevention.

Other organizations: Iowa Departments of Civil Rights, Aging, Human Rights, Human Services, Homeland Security; Iowa Commission on Volunteer Services; 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/National Center for Birth Defects and Developmental Disabilities, American Association on Health and Disability, Association of University Centers on Disabilities.

Taskforces, workgroups, councils, and committees: Iowa Disaster Resource Council & Special Needs Committee, Prevention of Disability Policy Council, Special Needs Taskforce, Olmstead Taskforce, Accessibility Team, Integration Team, DD Council, AT Reuse National Leadership Summit Workgroup, Region 7 ESF#6 Mass Care Planning Group.

Funding sources

Federal funds: 0153-1706

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
Federal funds	\$406,065	\$469,641	\$392,741
Total funds	\$406,065	\$469,641	\$392,741
FTEs	1.79	1.68	1.55

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.

Disaster Operations & Response

Promoting & Protecting the Health of Iowans

Division of Acute Disease Prevention & Emergency Response

Phone: 515-281-5604

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



Iowa is no stranger to severe winter weather, tornadoes, and flooding. The Center for Disaster Operations and Response (CDOR) works to protect the health of Iowans by preparing for these natural phenomena along with other public health emergencies like pandemic influenza, an intentional release of a chemical agent, or other disasters that affect the health of Iowans.

CDOR doesn't work alone in this task. The bureau works with Iowa's 99 local public health agencies, 118 hospitals, 14 community health centers, the Meskwaki tribal nation, and other public and private entities by providing guidance, tools, and resources to help prepare for, respond to, and recover from disasters.

No one can predict the next disaster, but CDOR's work with local partners helps to enhance Iowans' ability to quickly return to normal when disaster strikes.

Did you know?

CDOR administers Iowa's Health Alert Network (HAN), a web-based alerting system that can notify all local public health agencies and hospitals in Iowa, as well as emergency medical services, emergency management, law enforcement, and other key stakeholders of a public health emergency within minutes. More information on the HAN is available at the CDOR web page: www.idph.state.ia.us/adper/cdor.asp.

Why is the Center for Disaster Operations and Response important to promoting and protecting 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 Iowans.
- 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

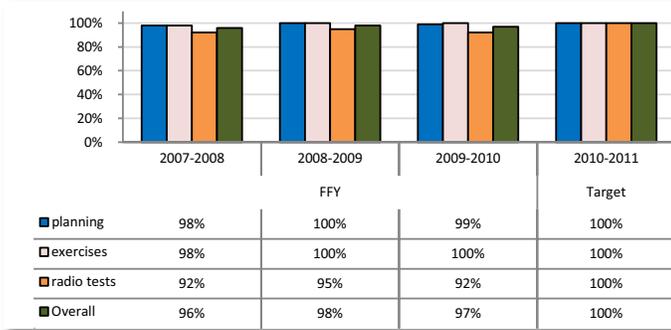
What do we do?

Administer federal preparedness grants that allow us to:

- 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.
- Provide equipment, supplies, and other resources so state and local testing labs are able to handle increases in receiving, testing, and reporting samples.
- Provide technical assistance for the development of a round-the-clock disease reporting system.
- 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.
- Coordinate local and regional and disaster training exercises.
- Provide disaster planning information to individuals and families in Iowa.

How do we measure our progress?

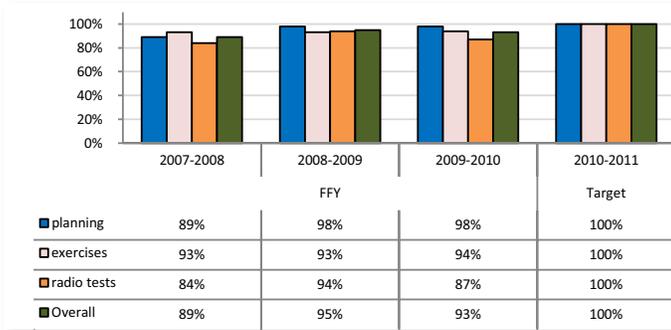
1 Percent of local public health agencies that complete preparedness activities.



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

How are we doing? Iowa's local public health agencies (LPHA) submit workplans each year to outline how they will use funding to assure public health preparedness. LPHA also respond to monthly two-way radio tests within 30 minutes. Agencies also perform a tabletop, functional, or full-scale exercise to test their preparedness and response plans; and then submit an after-action report to IDPH.

2 Percent of Iowa hospitals that complete preparedness activities.



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

How are we doing? Iowa hospitals must submit a workplan each year to outline how they will spend their funding (planning). 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 to IDPH.

What can Iowans 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; Local Public Health Services; Family Health; Environmental Health Services, Communication and Planning.

Other organizations: U.S. Centers for Disease Control and Prevention, Assistant Secretary for Preparedness and Response; The Iowa departments of: Public Safety, Public Defense, Inspections and Appeals, Agriculture, Education; the Iowa Hospital Association, State Hygienic Laboratory, Safeguard Iowa Partnership, Iowa Statewide Poison Control Center, Upper Midwest Center for Public Health Preparedness.

Funding sources

Antiviral Program: general fund, intra state receipts* (Executive Council – Iowa Code 7D.29): K19-1938. **Hospital Preparedness:** federal funds: 0153-1934. **I-SERV:** 0153-1978. **Pandemic Influenza Healthcare Preparedness for States:** federal funds: 0153-1976. **Public Health Preparedness:** federal funds & intra state receipts*: 0153-1932. **Public Health Emergency Response:** federal funds: 0153-1974. **Civilian Volunteer Medical Reserve Corps:** NACCHO contract*: 0153-1978.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$442,866	\$89,209	\$90,914
Federal funds	\$5,114,907	\$24,359,769	\$15,829,059
Other funds*	\$14,110	\$17,455	\$0
Total funds	\$5,846,883	\$24,466,433	\$15,919,973
FTEs	12.84	28.25	27.80

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.

Early Childhood

Promoting & Protecting the Health of Iowans

Division of Health Promotion & Chronic Disease Prevention

Phone: 1-800-383-3826 or 515-281-4911

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



After 10 years of marriage, Carla's husband unexpectedly walked out on her and their 3 children. One calming thought during this sudden storm for Carla occurred when she remembered her two-year-old's well-child exam was scheduled for the next day. She remembered from prior appointments that her child's physician would ask about her child's social and emotional development as well as family stress and depression, which meant she could get connected to services that she had no clue how to access. The 1st Five coordinator received the referral and connected Carla to WIC, food-assistance, housing information, financial assistance, and the local maternal and child health department for her high-risk pregnancy.

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 Iowans?

- While there was a decline in the number of children abused in the past two years, in 2009 there was a significant increase of 11% in children abused.
- Only 4% of HOPES-HFI families had confirmed cases of child abuse in 2010, down from 7% of families in 2004.
- More than 3,000 Iowa 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 is expected that 120 Iowa 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%) Iowa newborns receive hearing screening, up from 86% in 2002.

Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

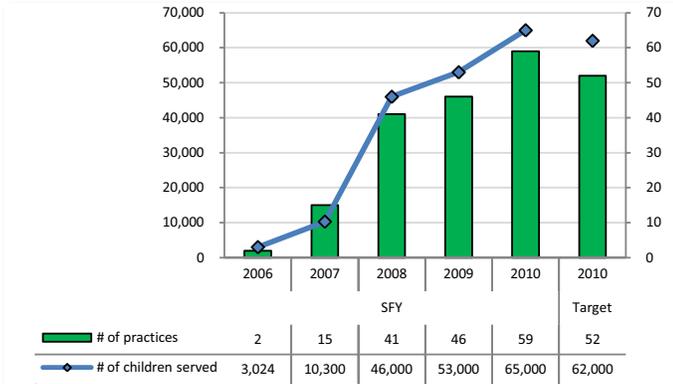
Promote healthy behaviors

What do we do?

- Early Childhood Iowa (ECI) has developed a comprehensive plan that serves as the framework for Iowa's early childhood system.
- Healthy Opportunities for Parents to Experience Success-Healthy Families Iowa (HOPES-HFI) helps families by providing intensive in-home family support services to at-risk families.
- The 1st Five program partners with primary healthcare providers to ensure quality social, emotional, and developmental screenings of children under age five and helps practices by offering enhanced care coordination to families in need of diverse community resources.
- The Birth to Five Community Utility project is working with a pediatric practice in Polk County to develop a community-based model for comprehensively addressing the specific health needs of children from birth to age 5. The project is working to develop a system for care coordination, expand the medical home components at the practice, develop the professional competencies needed, and improve child health outcomes.
- Project LAUNCH seeks to develop the necessary infrastructure and system integration to assure Iowa children from birth to age 8 are thriving in safe, supportive environments, enter school ready to learn, and are able to succeed. Project LAUNCH targets children and their families in Des Moines with a focus on low-income and minority populations who are traditionally underserved.
- The Early Hearing Detection and Intervention Program works to make sure hearing loss in newborns and infants is found early and help is available to children and families.
- Along with the Iowa Department of Education, IDPH coordinates the Early ACCESS program, which provides developmental evaluations and services for children from birth to age 3, 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 referrals to health services.

How do we measure our progress?

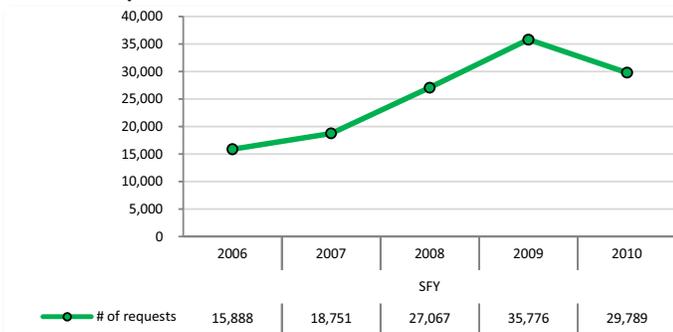
1st Five Medical Practices Engaged and Children Served.



Data source: 1st Five Title V Child Health Agencies. Data are available annually.

How are we doing? Between FY06 to FY10, the number of known practices in Iowa working to integrate a standardized surveillance tool during well child exams that includes assessing for social/emotional development and family risk factors increased from two to 59. During this same timeframe, the number of children birth to 5 served by this surveillance method increased from approximately 3,024 in FY06 to 65,000 in FY10. For FY11, it is estimated that approximately 7 more practices will be added. Evaluation of referrals shows that for every one referral from a medical practice, an average of 2-3 additional referrals are identified when care coordinators work with families.

2nd Number of child care nurse consultant service requests that were completed.



Data Source: HCCI 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 nearly doubled since 2006. The decrease in the number of services provided is due to the across the board budget cuts to Empowerment dollars in 2010.

What can Iowans do to help?

1. Go to www.earlychildhoodiowa.org and the parent's page (www.parents.earlychildhoodiowa.org) to learn more about the Early Childhood Iowa project.
2. Check www.idph.state.ia.us/1stfive/ for information on children's social-emotional development and to search a current statewide map of clinics partnering with 1st Five.
3. All Iowans can make sure their babies are screened for hearing loss. Iowa law requires screening all babies before leaving the hospital. To learn more, go to www.idph.state.ia.us/iaehdi/default.asp.
4. If you have a concern about a child's development, make a referral to Early ACCESS by calling 1-888-IAKIDS1 or an email to earlyaccess@vnsdm.org.
5. All Iowans can support and encourage funding for quality evidence-based early childhood programs.

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, & Workforce Development; state & local Community Empowerment; local maternal & child health agencies; family support programs; primary care providers; private providers; advocacy organizations; early care & education providers; Area Education Agencies.

Funding sources

Federal funds & intra state receipts* (Dept of Human Services & Education): 0153-0536/0546/0548/0980. **ECl:** federal funds: 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): K05-0691; K56-5661. **EHDI:** general fund, health care trust, & federal funds: K05-0611; K56-5671; 0153-0544/0682. **Early ACCESS:** federal funds & intra state receipts* (Dept of Education): 0153-0708/AR18. **HCCI:** intra state receipts* (Dept of Human Services & Management): 0153-0540/0662. **ACA Home Visiting:** federal funds: K05-0560.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$930,585	\$949,347	\$1,255,978
Health care trust	\$466,906	\$314,938	\$0
Federal funds	\$274,508	\$710,863	\$2,050,895
Other funds*	\$767,796	\$537,642	\$531,136
Total funds	\$2,439,795	\$2,512,789	\$3,838,009
FTEs	9.12	8.47	11.70

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 ♦ 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 (4th floor)

Phone: 515-242-6167 Fax: 515-242-6013
www.state.ia.us/earlyaccess

1st Five (5th floor)

Phone: 515-281-3108 Fax: 515-242-6013
www.iowaepsdt.org

Medical Home (5th floor)

Phone: 515-281-7044 Fax: 515-242-6013

Healthy Child Care Iowa (5th floor)

Phone: 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—Iowa's Trauma System

Promoting & Protecting the Health of Iowans

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 Iowa 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 118 trauma care facilities where life-saving care is immediately available.

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

- Trauma is the leading cause of death for Iowans 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.
- Iowa'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

What do we do?

- 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.

How do we measure our progress?

- 1 Iowa's trauma fatality rates compared to national rates adjusted by injury severity.

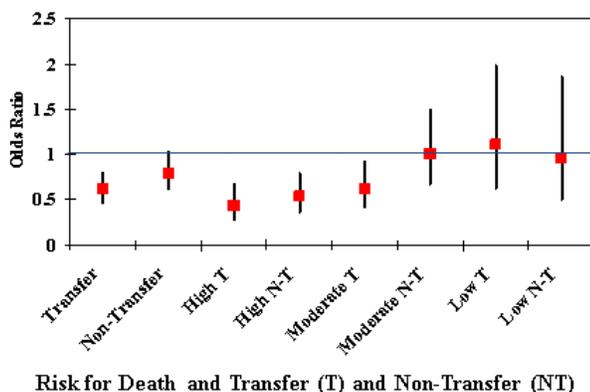


Data Source: National Trauma Data Bank (NTDB), 2009.

How are we doing? When adjusting for injury severity scores Iowa's fatality rates are lower than the rest of the nation in all ranges.

- 2 The adjusted odds for death decreased with implementation of the trauma system.

Odds Ratio for Death at Discharge Comparing Pre and Post Trauma System Implementation



Data Source: State Trauma Registry data, 2009. Data are submitted quarterly but not usually analyzed until SEQIC meetings.

How are we doing? Since Iowa's trauma system was established in 2000, there has been an approximately 50% reduction in the risk of death for high-risk patients (High T & High N-T Odds Ratios approximately equal to 0.5). This measure compares deaths due to trauma in 2009 (red squares with confidence interval lines) with deaths due to trauma that occurred prior to Iowa's trauma system (the solid line – Odds Ratio of 1).

What can Iowans do to help?

1. All Iowans, including healthcare providers, need to recognize trauma as a disease.
2. All Iowans 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 Iowans, 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 funds: K92-9204; 0153-1944 (FY2009); Federal funds: 0153-1942 (FY2010 & FY2011).

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
Tobacco funds	\$351,606	\$0	\$0
Federal funds	\$0	\$346,696	\$371,720
Total funds	\$351,606	\$346,696	\$371,720
FTEs	0.99	3.79	4.00

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.

Emergency Medical Services System

Promoting & Protecting the Health of Iowans

Division of Acute Disease Prevention & Emergency Response

Phone: 515-281-0620

www.idph.state.ia.us/ems



A broken leg, a heart attack, an injured child – whatever the emergency, Iowa’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 Iowans, 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 Iowans need it.

Did you know? 83% of authorized EMS services in Iowa describe themselves as volunteer and respond to approximately 20% of calls for service. The 17% of EMS services staffed by paid EMS providers respond to approximately 80% of calls for service.

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

- EMS serves as an entry point to the health care system.
- All 3 million Iowans, along with visitors to the state, may need EMS at some time in their life.
- Iowa 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

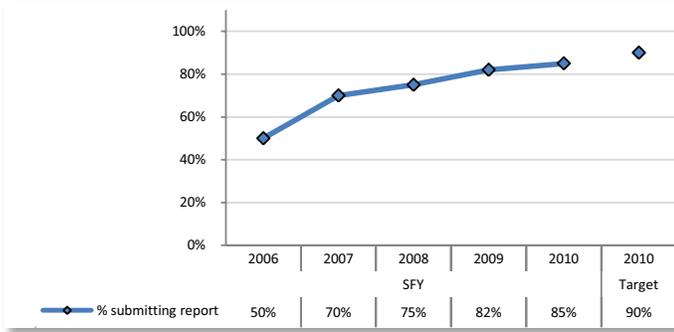
Promote healthy behaviors

What do we do?

- 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 Iowa have public access defibrillation programs in places like malls and office buildings.

How do we measure our progress?

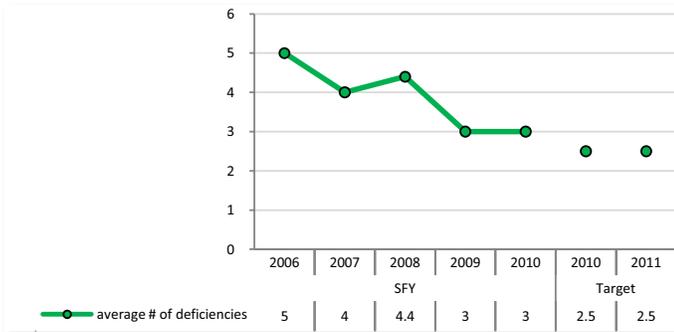
1 Percent of ambulance calls that submit a patient care report.



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

How are we doing? Currently, approximately 85% of ambulance calls are submitted.

2 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 3 deficiencies per site.

What can Iowans do to help?

1. Authorized EMS service providers should make sure that all required data is submitted to the Bureau of EMS.
2. Emergency medical care providers must understand the EMS system and the rules that regulate providing emergency medical care.
3. All Iowans 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 Iowans 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, federal funds, & carryover*; General funds are used for maintenance of effort match for the PHHS Block Grant: K19-1941/1943; 0153-1726/1952.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$1,052,699	\$1,162,172	\$1,223,621
Federal funds	\$432,850	\$52,585	\$0
Other funds*	\$0	\$97,967	\$0
Total funds	\$1,485,549	\$1,312,724	\$1,223,621
FTEs	9.38	5.67	7.05

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.

Environmental Epidemiology

Promoting & Protecting the Health of Iowans

Division of Environmental Health
Phone: 515-281-7462
www.idph.state.ia.us/eh/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 Iowans 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 Iowa lakes and streams unsafe to eat. Seven new fish consumption advisories have been posted for Iowa lakes and streams.

By working to keep Iowa's air, food, and water clean, Environmental Epidemiology helps keep Iowans 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 Iowans?

- Environmental exposures, like contaminated food, air, or water, can harm the health of Iowans.
- 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 Iowans have learned how to protect themselves against it.

Which Iowa Public Health Goals are we working to achieve?

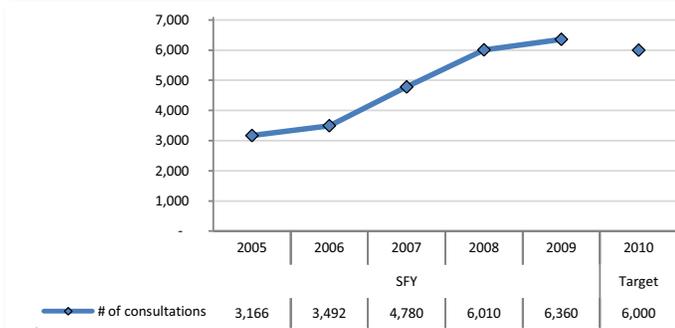
- Protect against environmental hazards
- Prepare for, respond to, & recover from public health emergencies
- Prevent epidemics & the spread of disease
- Strengthen the public health infrastructure

What do we do?

- 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.

How do we measure our progress?

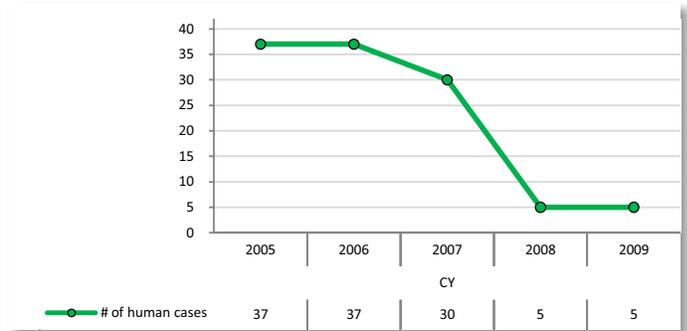
1 Number of consultations provided to local officials and the public.



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.

2 Number of human cases of West Nile virus reported.



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

How are we doing? Iowa'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 keep public awareness of the importance of protecting oneself and one's 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, more than 5,940 people viewed the West Nile virus page on the IDPH Web site.

What can Iowans do to help?

1. All Iowans can learn about how to prepare and handle food safely. For more information, go to [www.fightbac.org/content/view/6/11/](http://www.fightbac.org/content/view/full/6/11/).
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 www.idph.state.ia.us/adper/common/pdf/epi_manual/environmental_disease_poster.pdf.
3. All Iowans can learn more about West Nile virus, rabies, and other environmental diseases by going to www.idph.state.ia.us/adper/cade.asp.
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, local 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 funds: K13-1303; K92-9252; 0153-0984/1312/1318/1972.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$56,516	\$307,165	\$309,972
Tobacco funds	\$173,912	\$0	\$0
Federal funds	\$414,048	\$272,772	\$755,245
Total funds	\$644,476	\$579,937	\$1,065,217
FTEs	3.47	4.03	5.55

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.

Family Planning

Promoting & Protecting the Health of Iowans

Division of Health Promotion & Chronic Disease Prevention

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 2009, 48% of pregnancies in Iowa were unintended.

Why is the Family Planning program important to promoting and protecting the health of Iowans?

- There are 322,270 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 Iowa pregnancies steadily increased to 48,305. In 2008, the number of Iowa pregnancies dropped to 47,372. In 2009, the number of Iowa pregnancies dropped to 46,054. Women with intended pregnancies modify their lifestyles and obtain prenatal care earlier than do women with unintended pregnancies.
- Iowa's adolescents have higher rates of unintended pregnancy, low birth weight babies, and sexually transmitted infections than any other age cohort. The national teen birth rate is 41.5. The birth rate for all teens in Iowa is 33.9, but disparities do exist. The birth rate for Non-Hispanic Black youth is 88.4 and for Hispanic youth it is 104.8.
- Teen childbearing in Iowa cost taxpayers (federal, state, and local) approximately \$82 million in 2004, the latest year for which those figures are available. In Iowa, the number of births to teen mothers rose from 3,327 in 2005 to 3,524 in 2008. In 2009, the number of births to teens dropped to 3,448.

Which Iowa Public Health Goals are we working to achieve?

Promote healthy behaviors

Strengthen the public health infrastructure

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
- How to make a reproductive life plan

Health Education

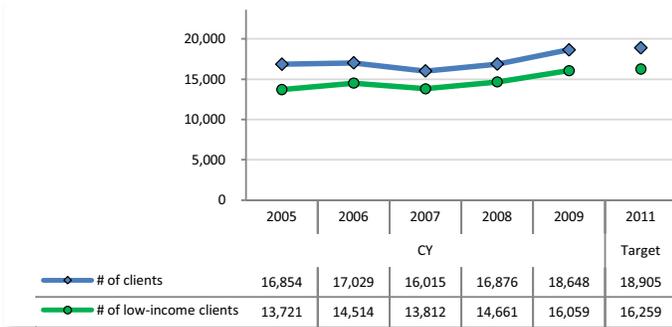
- Birth control methods
- Reproductive health and reproductive life planning
- Self-exams for breast or testicular cancer
- Sexually transmitted infections and HIV/AIDS
- Importance of nutrition
- Effects of alcohol, drugs, and tobacco on reproductive health

Community Education

- Public speakers and educational materials
- Parent-child communication
- Reproductive health
- Birth control
- Other family planning-related issues, including HIV/AIDS and STI prevention

How do we measure our progress?

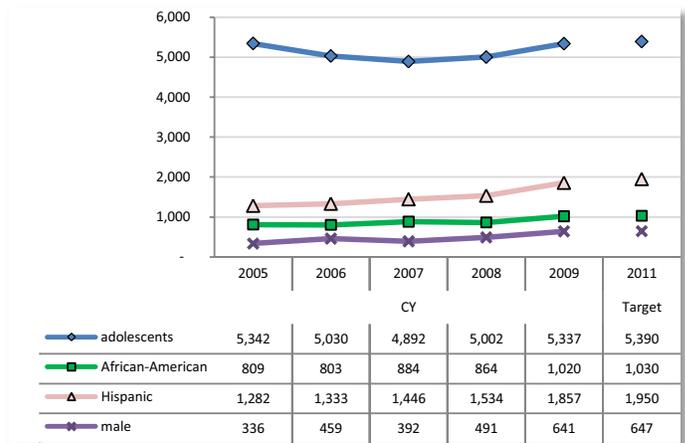
- Number of unduplicated clients served.
- Number of low-income clients served (below 150% of the federal poverty level).



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 and 2009, the numbers increased again. In 2009, Family Planning Clinics saw a 12% increase in the number of low-income clients served, now at the highest level since 2004.

- Number of adolescents (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 and 2009. The number of male clients increased from 2004 to 2005, decreased in 2006, and increased again from 2007 to 2009. The number of African-American clients increased from 2004 to 2006, decreased slightly in 2007, and increased in 2008 and 2009. 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 2009.

What can Iowans do to help?

- Learn more about the Family Planning Program by going to www.idph.state.ia.us/hpcdp/family_planning.asp.
- Share with friends and colleagues how important it is that pregnancies are planned.
- 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, Child Health, STD Prevention, HIV/AIDS & Viral Hepatitis, Cancer, Violence Prevention, WIC, Child Health, Tobacco Use Prevention & Control, Substance Abuse Prevention, Minority and Multicultural Health.

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

Funding sources

Federal funds: 0153-0302

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
Federal funds	\$1,104,675	\$1,135,632	\$1,264,378
Total funds	\$1,104,675	\$1,135,632	\$1,264,378
FTEs	1.86	1.62	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.

Finance

Promoting & Protecting the Health of Iowans

Division of Administration & Professional Licensure
Phone: 515-281-6645
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 Iowans.

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 7,519 bills to over 931 different contractors that provided services to Iowans in their local communities in FY2010.

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

- 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 Iowans.
- 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?

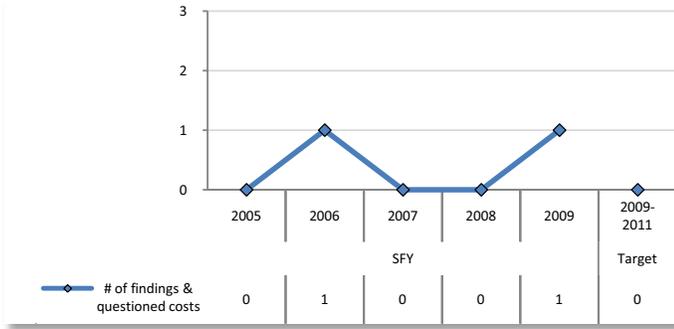
Strengthen the public health infrastructure

What do we do?

- 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.
- As of July 2010, contractors are using an electronic document library system for service contract management including the submission of reimbursement requests. In January 2011, the system will be expanded to include the electronic execution of contractual agreements and submission of proposals pursuant to a competitive selection process.

How do we measure our progress?

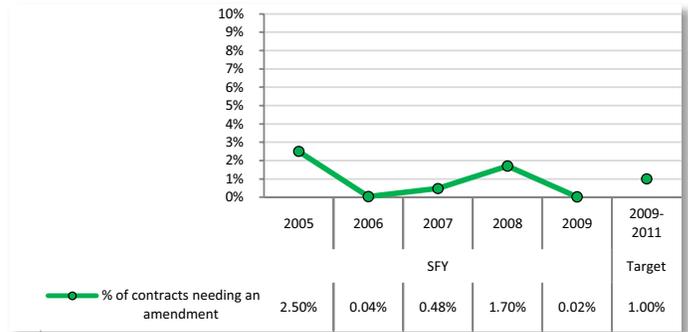
1 Audit Reports: Number of findings and questioned costs.



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.

2 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 Iowans 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 Iowans 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

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$50,538	\$78,685	\$49,075
Federal funds	\$1,004,550	\$92,249	\$316,029
Other funds*	\$255,000	\$1,102,202	\$815,854
Total funds	\$1,310,088	\$1,183,136	\$1,180,958
FTEs	17.67	15.74	19.40

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 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

Gambling Treatment

Promoting & Protecting the Health of Iowans

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 Iowa 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 Iowans?

- It is estimated that 43,500 Iowans are lifetime pathological gamblers and 26,100 meet the criteria in a given year.
- Iowans 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 Iowans help and information. More than 3,400 calls were logged to the helpline in FY2009.

Which Iowa Public Health Goals are we working to achieve?

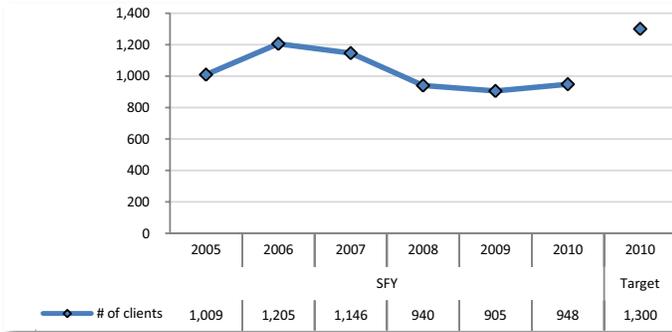
- Promote healthy behaviors
- Strengthen the public health infrastructure

What do we do?

- Fund counseling for Iowans 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.
- Promote a Recovery Oriented System of Care that supports Iowan's long-term recovery efforts.
- 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.

How do we measure our progress?

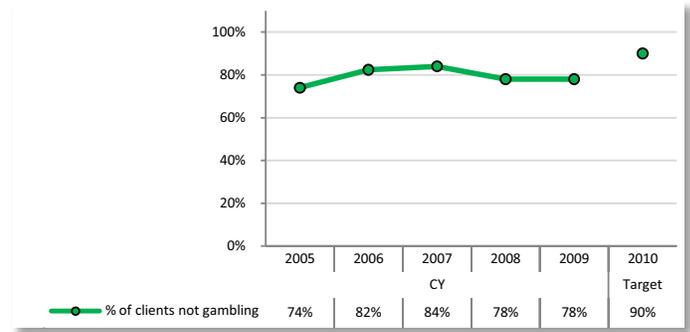
1 Number of clients admitted for counseling services to a state funded provider.



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

How are we doing? In SFY2010, 948 clients received counseling services, an increase from 905 in SFY2009.

2 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 2009, 78% reported no gambling in the past 30 days. This remains unchanged from the previous year.

What can Iowans do to help?

1. If you or someone you care about is struggling with problem gambling, call 1-800-BETS-OFF for help.
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 Iowans 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, Iowa Lottery, Iowa Gaming Association, Iowa Racing and Gaming Commission.

Funding sources

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

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$0	\$3,743,779	\$3,699,530
Gambling funds	\$4,111,655	\$0	\$0
Total funds	\$4,111,655	\$3,743,779	\$3,699,530
FTEs	1.95	2.69	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.

Grade “A” Milk Certification

Promoting & Protecting the Health of Iowans

Division of Environmental Health
Phone: 515-281-4937
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!

Did you know? Iowa ranks 13th in the nation in milk production.

Why is the Grade “A” Milk Certification program important to promoting and protecting the health of Iowans?

- Iowa’s milk industry ranks 13th in the nation and pumps at least \$1.5 billion into Iowa’s economy.
- Unless properly processed, milk is nature’s perfect medium for the growth of dangerous organisms.
- All Iowans, and out of state consumers, benefit from safe milk and milk products produced in Iowa.
- Iowa code requires IDPH to be responsible for certifying that all grade “A” milk and milk products meet Iowa and national standards.
- In 2004 and 2005, two separate milk-borne disease outbreaks related to drinking “raw” or unpasteurized milk occurred in Iowa; 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 Iowa 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 milk-borne 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 Iowa data into the national milk database program, making it available for nationwide analysis of trends.

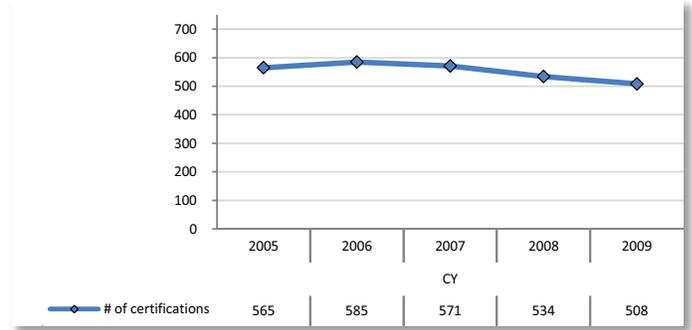
▶ How do we measure our progress?

❶ 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 Iowans do to help?

1. All Iowans should know that grade “A” milk products produced in Iowa are safe and excellent sources of nutrition.
2. All Iowans should be aware that “raw” or unpasteurized milk can contain dangerous bacteria and poses a threat to public health.
3. All Iowans 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

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$194,003	\$166,028	\$194,196
Total funds	\$194,003	\$166,028	\$194,196
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.

hawk-i Outreach

Division of Health Promotion & Chronic Disease Prevention

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 children in working families. She heard about the program from a *hawk-i* outreach coordinator in her community. She filled out the submitted an online application, 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.

Did you know? Over 230,000 eligible Iowa children are enrolled in Medicaid and *hawk-i*. The *hawk-i* program offers dental only coverage for children who have health insurance buy may not have dental coverage?

Why is *hawk-i* Outreach important to promoting and protecting the health of Iowans?

- The Iowa Department of Human Services estimates that about 40,000 uninsured Iowa 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.
- Nearly one-third of all Americans (about 90 million people) have trouble understanding and using health information.
- According to the 2005 Iowa Child and Family Household Health Survey, 97% of those surveyed said it was very important for children to have health insurance.

Which Iowa Public Health Goals are we working to achieve?

Promote healthy behaviors

Strengthen the public health infrastructure

What do we do?

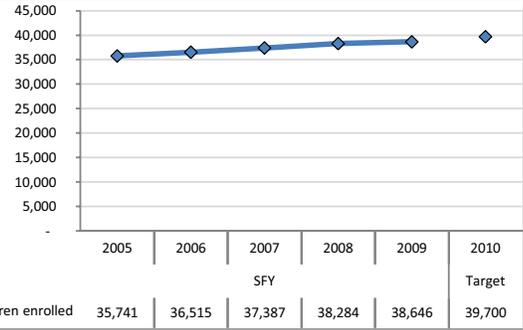
- Work with other organizations and agencies to provide information and *hawk-i* applications to families at various locations.
- Help families navigate the Medicaid and *hawk-i* enrollment process.
- Develop and deliver timely, culturally-correct education and materials to Iowans through conferences, 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.

How do we measure our progress?

1 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 continues to grow. Iowa is projecting that by June 30, 2010, with the continuation of expanded outreach efforts and expanded coverage of children in families with countable income up to 300 percent of the FPL, the total number of children enrolled in the Medicaid Expansion and *hawk-i* programs will reach approximately 42,186.



What can Iowans do to help?

1. All parents, health care providers, community members, policy makers, and employers can learn about 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, Iowa State University Extension, Des Moines Public Schools, , Iowa/Nebraska Primary Care Association, , Iowa Senate, Iowa House of Representatives, St. Ambrose University.

Funding sources

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

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
Other funds*	\$431,709	\$360,750	\$411,970
Total funds	\$431,709	\$360,750	\$411,970
FTEs	1.67	0.86	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.

Hazardous Waste Site Assessment

Promoting & Protecting the Health of Iowans

Division of Environmental Health
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 Iowans 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 Olin in eastern Iowa to transform a former petroleum bulk-tank site into a bike path trailhead. Protection for the present and plans for the future are all part of how IDPH helps keep Iowans 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 (how long the exposure was), and the frequency of exposure (how many times you were exposed). Of course, if you prevent exposure to chemicals, you won't get sick or have any harmful effects on your health.

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

- Improper management of hazardous wastes, chemical spills and accidents, and previous industrial use of land may expose Iowans 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.
- Iowans are concerned about environmental exposures to chemicals that can affect their health or the health of their children.
- Iowans 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

What do we do?

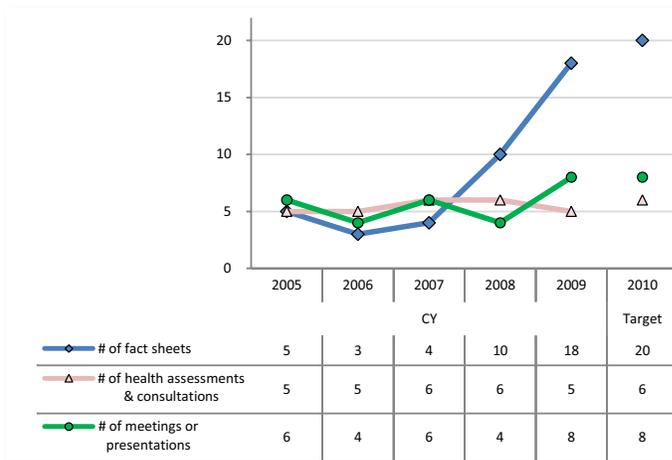
- Prepare health assessments and health consultations for state and federal agencies and for communities.
- Develop fact sheets and informational documents for state agencies and communities summarizing health effects from exposure to specific sites.
- Design and develop physician, nurse, and community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

How do we measure our progress?

- ❶ Number of community meetings attended or presentations made to communities.
- ❷ Number of fact sheets developed.
- ❸ 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 Iowans do to help?

1. All Iowans 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 funds: 0153-01304/1308

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
Federal funds	\$191,315	\$156,165	\$125,000
Total funds	\$191,315	\$156,165	\$125,000
FTEs	1.91	1.52	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.

Health Care Safety Net

Promoting & Protecting the Health of Iowans

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 Health Care Safety Net works. It is intended to "catch" Iowans in danger of falling through the cracks in the health care system.

By focusing on community health centers, rural health clinics, small rural hospitals, and free clinics, IDPH Safety Net partners are able to reach more than 130,000 Iowans who would otherwise lack access to health care because of where they live, cultural differences, or having little or no health insurance. Iowa has approximately 13 federally qualified community health centers, 140 Certified Rural Health Clinics, and 98 small rural hospitals across the state.

Good health should not be a tightrope walk for any Iowan. The Health Care Safety Net partners IDPH engages provide the assurance of access to care.

Did you know? Nearly half (43%) 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. An estimated 49.4 million individuals were uninsured in 2010. By 2015, there could be 59.7 million people uninsured and 67.6 million by 2020.

Why is the Health Care Safety Net important to promoting and protecting the health of Iowans?

- All Iowans 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.
- Safety Net services increase access to qualified health professionals and to quality health services for underserved and uninsured Iowans. Safety Net providers, such as community health centers and free clinics, provide needed comprehensive health care services to all Iowans, 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 indemnification to volunteer health care providers serving Iowa's free clinics. VHCPP free clinics have served more than 30,000 Iowans to date.

Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

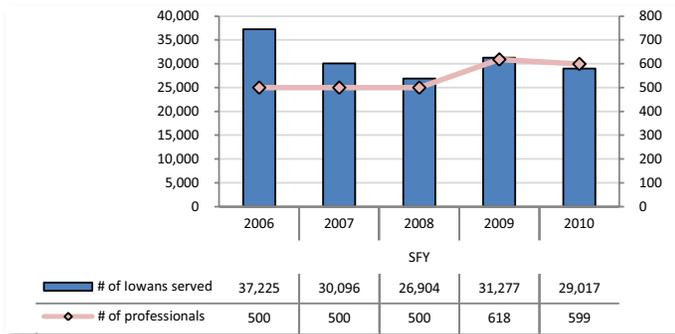
What do we do?

- Provide funding and contract management and evaluation of the Iowa Collaborative Safety Net Provider Network.
 - 4 initiatives to expand access to specialty care.
 - 3 programs expanding access to pharmaceuticals.
 - Direct financial support to Iowa free clinics, family planning agencies, and Rural Health Clinics.
 - Safety Net Medical Home development projects.
- Recruit physician assistants and advanced registered nurse practitioners to participate in a postgraduate medical training program so they can provide services in Iowa's mental health shortage areas.
- Analyze geographic areas of Iowa eligible for CMS-certified Rural Health Clinics.
- Provide indemnification to health care professionals and free clinics through the Volunteer Health Care Provider program. Currently, more than 500 professionals are enrolled.
- Provide loan repayment opportunities to primary care providers working in designated underserved areas.
- Provide funding and contract management to Iowa's critical access and small hospitals for quality improvement.
- Collaborate with Iowa/Nebraska Primary Care Association to identify areas of Iowa of greatest need.
- Analyze and identify areas of Iowa for Health Professional Shortage Areas leading to eligibility for loan repayment and enhanced reimbursement from Medicare.

How do we measure our progress?

1 Number of providers enrolled in the Volunteer Health Care Provider Program (VHCPP).

2 Number of Iowans served by VHCPP professionals.

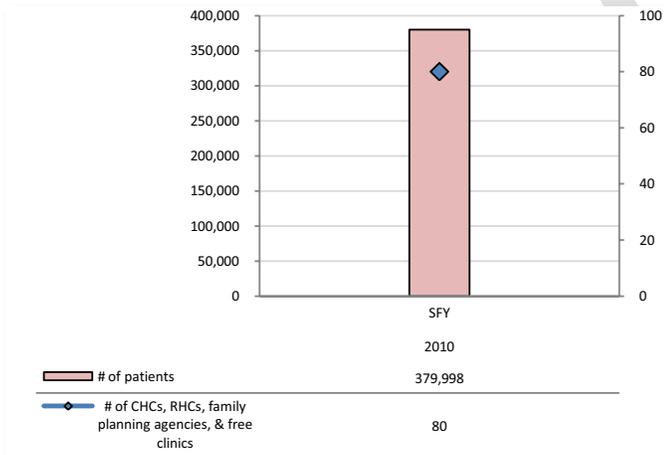


Data Source: Program database & clinic reports. Data are available annually.

How are we doing? In 2010, the VHCPP began covering specialty health care providers in their offices if the patient was referred by the Iowa Collaborative Safety Net Provider Network.

3 Number of clinics and agencies participating in the Iowa Collaborative Safety Net Provider Network.

4 Number of patients served by clinics and agencies participating in the Iowa Collaborative Safety Net Provider Network.



Data Source: Safety Net Provider Network database. Data are available annually.

How are we doing? As of 2010, the Iowa Collaborative Safety Net Provider Network included 14 Community Health Centers serving 154,020 patients; 40 Rural Health Clinics serving 109,331 patients; 16 Family Planning Agencies serving 96,324 patients; and 10 free clinics serving 20,323 patients.

What can Iowans 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. All Iowans can volunteer to help free clinics with grant-writing, fundraising, and any general tasks needed to run the clinic.
3. Health care professionals wanting to volunteer at free clinics can visit the VHCPP Web site at http://www.idph.state.ia.us/hpcdp/volunteer_healthcare_provider_program.asp.

Others working on similar issues

Other IDPH bureaus, offices, or programs: Access to Quality Health Services, Health Workforce, Local Public Health Services.

Other organizations: Health Resources and Services Administration (HRSA), Iowa/Nebraska Primary Care Association, Free Clinics of Iowa, Iowa Department of Human Services, Iowa Medicaid Enterprise

Funding sources

General fund, health care trust fund, & intra state receipts* (Dept of Human Services): K09-0971; K60-6061/6067.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$0	\$0	\$1,180,611
Health care trust	\$2,228,386	\$1,617,829	\$0
Other funds*	\$0	\$20,000	\$0
Total funds	\$2,228,386	\$1,637,829	\$1,180,611
FTEs	0.61	0.83	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.

Iowa 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

Health Information Technology (Iowa e-Health)

Promoting & Protecting the Health of Iowans

Division of Acute Disease Prevention & Emergency Response
Phone: 1-866-924-4636
www.iowaHealth.org



Imagine experiencing a heart attack hours away from home. The emergency room needs your vital health information fast. Blood type, allergies, and medications you take can affect the medical care you receive. Trouble is, it can take hours or days before the emergency room receives your medical records.

This is time you may not have.

That's why the Iowa Department of Public Health, through a public and private collaboration known as Iowa e-Health, is leading an effort to create a statewide health information exchange (HIE). This secure network will give your primary care provider access to your vital health information when and where it is needed, in cases of emergency or during regular appointments.

Faster access that may save your life.

Did you know? The Health Information Exchange is not a central repository of health records; rather, it is the "hub" that connects different electronic health record systems throughout the state, allowing health information to flow between primary care providers.

Why is Iowa e-Health important to promoting and protecting the health of Iowans?

The Health Information Exchange involves the sharing of health information across boundaries of individual practice and institutional health settings and with consumers. It is a public good that will contribute to improved:

- Clinical outcomes and patient safety
- Population health
- Access to and quality of health care
- Efficiency in health care delivery

Which Iowa Public Health Goals are we working to achieve?

- Strengthen the public health infrastructure
- Prevent epidemics & the spread of disease

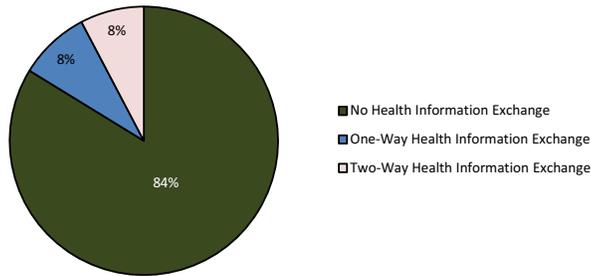
What do we do?

- Convene stakeholders, set direction and goals, and provide oversight to ensure accountability.
- Identify and manage financial resources to achieve short and long-term sustainability.
- Implement and manage the core infrastructure and standards to enable the electronic exchange of health information among providers.
- Establish policies and trust agreements to safeguard privacy and security of electronic health information.
- Perform day-to-day activities to support Iowa e-Health operations and alignment with broad health reform. This includes communication and outreach to providers and consumers, support for providers adopting health IT tools, and assessment and measurement of success.

How do we measure our progress?

1 Percent of Iowa Hospitals that could connect to a statewide Health Information Exchange (HIE).

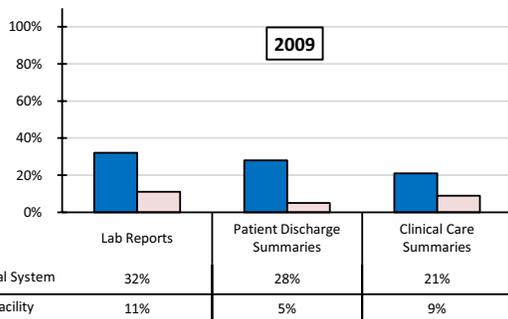
Iowa Hospital Health Information Exchange Readiness, 2009



Data Source: Iowa Hospital Association Annual Survey, 2009

How are we doing? One way to measure readiness to connect to an HIE is by evaluating the extent to which electronic health information is being exchanged. A small percentage (16%) of Iowa's 118 hospitals currently exchange electronic health information within their hospital systems. Over the next year, as hospitals connect to the HIE, an increased number of hospital systems will increase their capacity to electronically exchange health information, both within their hospital system and across institutional boundaries.

2 How Iowa Hospitals are electronically exchanging health information.



Data Source: Iowa Hospital Association Annual Survey, 2010

How are we doing? Of Iowa's hospitals that exchange electronic health information, some send/receive lab reports and patient discharge summaries, while others exchange clinical care summaries. Some data is exchanged within the same hospital system (e.g., Methodist Hospital in Des Moines with St. Luke's Hospital in Cedar Rapids). Other data is exchanged with providers from an outside facility (e.g., Mercy Des Moines with the University of Iowa Hospitals and Clinics).

As Iowa's Health Information Exchange is developed and implemented, case studies will be collected and shared to show how connection to Iowa's HIE impacts the quality, safety and efficiency of Iowa's health care.

What can Iowans do to help?

1. Every Iowan should communicate with their health care provider(s) to learn how health information technology is being used to enable delivery of high quality, safe and efficient care.
2. All Iowans are encouraged to develop and improve personal computer skills.
3. All Iowans should learn about plans to promote the adoption and use of health information technology, including the Iowa HIE. For more information, go to www.iowahealth.org.
4. Public health professionals should continue to learn about how health information technology can be fully utilized to promote and protect the health of Iowans.

Others working on similar issues

Other IDPH bureaus, offices, or programs: Disaster Operations & Response, Immunization, Health Care Access, Multicultural Health, Local Public Health Services, Finance, Iowa Medicare, Rural Hospital Flexibility Program (FLEX), Iowa Medical Home System Advisory Council

Other organizations: Office of the National Coordinator for Health IT (ONC), US Department of Health and Human Services, Iowa Regional Extension Center (Iowa REC), Iowa Medicaid Enterprise (IME), Agency for Healthcare Research and Quality (AHRQ), Midwest Community College Health Information Technology Consortium, Iowa Workforce Development (IWD), Health Information Management Systems Society (HIMSS), American Health Information Management Association (AHIMA)

Funding sources

General fund, federal funds, and intra state receipts* (Dept of Human Services): K09-0977, 0153-0982/AR10.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$0	\$158,188	\$159,753
Federal funds	\$0	\$18,391	\$786,382
Other funds*	\$0	\$150,677	\$182,000
Total funds	\$0	\$327,256	\$1,128,135
FTEs	0.00	1.48	7.00

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 Statistics

Promoting & Protecting the Health of Iowans

Division of Administration & Professional Licensure
Phone: 515-281-4944
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 Iowa's health history can be told through the "numbers" and the Bureau of Health Statistics helps ensure they "add up" to a healthier future.

Did you know? 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 Iowans?

- 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.
- 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 Iowans, 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.

Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

What do we do?

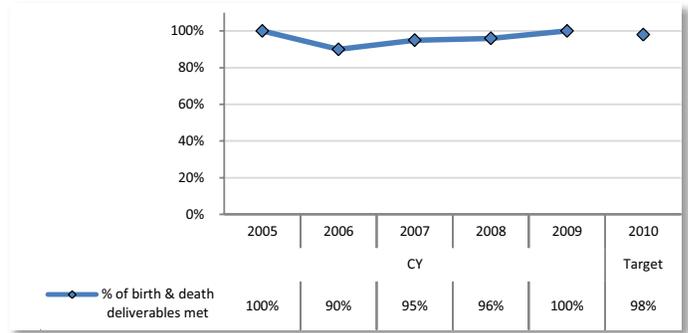
- Provide data to local, state, and national public health agencies so they can plan and measure the effectiveness of programs and make decisions about the use of resources.
- Provide data to state agencies to help them conduct their official duties.
- Provide certified copies of birth, death, and marriage records to Iowans 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.

How do we measure our progress?

1 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 Iowans do to help?

1. All Iowans 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

Federal funds & retained fees*: K21-2203; 0153-0456/0972/1724/AR22; 0024-0024

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
Federal funds	\$839,750	\$736,059	\$707,111
Other funds*	\$2,883,119	\$2,456,237	\$2,524,550
Total funds	\$3,722,869	\$3,192,296	\$3,231,661
FTEs	32.07	33.15	29.65

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.

Health Workforce

Promoting & Protecting the Health of Iowans

Division of Health Promotion & Chronic Disease Prevention
Phone: 515-281-8517
www.idph.state.ia.us/hpcdp/health_care_access.asp



Recruiting any health professional to a rural setting is very difficult. We knew this from experience because it had taken us almost two years to recruit a medical director to our health center. So where to begin? We didn't have money for expensive recruiters. This is a dilemma facing all community health centers. To attract qualified providers, health centers must first find a way to get noticed by providers seeking jobs and then be in a position to be competitive in salary and benefits. Our Primary Care Association as well as the Iowa Department of Public Health Dental Director recommended putting our dental opportunity on the 3R Net website. The ad was placed in late summer of 2008. This proved to be the answer to our prayers. A young dentist from Virginia who was graduating in May 2009 saw our ad on the 3R Net website and called about our position! We actually achieved more than we had hoped for because this dentist was also bilingual in Spanish and our target patient population is overwhelmingly Spanish speaking! The initiation of dental services in our community health center was not the result of actions of any single person or entity. It "took a village" and the 3R Net was a key member of our village. We are so grateful and appreciative.

—Renee Seagren, United Community Health Center, Storm Lake

A competent, qualified, and diverse health workforce is vital to the health of Iowans, 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? 20% of the U.S. population is scattered over 90% of our nation's landmass, yet only 9% of physicians practice in rural America. Nearly half of Iowans live in rural areas.

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

- Iowa's physician workforce is aging along with the rest of the nation, average hours worked are falling, and many physicians are nearing retirement just as there is a growing demand for physician services.
- Fifty-five Iowa counties include a Primary Care Health Professional Shortage Area.
- Ninety Iowa counties are Mental Health Professional Shortage Areas.
- Almost half of Iowa's dentists (49%) are over age 50. Sixty-nine Iowa counties are in a Dental Health Professional Shortage Area.
- Long-term care facilities face costly high turnover of direct care workers, and Iowans cope with less continuity of care.

Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

What do we do?

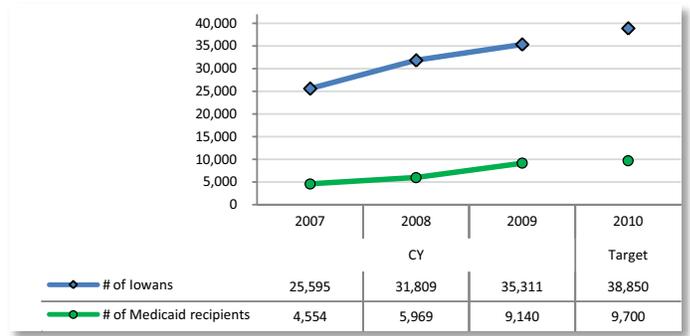
- Assist in recruiting students into primary care service-oriented careers.
- Engage in analysis and strategic planning for health care access and health care reform.
- Administer the National Health Service Corps (NHSC) program for Iowa, providing support to practice sites and clinicians.
- Lead the Personal and Home Care Aide State Training Program to develop a training and credentialing program for direct care workers.
- Assist 25 to 30 clinicians to practice in Iowa each year through the Conrad 30/J1 Visa Waiver Program.
- Coordinate all public and private efforts to develop and maintain a stable, well-qualified, diverse, and sustainable health care workforce.
- 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.

How do we measure our progress?

1 Number of underserved lowans receiving health care as a result of state health professional loan repayment.

Data Source: Reports from loan repayment grantees. Data are available annually.

How are we doing? Thousands of lowans are served each year by health professionals recruited and retained through the PRIMECARRE Loan Repayment Program. Recruitment and retention incentives help Iowa compete for health professionals in short supply; however, restrictions tied to federal regulations mean that only certain health professions are included. This may mean that access to some types of therapy or other services might not be as readily available.



What can lowans 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.
3. lowans can participate in community planning for adequate health care services and recruitment.

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, Iowa CareGivers Association, HRSA Bureau of Health Professions, National Rural Recruitment and Retention Network (3RNet), University of Iowa, Carver College of Medicine, Office of Statewide Clinical Education Programs, Des Moines University Area Health Education Center, University of Iowa Area Health Education Center, Iowa Workforce Development.

Funding sources

Direct Care Workers: general fund & health care trust fund: K09-0933/0946; K60-6073. **Iowa Health Workforce Center:** general fund: K09-0979 (60%). **Mental Health Workforce:** general fund & health care trust fund: K09-0965/0967/0973; K60-6065/6073. **Primary Care Office:** federal funds: 0153-0912/AR02. **PRIMECARRE:** general fund, federal funds, and other funds; State funds are used for a 1:1 match for the Federal Loan Repayment Grant: K09-0901; 0153-0908/AR04.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$150,000	\$475,778	\$1,045,013
Health care trust	\$264,500	\$668,566	\$0
Federal funds	\$269,758	\$479,445	\$426,699
Other funds	\$0	\$0	\$25,000
Total funds	\$684,258	\$1,623,789	\$1,496,712
FTEs	0.93	3.07	4.30

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.

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 ♦ Iowa Health Workforce Center ♦ Direct Care Worker Advisory Council
Phone: 515-281-8517 ♦ Fax: 515-242-6384 ♦ www.idph.state.ia.us/hpcdp/health_care_access.asp

Heart Disease & Stroke Prevention

Promoting & Protecting the Health of Iowans

Division of Health Promotion & Chronic Disease Prevention

Phone: 515-281-6016

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



Question: Why should a dentist take your blood pressure?

Answer: To assure that your dental treatment is safe and to reduce your chances of heart disease! Made possible by a grant from the Centers for Disease Control and Prevention, the Iowa Heart Disease and Stroke Prevention Program (IHDSPP) and the University of Iowa are working together to increase blood pressure screenings and tobacco cessation referrals for dental patients served within Iowa communities.

In 2010, almost 55% (900/1,650) clients screened within this hypertension project were found to have high blood pressure! Approximately 12% of those with high blood pressure were current tobacco users and were referred to the Iowa Quitline for tobacco cessation services by their dental practices.

What a great idea!

Did you know? Heart disease and stroke are the #1 and #4 killers of Iowa men and women, respectively.

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

In Iowa,

- 1 out of every 3 deaths is directly linked to cardiovascular disease.
- 6,912 people died from heart disease and another 1,626 died from stroke in 2009.
- Age-adjusted heart disease death rates for Iowans*:
 - 68% higher for men than women: 227 for men vs. 135 for women (per 100,000).
 - 175 deaths per 100,000 Iowans – which is 6% higher than the national Healthy People 2010 objective (166 deaths per 100,000 people)

*Source: 2009 Vital Statistics for Iowa Report

Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

Promote healthy behaviors

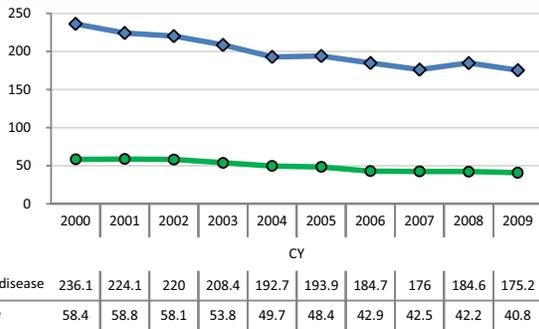
What do we do?

The Iowa Heart Disease and Stroke Prevention Program partners with many organizations across the state to plan, implement, and report statewide activities which support Iowa's Heart Disease and Stroke Plan 2010-2014. The program works with the WISEWOMAN program to provide patient resources, continuing education coursework, and updated clinical practice guidelines to a diverse network of healthcare providers working with the WISEWOMAN program.

The WISEWOMAN Program provides services to Iowa women through the *Care for Yourself* program. WISEWOMAN provides health screenings associated with heart disease and stroke risk factors (i.e. height/weight, blood pressure, glucose, and cholesterol readings). Based on screening results, the local programs provide individualized health goals based on nutrition, physical activity and tobacco cessation for the women. The WISEWOMAN program serves nearly 2,200 women annually in 98 Iowa counties through 26 *Care for Yourself* sites.

How do we measure our progress?

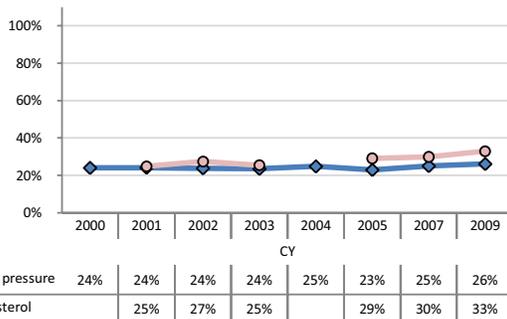
1 Age-Adjusted Heart Disease and Stroke Mortality Rate (per 100,000 Iowans).



Data Source: Mortality Data, Iowa Department of Public Health. Data are available annually.

How are we doing? The number of heart disease and stroke related deaths in Iowa have decreased an average of 3% and 4% each year during 2000-2009.

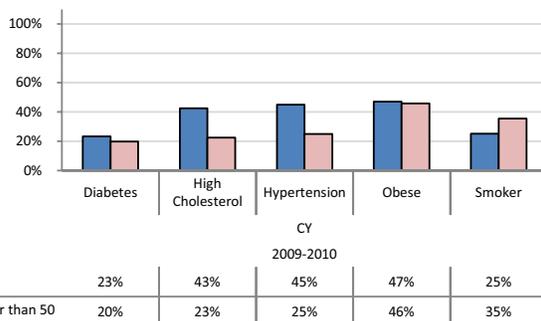
2 Age-adjusted percentage of Iowa adults reporting high cholesterol and high blood pressure.



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

How are we doing? The percentage of Iowa adults reporting high cholesterol and high blood pressure has increased in recent years.

3 Percent of WISEWOMAN participants with Risk Factor(s) for Cardiovascular Disease.



Data Source: Iowa *Care For Yourself* (CFY) and WISEWOMAN data. Data are available annually. *Obese = BMI>30

How are we doing? Iowa WISEWOMAN participants over the age of 50 (screened from January 2009-October 2010) had a higher percentage in 4 out of 5 risk factor categories (except for smoking) than younger women.

What can Iowans do to help?

1. Know your health numbers (including blood pressure, blood cholesterol, and blood glucose levels).
2. Increase your amount of physical activity each day
3. Eat moderate portion-sizes of fresh fruits, vegetables, whole grains, lean-meats and low-fat dairy products.
4. Know the symptoms of a heart attack and a stroke – and know when to call 9-1-1.

Others working on similar issues

Other IDPH bureaus, offices, or programs: Bureau of Nutrition and Physical Activity, Bureau of Healthcare Access, Diabetes Prevention and Control, Office of Multicultural Health, Oral Health Bureau, and the WISEWOMAN program, Division of Acute Disease and Emergency Response (Bureau of EMS and Bureau of Communication and Planning), Division of Tobacco Use Prevention and Control.

Other organizations: American Heart Association/American Stroke Association (Go Red for Women), Centers for Disease Control and Prevention (Heart Disease and Stroke Prevention, Nutrition and Physical Activity, WISEWOMAN), Iowa Healthcare Collaborative, National Heart Lung and Blood Institute (HeartTruth for Women, National High Blood Pressure Education Program, National Cholesterol Education Program, Obesity Education Initiative), University of Iowa (Institute for Public Health Practice, College of Dentistry).

Funding sources

Federal funds: 0153-0420/0760

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
Federal funds	\$1,025,839	\$1,198,473	\$1,287,519
Total funds	\$1,025,839	\$1,198,473	\$1,287,519
FTEs	5.01	5.08	6.85

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.

HIV/AIDS & Viral Hepatitis

Promoting & Protecting the Health of Iowans

Division of Behavioral Health

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 Iowans reading this page who doesn't know they are infected with HIV. Maybe you're one of the 50,000 Iowans 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 Iowans?

- HIV diagnoses reached an all-time high in 2007 with 128 persons diagnosed. This was nearly equaled in 2009, when 127 persons were diagnosed.
- The estimated number of Iowans living with HIV/AIDS has grown to over 2,200 people, including over 500 who are infected but who do not know it.
- The number of Iowans living with hepatitis C is estimated to be over 53,000. Over 80% of these people are not aware of their infections.
- 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 life-saving medications or help with insurance premiums and co-pays to nearly 400 Iowans 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.

Which Iowa Public Health Goals are we working to achieve?

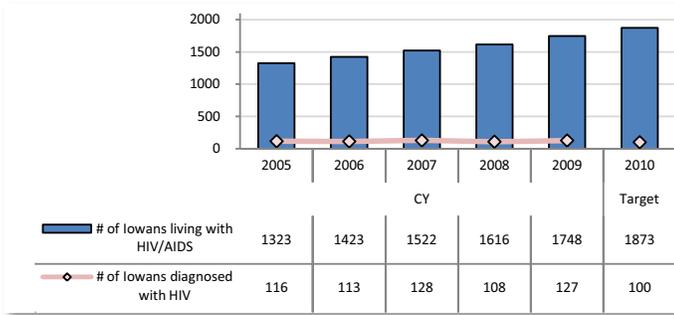
- Prevent epidemics & the spread of disease
- Strengthen the public health infrastructure
- Promote healthy behaviors

What do we do?

- 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 Iowans 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.

How do we measure our progress?

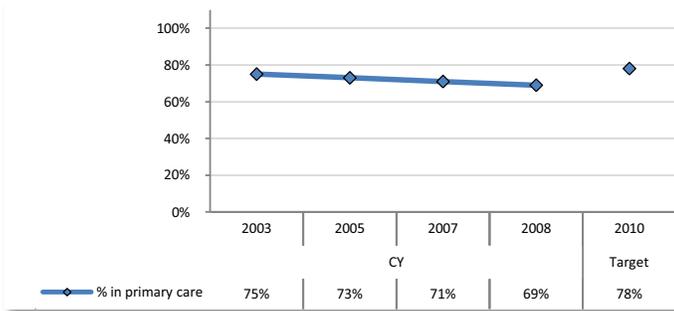
- ❶ Number of Iowans diagnosed with HIV.
- ❷ Number of Iowans living with HIV/AIDS.



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 Iowans living with HIV/AIDS is now increasing by about 100 per year.

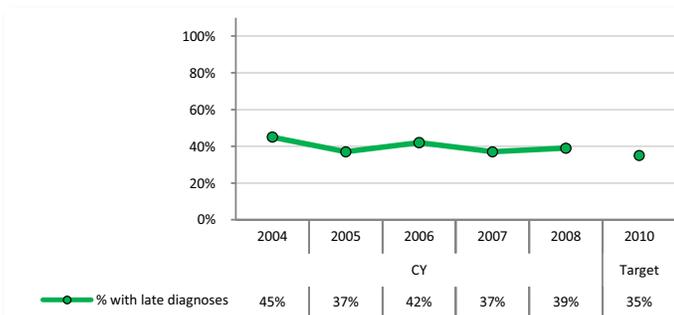
- ❸ Percent of diagnosed HIV-positive people who are in HIV primary medical care.



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 70-75%.

- ❹ 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 diagnosis.

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

What can Iowans do to help?

1. All Iowans who are at risk for HIV or 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.
2. All Iowans 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 funds, intra state receipts* (Dept of Education), & private grant*: K07-0761; K86-8602; O153-0804/1568/1570/1572/1574/1578/ 1580/1582. **Hepatitis:** general fund: K07-0763; K15-1529

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$442,866	\$627,769	\$670,877
Tobacco funds	\$275,000	\$0	\$0
Federal funds	\$5,114,907	\$4,812,218	\$5,451,906
Other funds*	\$14,110	\$49,224	\$28,482
Total funds	\$5,846,883	\$5,489,211	\$6,151,265
FTEs	12.84	15.13	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.

Iowa Department of Public Health ♦ Division of Behavioral Health ♦ 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

Immunization

Promoting & Protecting the Health of Iowans

Division of Acute Disease Prevention & Emergency Response

Phone: 1-800-831-6293

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



In the 1950s, 7,813 Iowans were infected with polio, many needing braces, crutches, wheelchairs, and iron lungs. In 2009, there were no cases of polio in Iowa. Why such a dramatic decline? The polio vaccine. During the 1960s, more than 35,000 Iowans got rubella (German measles). In 2009, 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 Iowa 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 Iowans 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 Iowans?

- 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?

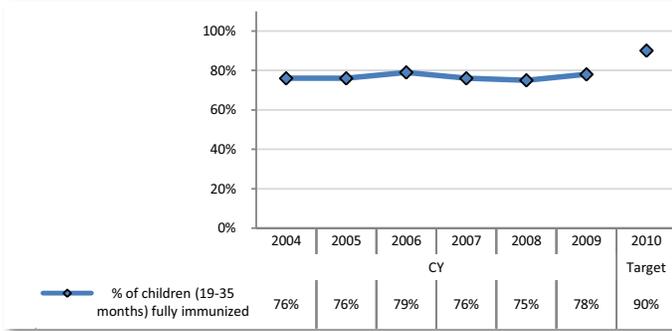
- Prevent epidemics & the spread of disease
- Strengthen the public health infrastructure
- Prepare for, respond to, & recover from public health emergencies
- Promote healthy behaviors

What do we do?

- Purchase and distribute vaccine to public and private health care providers through the Vaccines for Children (VFC) program. About 347,081 Iowans ages 18 and younger are eligible for the program because they are Medicaid eligible, uninsured, underinsured, or American Indian or Alaskan 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 Iowans, helping to prevent individuals from being under and over immunized.

How do we measure our progress?

1 Percent of all Iowa children ages 19-35 months fully immunized*.



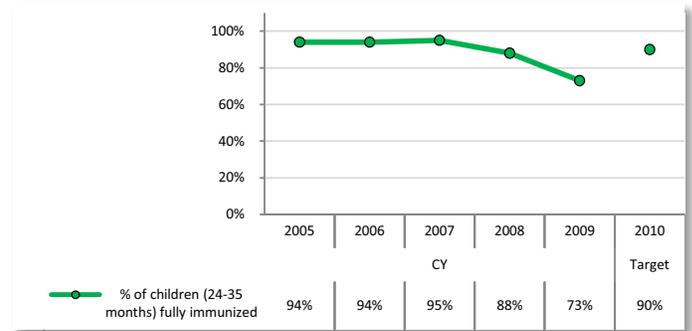
Data Source: National Immunization Survey, Centers for Disease Control and Prevention. Data are available annually.

*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.

NOTE: The percentage for 2009 is based on 4:3:1:0:3:1:4, which includes 4 doses of diphtheria, tetanus toxoids, and pertussis; 3 doses of polio vaccine; 1 dose of measles-mumps-rubella vaccine; 0 doses of Haemophilus influenzae type b (Hib) vaccine due to a vaccine shortage and the recommendation to defer vaccination; 3 doses of hepatitis B vaccine; 1 dose of varicella vaccine, unadjusted for history of varicella illness, and 4 doses of pneumococcal vaccine. Thus, 2009 is not comparable to 2004-2008 percentages.

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

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



Data Source: IDPH public sector immunization assessments. Data are available annually.

*4:3:1:3:3– 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.

NOTE: 4:3:1:3:3:1 – The 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 Iowa children served in public clinics are similar to the rates for all Iowa children.

What can Iowans do to help?

1. Keep track of and maintain immunization schedules for you and your children. For a handy immunization card, go to www.idph.state.ia.us/adper/immunization.asp.
2. Healthcare professionals can promote the need for and the benefits of immunization.
3. Healthcare professionals should routinely give immunizations according to the recommended childhood, adolescent, and adult schedules.
4. 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 funds: K15-1521; 0153-1522/AR06/AR08.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$1,837,896	\$751,296	\$629,711
Federal funds	\$2,550,055	\$3,063,731	\$3,796,037
Other funds	\$0	\$8,688	\$0
Total funds	\$4,387,951	\$3,823,715	\$4,425,748
FTEs	13.85	13.66	15.60

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.

Information Management

Promoting & Protecting the Health of Iowans

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 Iowa, 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 Iowans 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 Iowans 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 Iowans?

- 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 Iowans 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?

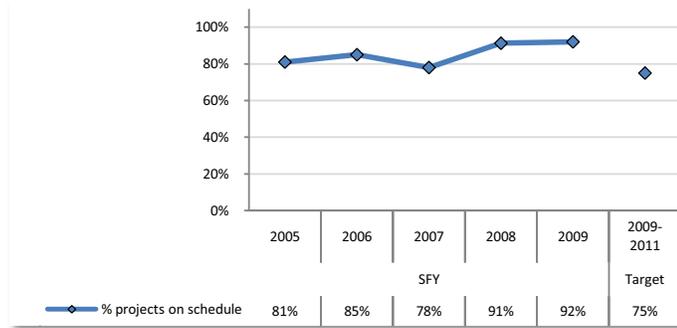
- Strengthen the public health infrastructure
- Prepare for, respond to, & recover from public health emergencies

What do we do?

- 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.

How do we measure our progress?

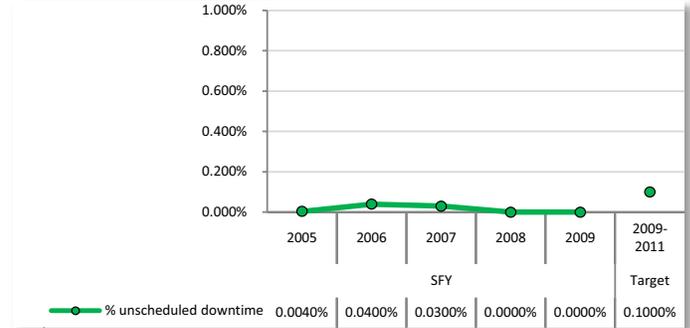
1 Percent of information management projects completed as scheduled.



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.

2 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 Iowans do to help?

1. All Iowans can provide feedback about the IDPH Internet site through individual IDPH programs or by using the "Contact Us" function.
2. All Iowans 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 e-mail 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

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$50,954	\$36,351	\$30,600
Federal funds	\$1,338,784	\$1,101,910	\$1,064,859
Other funds*	\$53,712	\$267,627	\$189,201
Total funds	\$1,443,450	\$1,405,888	\$1,284,660
FTEs	13.74	11.85	11.75

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.



Injury Prevention & Emergency Medical Services for Children

Promoting & Protecting the Health of Iowans

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 Iowa'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. In 2009 17,435 pediatric patients utilized the EMS system for either a medical or trauma emergency.



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

- About 671,000 Iowans 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 support injury prevention programs for occupant protection within the state



Which Iowa Public Health Goals are we working to achieve?

Prevent injuries

Promote healthy behaviors

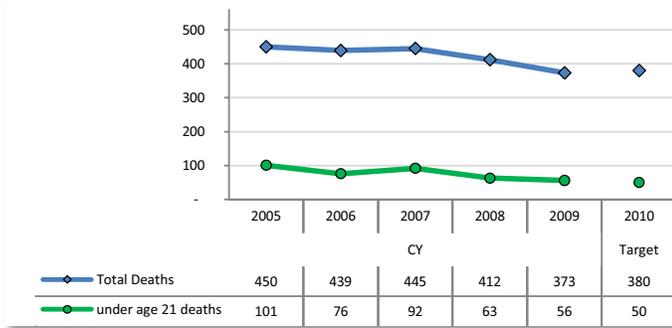
Prepare for, respond to, recover from public health emergencies

What do we do?

- Distribute injury prevention and child healthcare resource information, free of charge, to local public health departments.
- Distribute pediatric equipment bags and education to EMS services. More than 400 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.
- Promote the "Love Our Kids" injury prevention license plate that provides funds to grant out to communities for local injury prevention initiatives.

How do we measure our progress?

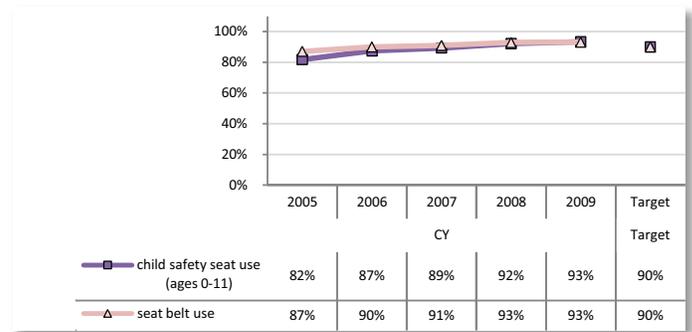
1 Number of deaths caused by motor vehicle crashes.



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.

2 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? Iowa currently boasts a 93% use rate of seat belts and a 93% rate for child safety seats during the 2009 survey. The Healthy Iowans 2010 goal is 90%.

What can Iowans do to help?

1. All Iowans 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 Iowans 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 funds: 0153-1714

Injury Prevention: intra state receipts* (Dept of Transportation – License Plate Sales & Governor's Traffic Safety Bureau grant): K19-1948; 0153-1722

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
Federal funds	\$101,058	\$82,991	\$106,347
Other funds*	\$209,374	\$192,761	\$346,000
Total funds	\$310,432	\$275,752	\$452,347
FTEs	2.27	2.12	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.

Iowa 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

Lead Poisoning Prevention

Promoting & Protecting the Health of Iowans

Division of Environmental Health

Phone: 1-800-972-2026

www.idph.state.ia.us/eh/lead_poisoning_prevention.asp



One of every 14 Iowa children under age 6 is lead-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 Iowans about prevention. The percentage of children tested for lead poisoning before age six has increased from 37% in 2000 to 95% in 2009. The IDPH Lead Poisoning Prevention program helps protect Iowa 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 Iowans?

- 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 Iowa 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 Iowa adults tested have blood lead levels considered harmful.

Which Iowa Public Health Goals are we working to achieve?

Protect against environmental hazards

Prevent injuries

What do we do?

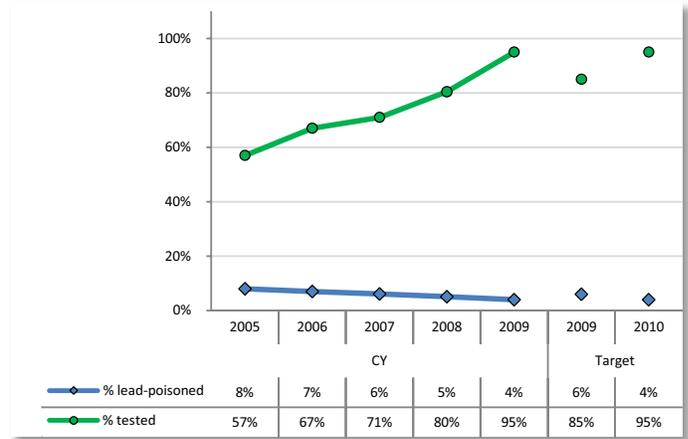
- In 70 counties, local boards of health provide childhood lead poisoning prevention services; IDPH provides funding and technical assistance. IDPH provides direct services in 29 counties.
- The services include assuring that children under age 6 are tested for lead poisoning, providing medical and environmental 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 Iowans ages 16 and older. Adults with blood lead levels considered harmful are notified.
- Training and certification is required for Iowans who identify or abate lead-based paint.
- Property owners and occupants must be notified that lead-based paint may be present before renovating, remodeling, or repainting a home or child-occupied facility built before 1978. Beginning April 2010, contractors that conduct renovation, remodeling, or repainting in these facilities must be trained and certified and must follow lead-safe work practices.

How do we measure our progress?

1. Percent of Iowa children under age six who get a blood lead test.
2. Percent of Iowa 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 Iowa 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.



What can Iowans do to help?

1. 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.
3. 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.
4. 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.
5. All Iowans should be aware of the risk for lead 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), Iowa Department of Human Rights (Weatherization), Iowa Department of Economic Development and Iowa Finance Authority (housing rehabilitation programs), 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 funds: 0153-0402. **Childhood lead:** general fund, tobacco fund, federal funds: K13-1351; K92-9212; 0153-1352. **Lead-based paint activities training & certification & pre-renovation notification:** federal funds & retained fees*: K19-1928; 0153-1912/1954.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$575,396	\$584,412	\$590,380
Tobacco funds	\$66,128	\$0	\$0
Federal funds	\$1,217,306	\$974,353	\$850,347
Other funds*	\$17,555	\$114,810	\$490,505
Total funds	\$1,876,385	\$1,673,575	\$1,931,232
FTEs	9.21	9.16	10.35

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.

Local Board of Health & Local Environmental Health Services

Promoting & Protecting the Health of Iowans

Division of Environmental Health
Phone: 515-281-0921
www.idph.state.ia.us/eh/env_health.asp



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 over 6,000 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 Iowans?

- Concerns about environmental conditions continue to increase, but the level of environmental health services is not consistent across the state.
- Environmental health affects every Iowan every day. The environmental health workforce is vital to making sure Iowans are safe where they live, work, and play.
- Environmental hazards may affect Iowans in a public health emergency or natural disaster. These include food safety, availability of clean drinking water, management of waste, and air quality.
- Iowa'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 Iowa Public Health Goals are we working to achieve?

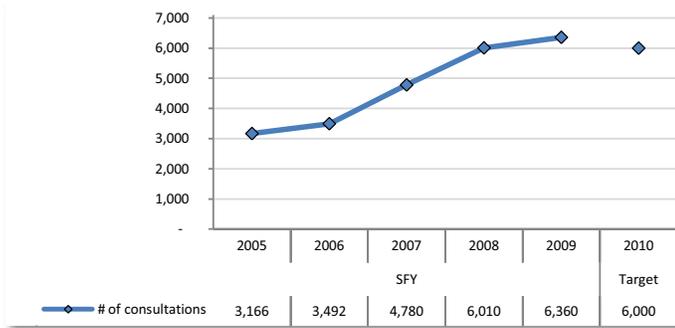
- Strengthen the public health infrastructure
- Protect against environmental hazards
- Prepare for, respond to, & recover from public health emergencies

What do we do?

- 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.

How do we measure our progress?

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

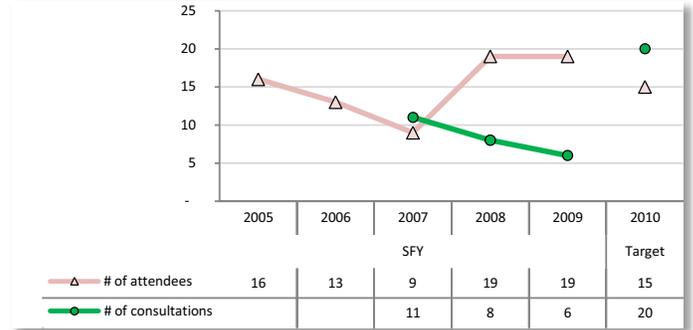


Data Source: Division of Environmental Health phone & email logs. Data are available annually.

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

2 Number of consultations provided to local boards of health or supervisors.

3 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 Iowans do to help?

1. All Iowans 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 funds, & intra state receipts* (Dept of Human Services): K09-0963; 0153-0974/0976/1360.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$65,059	\$55,294	\$57,577
Federal funds	\$125,669	\$123,366	\$30,664
Other funds*	\$27,420	\$8,771	\$0
Total funds	\$218,148	\$187,431	\$88,241
FTEs	1.65	1.61	0.90

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.

Local Public Health Services

Promoting & Protecting the Health of Iowans

Division of Health Promotion & Chronic Disease Prevention

Phone: 515-281-7016

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



Shirley was 59 years old when she began receiving homemaker services following a stroke that affected her left side. At age 62, she has not regained any motor skills in her left hand, suffers severe left-sided weakness and must use a wheelchair. John, Shirley's 63-year-old husband, requires oxygen 24 hours a day due to COPD (Chronic Obstructive Pulmonary Disease) and heart disease and cannot exert himself. A homemaker provides daily assistance to Shirley in getting out of bed, taking a bath, shampooing her hair, and dressing. John is able to prepare the couple a light breakfast of toast and cereal and juice. The homemaker prepares a healthy lunch and leaves it in the refrigerator for John to set out at lunch time. Once a week the homemaker cleans the bathroom, dusts, vacuums and does laundry.

John and Shirley have a son and daughter-in-law living on a farm 3 miles out of town. Jan, the daughter-in-law, drives 60 miles round trip daily to a job in another town. Jan travels to Shirley and John's home every evening to deliver a hot meal and to help Shirley prepare for bed. Jan also gets groceries during the weekend when she is not working. The couple's son farms and has livestock and cannot provide assistance on a regular basis. The couple does not qualify for Elderly Waiver services because of their ages. John once stated, "Our girl (homemaker) is an angel to us – we would have been in a nursing home 3 years ago without her."

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 Iowans?

- All Iowans deserve a local public health system that
 - ✓ supports local capacity to assess, plan, and carry out local health improvements, and
 - ✓ 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.

Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

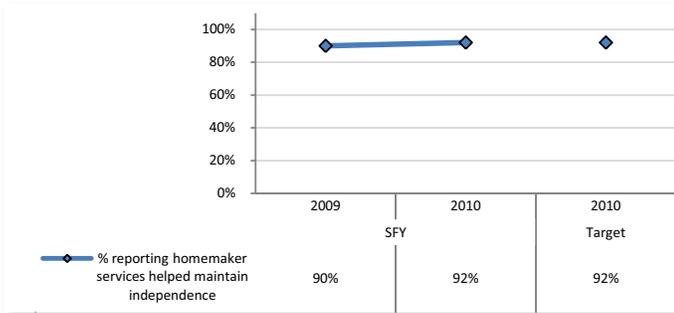
What do we do?

IDPH supports local public health services through:

- Grant funding for local programs that
 - ✓ Help Iowans 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 Iowans, 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.

How do we measure our progress?

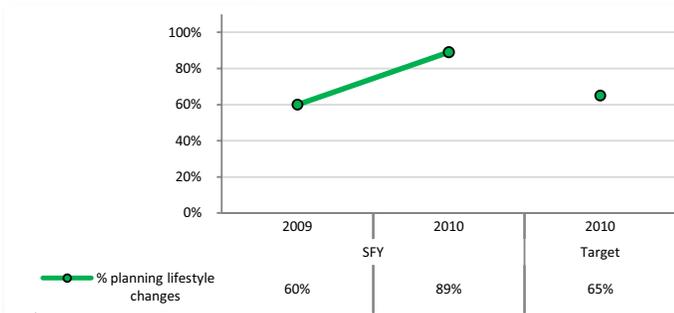
1 Percent of lowans who report that the homemaker services they received helped them stay in their home rather than going to a long-term care facility.



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

How are we doing? SFY2009 baseline was 90%. In SFY2010, we met our target of 92%.

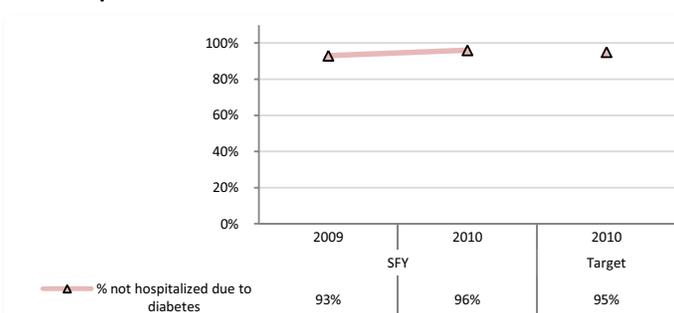
2 Percent of lowans receiving local public health services who verbalized plans to make lifestyle changes to reduce risks identified in screening and assessments.



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

How are we doing? SFY2009 baseline was 60%. In SFY2010, we exceeded our target of 65%.

3 Percent of lowans receiving health maintenance services 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 was 93%. In SFY2010, we exceeded our target of 95%.

What can lowans 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

Healthy Aging: general fund K11-1111

Local Public Health Liaison: general fund and federal 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

Public Health Nursing: general fund K11-1103

Home Care Aide: general fund K11-1105

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

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$9,793,955	\$9,923,197	\$9,736,058
Tobacco funds	\$1,145,820	\$0	\$0
Federal funds	\$382,917	\$275,760	\$356,015
Other funds*	\$294,194	\$1,667,961	\$375,000
Total funds	\$11,616,886	\$11,866,918	\$10,467,073
FTEs	8.72	8.03	8.65

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.

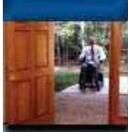
Maternal Health

Promoting & Protecting the Health of Iowans

Health Promotion and Chronic Disease Prevention

Phone: 1800-383-3826

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



Crystal was 15 years old, pregnant, homeless, and a junior in high school when she first met her maternal health nurse. Crystal's mother has a long history of mental illness. Crystal has been caretaker to her bi-polar mother and younger siblings. The maternal health nurse partnered with Crystal throughout her pregnancy, finding housing and educating Crystal about pregnancy, child rearing, and goal setting for the future. Crystal also suffered from depression; her nurse arranged counseling. Last year, Crystal delivered a healthy baby girl and graduated from high school. Crystal is now working and attending class at DMACC. She feels that the Maternal Health program has had a positive impact on her and her baby's life.

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 the Maternal Health program important to promoting and protecting the health of Iowans?

- 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 Iowa women get prenatal care; yet, low-income, teen, and minority women are more likely to get late prenatal care (after the 3rd 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 2007, there were 4,730 preterm births in Iowa representing almost 12% of live births. Iowa's rate is slightly better than the national rate of 13% of live births. Maternal Health programs provide education and counseling to decrease risk factors including tobacco cessation counseling, nutrition counseling to control glucose levels in women with diabetes, referrals for hypertension treatment, and improving access to prenatal care.
- 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 90% in 2010.

Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

Promote healthy behaviors

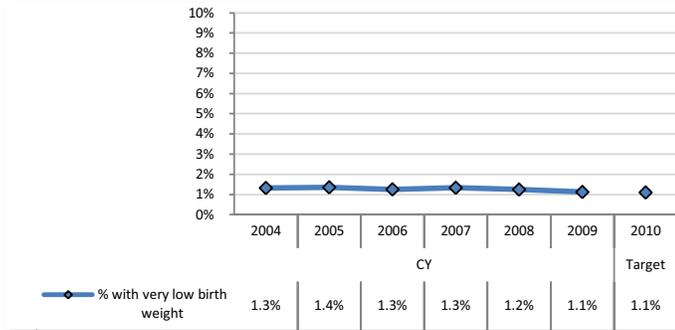
What do we do?

We provide funding for 21 maternal health agencies in Iowa that provide services to pregnant and postpartum women. For a map with contact information for the 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.
- ✓ 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.

How do we measure our progress?

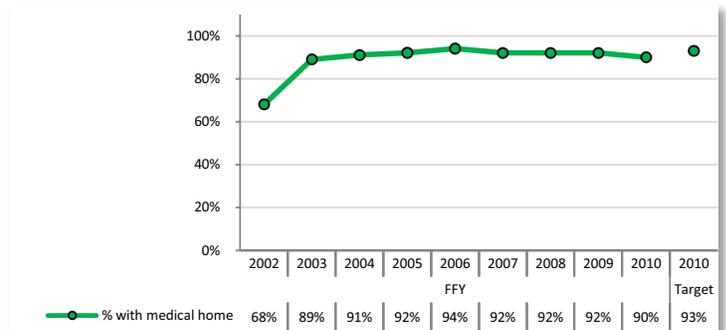
1 Percent of very low birth weight infants (less than 1500 grams) among all live births.



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 2009. Data for 2009 shows that 1.1% of Iowa births were very low birth weight births, which meets our target.

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



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

How are we doing? In 2002, the rate was 68% with a medical home. In 2010, our rate of women reporting a medical home was 90%, a slight decline from last year but a 22% increase since 2002.

What can Iowans 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 Iowans 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; Iowa chapter of the National Association of Neonatal Nurses.

Funding sources

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

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$315,972	\$352,025	\$315,830
Federal funds	\$1,377,536	\$1,311,346	\$1,504,166
Other funds*	\$818	\$0	\$0
Total funds	\$1,694,326	\$1,663,371	\$1,819,996
FTEs	3.55	2.89	2.85

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.

State Medical Examiner

Promoting & Protecting the Health of Iowans

Phone: 515-725-1400
www.idph.state.ia.us/do/medical_examiner.asp



For many Iowans, 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’s Office.

The State Medical Examiner’s Office (SME) performs 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 physicians employed by the State Medical Examiner’s Office are all board certified in anatomic, clinical, and forensic pathology.

The Iowa Office of the State Medical Examiner is accredited by the National Association of Medical Examiners (NAME).

Why is the State Medical Examiner’s Office important to promoting and protecting the health of Iowans?

- 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.
- Approximately 1200 deaths require autopsy, and of those, between 650 and 700 are performed by the Iowa Office of the State Medical Examiner.
- State Medical Examiner forensic pathologists provide expert witness testimony at depositions, grand juries, and state and federal criminal and civil trials.
- The State Medical Examiner’s Office has staff appointed to the state’s Domestic Violence and Child Death Review Teams, providing help and expert advice about forensic pathology questions and concerns.
- The State Child Death Review Team is under the direction of the State Medical Examiner’s Office.

Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

What do we do?

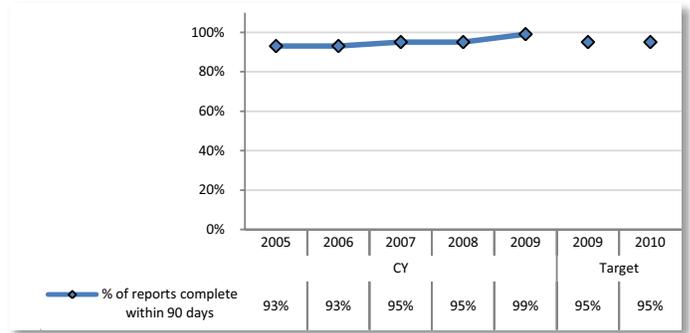
- Provide 24/7 consultation to all counties pertaining to death investigations.
- Perform over 650 autopsies and review close to 4,000 reports each year.
- Provide funding for up to 10 county medical examiners and medicolegal death investigators to attend training.
- Provide lectures, tours, and presentations to schools, professional groups, and other government agencies.
- Provide internships for investigators, radiology technologists, clinical laboratory scientists, and medical office specialists from many schools throughout Iowa.
- Maintain a database of medical examiner cases statewide.
- Forensic pathologists provide more than 40 lectures per year to medical students, residents, mortuary science students, and county medical examiners and their investigators.
- Provide basic death investigation training sessions across the state to county level investigators and medical examiners.
- Provide one month rotations for medical students.
- Coordinate and lead the state’s Disaster Response Team for mass fatality incidents (IMORT).

How do we measure our progress?

1 Percent of autopsy reports completed by the State Medical Examiner's Office within 90 days of death.

Data Source: SME Database. Data are available annually.

How are we doing? In 2009, we completed 99% of all autopsies within 90 calendar days, exceeding the National Association of Medical Examiner (NAME) standard of 90%. Of the autopsies we completed within 90 days, 92% were completed within 60 days, and 50% were completed within 30 days.



What can Iowans 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, the Center for Acute Disease Epidemiology investigates cases involving infectious disease, and the Center for Disaster Operations and Response assists with coordinating the state IMORT team and disaster response.

Other organizations: Iowa Association of County Medical Examiners, Iowa Division of Criminal Investigations.

Funding sources

General fund & retained fees: K19-1951

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$1,203,455	\$932,138	\$948,439
Retained fees	\$1,784,210	\$1,974,853	\$2,115,601
Total funds	\$2,987,665	\$2,906,991	\$3,064,040
FTEs	23.45	22.38	17.95

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.

Iowa Department of Public Health ♦ State Medical Examiner

Phone: 515-725-1400 ♦ Fax: 515-725-1414 ♦ www.idph.state.ia.us/do/medical_examiner.asp

2250 S Ankeny Blvd ♦ Ankeny, IA 50023

Iowa Board of Medicine

Phone: 515-281-5171
www.medicalboard.iowa.gov

Promoting & Protecting the Health of Iowans



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 Iowa Board of Medicine strives to ensure that only qualified, skilled physicians and acupuncturists practice in Iowa.

In addition to helping Iowans get quality medical care, the Iowa Board of Medicine helps doctors. The Board has improved the license renewal system for doctors. In FY2010, 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 10,500 physicians and 43 acupuncturists licensed to provide health services to Iowans.

Why is the Iowa Board of Medicine important to promoting and protecting the health of Iowans?

- Iowans deserve medical care and acupuncture from competent, qualified practitioners. By licensing providers, we help keep untrained and dishonest individuals from working in Iowa.
- 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.

Which Iowa Public Health Goals are we working to achieve?

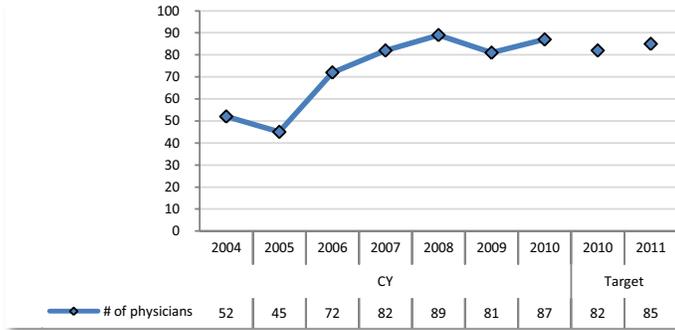
Strengthen the public health infrastructure

What do we do?

- 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.

How do we measure our progress?

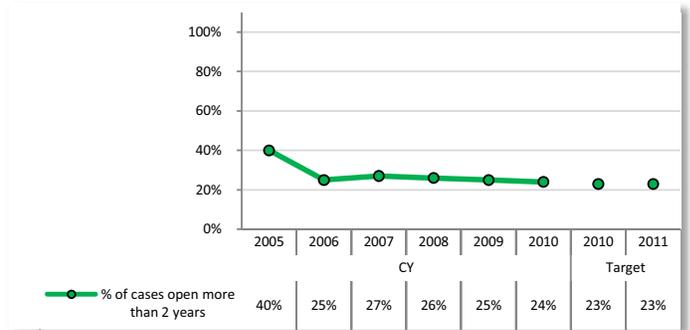
1 Number of physicians with signed contracts in the Iowa Physician Health Program.



Data Source: Manual counts. Data are available annually.

How are we doing? The number increased by 6 in 2010 and by 42 since 2005.

2 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 continues to decline, allowing the Board to be more responsive to public concerns about licensees' competence and conduct.

What can Iowans do to help?

1. All Iowans 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 Iowa 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

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
Retained fees	\$2,119,359	\$2,646,309	\$3,127,187
Total funds	\$2,119,359	\$2,646,309	\$3,127,187
FTEs	21.25	20.66	21.00

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.

Minority & Multicultural Health

Promoting & Protecting the Health of Iowans

Health Promotion and Chronic Disease Prevention

Phone: 515-281-4904

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



In 2009, under HF2526, the name of the office was changed to the Office of Minority and Multicultural Health (OMMH). In 2010, OMMH received a Department of Health & Human Services Office of Minority Health State Partnership Grant for 2010 – 2013. The purpose of this grant is to address increased staff needs and resources to better serve as the liaison agency within the IDPH, link with and develop partnerships in multicultural communities, increase the engagement of the OMMH Advisory Council in strategic planning and program activities, strengthen six regional multicultural coalitions, and produce a disease burden report. We continue to provide preceptorships and internships for the Des Moines University College of Osteopathic Medicine, Masters of Public Health Program and partner with other Iowa academic institutions in accordance our goal to provide internships for students of diverse ancestral heritage.

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.
- ✓ In 2010, OMMH received its first federal DHHS OMH State Partnership Grant.

Why is Minority & Multicultural Health important to promoting and protecting the health of Iowans?

- 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.
- From 1990 to 1999, approximately 2,600 legal immigrants and refugees became Iowa residents each year. Currently, Iowa'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 Iowa's minority and immigrant/refugee populations. To meet the needs of these growing populations, Iowa 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 Iowans.

Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

What do we do?

- Work with companies, communities, faith-based groups, and others across Iowa 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 Iowa's minority, immigrant, and refugee populations.

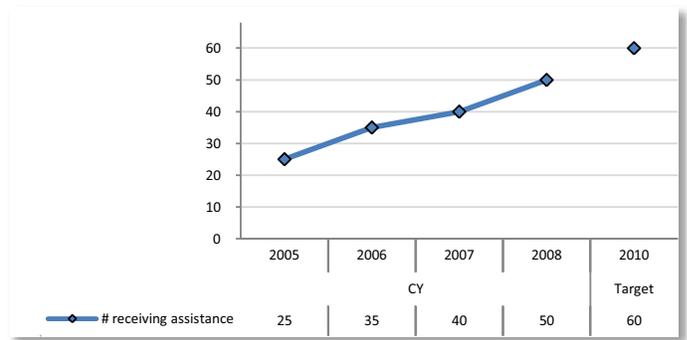
How do we measure our progress?

1 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 April 2010, we provided technical assistance and facilitated a workshop for 50 participants at the first “I’m Worth It”, Youth Empowerment Conference for African American females in Davenport, Iowa. We also made a presentation on health equity at the Iowans Fit for Life Partnership meeting with 65 participants, and partnered with the IDPH Comprehensive Cancer Control program & Northern Plains Comprehensive Cancer Control program for *Building Relationships with Native American Populations (Cultural Competency 101)* training with 70 participants.



Within the same year, we provided cultural awareness training and facilitation to the staff of the Region 5 Child Care Hawkeye Area Community Action Program in Waterloo and provided cultural awareness, cultural sensitivity workshops to the New Opportunities, INC Health Services in Carroll, Iowa. A total of 70 participants for both events. We co-presented with our DMU graduate intern, at the 6th annual Iowa Medicare Rural Hospital Flexibility Conference on multicultural patients in rural Iowa to an audience of 50 participants. We provided expertise and a workshop to the Drake University global education staff on identifying determinants of health disparity and barriers to positive outcomes. And, in 2010, we were a co-presenter with women from the Davenport area of state on the topic communication strategies with our youth at the Laying Claim to Our Spirit, Iowa African American Women’s Leadership Conference in Cedar Rapids, Iowa.

What can Iowans do to help?

1. All Iowans can become more aware of the health care and access needs of Iowa’s minority, immigrant, and refugee residents.
2. All Iowans 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, National Association of State Offices of Minority Health.

Funding sources

Federal funds: 0153-0404/0952

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
Federal funds	\$80,285	\$88,840	\$106,854
Other funds	\$13,835	\$17,337	\$26,372
Total funds	\$94,120	\$106,177	\$133,226
FTEs	1.27	0.60	0.35

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.

Iowa Board of Nursing

Phone: 515-281-3255
nursing.iowa.gov

Promoting & Protecting the Health of Iowans



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 Iowan deserves to be treated by nurses who are competent and licensed to work within their authorized scope of practice. The Iowa Board of Nursing ensures all nurses practicing in Iowa are qualified and competent. If an individual has a concern, the Board investigates complaints to protect the health of Iowans. One-hundred 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 57,000 nurses providing health services in Iowa.

Why is the Iowa Board of Nursing important to promoting and protecting the health of Iowans?

- Iowans deserve care from qualified professionals.
- Iowans 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

What do we do?

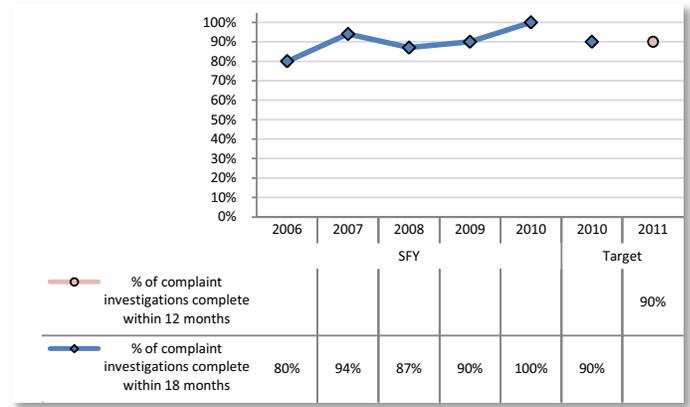
- License nurses who meet requirements.
- Approve nursing education programs.
- Approve continuing education providers.
- Promulgate rules and regulations to carry out the mandate of the laws.
- Investigate complaints and monitor disciplined licensees.
- Prosecute nurses whose practice is out of compliance with Iowa Code and Iowa Administrative Code.
- Enforce nursing continuing education requirements.
- Maintain licensee records.

How do we measure our progress?

1 Percent of complaint investigations that are completed within 18 months of receiving the complaint.

Data Source: Enforcement Case Assignment Spreadsheet. Data is available annually or by Fiscal Year.

How are we doing? During SFY2010, 100% of complaint investigations were completed within 18 months of receiving a complaint. The target was met due to the Nursing Board being fully staffed with no vacancies. The new target for SFY2011 will be to complete 90% of complaint investigations within 12 months of receiving a complaint.



What can Iowans 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

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State appropriations	\$0	\$0	\$0
Retained fees	\$1,822,918	\$2,293,481	\$3,180,000
Total funds	\$1,822,918	\$2,293,481	\$3,180,000
FTEs	19.20	19.48	21.60

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.

Nutrition & Physical Activity

Promoting & Protecting the Health of Iowans

Division of Health Promotion & Chronic Disease Prevention

Phone: 515-281-6650

www.idph.state.ia.us/iowansfitforlife

www.idph.state.ia.us/nutritionnetwork



A second grade student greeted a nutrition educator at a local drug store with a huge smile. He held an apple and a bottle of 100% juice and explained that his mother had given him the freedom to choose any snack he wanted. The majority of the food choices were pre-packaged chips, cookies, and candies. He bypassed all of the other options and chose something healthy. The student felt empowered to make healthy food choices.

The IDPH Nutrition and Physical Activity programs help make Iowans healthier – and make it fun!

Did you know? Over 67% 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 Iowans?

- Obesity-related health problems cost Iowans \$783 million each year. Medicaid and Medicare cover about 46% of these costs.
- The rate of overweight and obese Iowans has dramatically increased among adults, teens, and children.
- Less than 20% of Iowans eat fruits and vegetables five or more times per day.
- Less than 50% of Iowans meet the recommended level of physical activity each day.
- Iowans in poverty are less likely to eat nutritious foods than those with higher incomes. Iowans with incomes less than \$15,000 per year are more likely to be obese.
- Environments that support physical activity and proper nutrition provide a better quality of life for Iowans.
- Iowans who are physically active and eat nutritious foods are at a decreased risk for overweight and obesity, as well as cardiovascular disease, diabetes, cancer and osteoarthritis.

Which Iowa Public Health Goals are we working to achieve?

Promote healthy behaviors

What do we do?

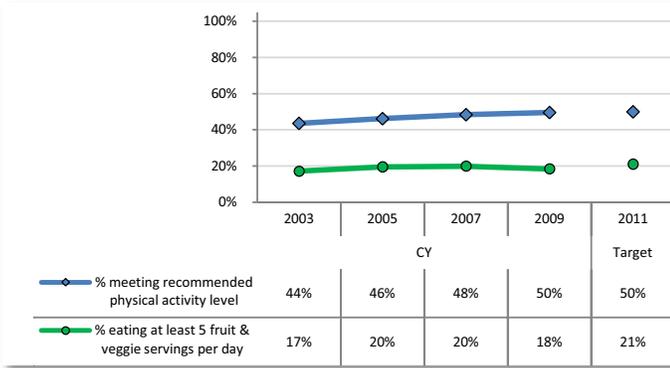
The vision of the Health Promotion Unit at IDPH is “Healthy Iowans living in healthy communities.” Programs within the Health Promotion Unit include 1) Iowans Fit for Life, 2) Iowa Nutrition Network, 3) Governor’s Council on Physical Fitness & Nutrition, and the 4) Iowa Healthy Communities Initiative grant program. These nutrition and physical activity initiatives:

- Make it easier for Iowans to eat well and be physically active. The healthy choice should be the easy choice.
- Bring state and local partners together to build networks dedicated to healthy eating and physical activity.
- Provide funding and support to improve the food and activity environments where Iowans live, work, and play.
- Provide resources for communities and organizations to support improvements in nutrition and physical activity environments.

How do we measure our progress?

Percent of Iowa adults...

- 1 eating 5 or more servings of fruits and vegetables per day.
- 2 meeting the recommended level of physical activity.

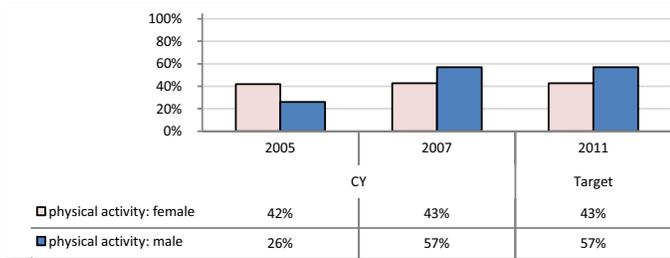


Data Source: Behavioral Risk Factor Surveillance System (BRFSS). Data are available every two years.

How are we doing? Iowa's fruit and vegetable consumption is below the national median of 24% and did not meet our 2009 goal. We've revised our 2011 target to reflect slower progress. Only 50% of Iowans are getting the recommended physical activity. However, this is an increase from 2003 and meets our 2011 target.

Percent of students...

- 3 who ate 5 or more servings of fruits and vegetables per day during the past 7 days.
- 4 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 reported eating five or more servings of fruit and vegetables per day during the past seven days. Almost 50% of students reported being physically active for a total of 60 minutes or more per day on five or more of the past seven days. This is a dramatic positive 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 to www.idph.state.ia.us/nutritionnetwork/community_basics.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 resources that encourage healthy eating and physical activity. Go to www.idph.state.ia.us/pickabetternack.

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

Health Promotion: general fund, health care trust fund, federal funds, & private grants*: K05-0609; K07-0751; K09-0953/0955; K29-2901; K30-3001; K56-5665; 0153-0542/0752/0924/0926/0934/0936/0938/0940/0944/AR12.

Iowa Nutrition Network: intra state receipts* (Dept of Human Services) 0153-1108/1112.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$914,906	\$880,953	\$929,042
Health care trust	\$182,344	\$129,279	\$0
Federal funds	\$949,442	\$1,591,882	\$1,764,678
Other funds*	\$1,131,942	\$1,135,930	\$1,896,409
Total funds	\$3,178,634	\$3,738,044	\$4,590,129
FTEs	12.71	13.70	14.95

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.

Occupational Health & Safety Surveillance

Promoting & Protecting the Health of Iowans

Division of Environmental Health

Phone: 1-800-972-2026

www.idph.state.ia.us/eh/lead_poisoning_prevention.asp#occupational



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 Iowans are injured or become ill each year from conditions on their jobs. In 2009, at least 78 workers died from traumatic injuries that occurred while they were at work in Iowa.

The Occupational Health and Safety Surveillance program tracks, analyzes, and reports work-related illness and injuries, work-related deaths, and cases of lead and pesticide poisoning. IDPH can give information to workers, employers, and other public health programs to promote and protect the health of Iowans in the future.

Did you know? In 2009, 46% of the 78 Iowa work-related deaths involved workers who were 55 years of age or older, compared to 31% for those 55 years of age or older across the entire U.S.

Why is Occupational Health & Safety Surveillance important to promoting and protecting the health of Iowans?

- In 2009, the rate of reported work-related injury and illness in Iowa was 4.7 per 100 FTE (U.S. rate 3.6). 15,800 reported cases involved days away from work.
- Iowa had 694 adults (16 years of age or older) with at least one elevated blood lead level test (10 micrograms per deciliter ($\mu\text{g}/\text{dL}$) or higher) in 2009. 185 adults had a blood lead level of 25 $\mu\text{g}/\text{dL}$ or higher. Most adult lead exposures in Iowa were related to work or hobby activities, including automotive radiator work, foundry work, battery manufacturing, stained glass installation and repair, indoor firing range exposures, and construction activities including renovation, rehab, and painting.
- From 2006 to 2008, over 39,000 Iowa adults reported that their current job caused their asthma or made it worse, but only 12% had talked about it with their medical provider.

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

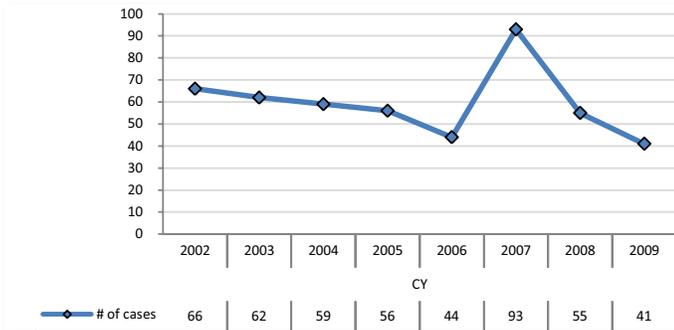
Strengthen the public health infrastructure

What do we do?

- Carry out surveillance for 19 indicators of occupational safety and health and report the findings.
- Provide public health consultations for unusual cases of occupational injury and disease or when requested.
- Enable the work of the Iowa Fatality Assessment and Control Evaluation (IA-FACE) program, which investigates work-related deaths and develops fact sheets and recommendations that can help prevent similar fatalities. Track blood lead tests on adults 16 years or older and investigate levels that are 25 $\mu\text{g}/\text{dL}$ or higher for possible occupation, industry, or work-relatedness.
- Track reports of human pesticide exposures and create an annual report of pesticide poisoning cases
- Participate in public health program development to promote the inclusion of occupational health and safety issues.
- Work with other public health programs to provide data, recommendations, or resources relating to occupational health and safety issues.
- Provide information to the Iowa Department of Agriculture and Land Stewardship (IDALS) pesticide registration program so safety labels can be strengthened and more protection can be provided for people who live and work in areas where pesticides are used.

How do we measure our progress?

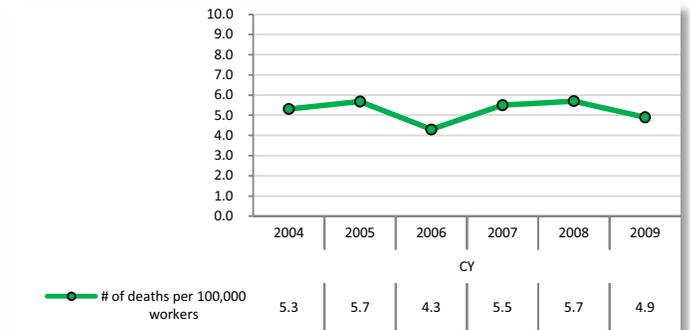
- ❶ Annual number of pesticide associated illness and injury cases reported to poison control centers, for persons age 16 years or older - Iowa.



Data Source: NIOSH and the American Association of Poison Control Centers. Data are available annually.

How are we doing? Numbers of pesticide cases and the corresponding rates per employed persons continue to vary from year to year, somewhat due to reporting patterns. IDPH OHSSP Pesticide Surveillance is developing additional surveillance methods. Annual reports with in-depth information are available on the website.

- ❷ Number of occupational fatalities per 100,000 employed Iowans 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 numbers increased again in 2008 to 5.7 per 100,000 workers (93 deaths). 2009 numbers dropped to 78 worker fatalities, with a rate of 4.9 per 100,000 workers, below the target rate of 5.0. Roadway transportation incidents accounted for 60% (47 of 78) of the work-related deaths in 2009.

What can Iowans do to help?

1. All Iowans should be aware of the dangers of pesticides. Report all human pesticide exposures by calling the Iowa Statewide Poison Control Center at 1-800-972-2026. For more information, go to www.idph.state.ia.us/eh/lead_poisoning_prevention.asp#pesticide.
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. Iowa 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: American Lung Association-IA, Iowa Department of Agriculture and Land Stewardship (IDALS), Iowa Workforce Development, Iowa State University, University of Iowa, U.S. National Institute for Occupational Safety and Health (NIOSH), and Bureau of Labor Statistics.

Funding sources

Federal funds: 0153-1708.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
Federal funds	\$289,361	\$338,016	\$291,873
Total funds	\$289,361	\$338,016	\$291,873
FTEs	1.06	1.78	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.

Oral Health

Promoting & Protecting the Health of Iowans

Division of Health Promotion & Chronic Disease Prevention
Phone: 515-281-3733
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 Iowa. The IDPH Oral Health Bureau programs work to improve the oral health of all Iowans, 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 Iowans 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 Iowans?

- Oral health directly affects the health and wellness of all Iowans.
- Cavities can be prevented.
- 22% of Iowa third-graders have untreated cavities; one out of every five low-income children has untreated cavities.
- 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 Iowa families. For children on Medicaid, 47% 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.
- Iowa's dental workforce is aging and decreasing in number, particularly in rural parts of the state.

Which Iowa Public Health Goals are we working to achieve?

Promote healthy behaviors

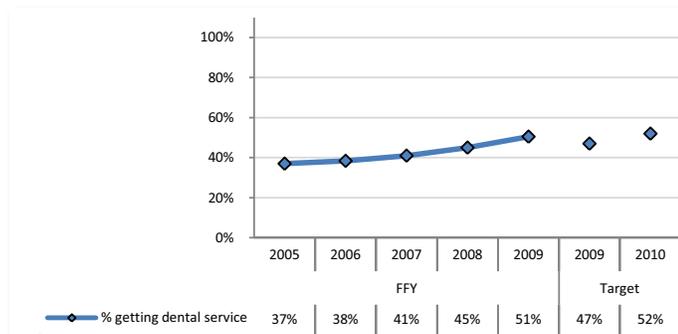
Strengthen the public health infrastructure

What do we do?

- Coordinate the I-Smile™ 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 families.
- Work with local public health partners to help families make appointments and find payment sources for dental care.
- Provide funding to public health agencies to provide screenings and dental sealants to low-income, uninsured, and underinsured children in grades 2-8.
- Coordinate oral health surveillance to monitor and track Iowans' oral health status and ability to access and pay for care.
- 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.

How do we measure our progress?

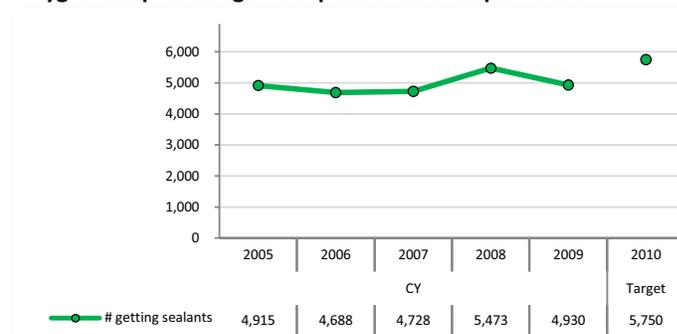
1 Percent of Medicaid-enrolled children ages 1-5 who get a dental service.



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.

2 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. State and local budgetary restraints in the past year may play a role in the decrease in children receiving sealants this year. Programs have begun applying stricter school selection, limiting services to schools with the highest at-risk populations.

What can Iowans 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, 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.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$389,806	\$360,693	\$339,149
Health care trust	\$48,508	\$0	\$0
Federal funds	\$686,057	\$530,977	\$631,501
Other funds*	\$2,018,052	\$1,940,266	\$1,926,763
Total funds	\$3,142,423	\$2,831,937	\$2,897,413
FTEs	8.28	7.94	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.

Iowa Department of Public Health ♦ Division of Health Promotion & Chronic Disease Prevention ♦ Oral Health

Phone: 515-281-3733 ♦ Fax: 515-242-6384 ♦ www.idph.state.ia.us/hpcdp/oral_health.asp

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

Iowa Board of Pharmacy

Phone: 515-281-5944
www.state.ia.us/ibpe

Promoting & Protecting the Health of Iowans



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 Iowans. The Iowa Board of Pharmacy assures the public that only qualified, competent pharmacists practice in Iowa.

The Iowa Board of Pharmacy strives to issue licenses and registrations quickly and efficiently. In addition, the Board receives and investigates complaints from Iowans, 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 3,300 licensed pharmacists in Iowa.

Why is the Iowa Board of Pharmacy important to promoting and protecting the health of Iowans?

- The Iowa Board of Pharmacy licenses pharmacists to ensure Iowans receive competent, qualified care.
- The Iowa Board of Pharmacy helps pharmacists who are battling addiction. Research shows that monitoring programs for impaired pharmacists are highly effective in reducing relapse.
- Licensure is an effective way to keep untrained and unethical individuals from practicing pharmacy in Iowa.

Which Iowa Public Health Goals are we working to achieve?

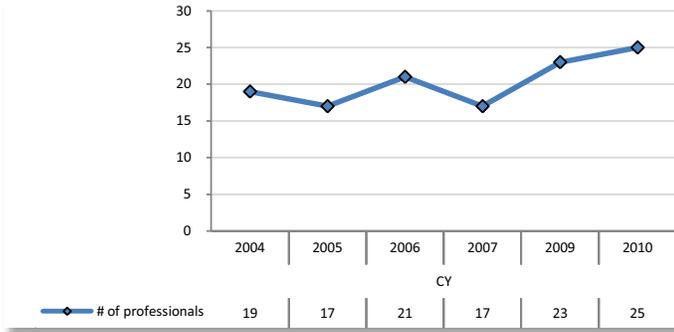
Strengthen the public health infrastructure

What do we do?

- 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.

How do we measure our progress?

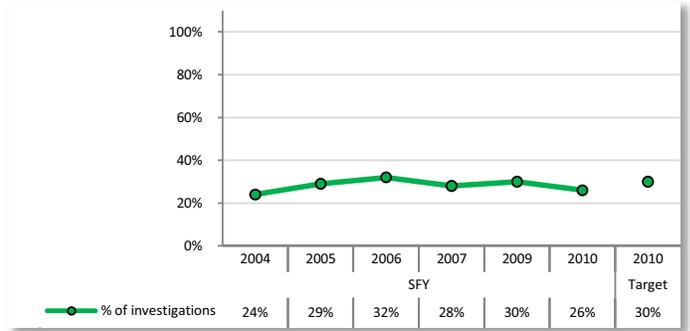
1 Number of professionals participating in the Iowa Pharmacy Recovery Network (IPRN).



Data Source: Manual counts. Data are available annually.

How are we doing? Participation in the IPRN is increasing.

2 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 Iowans do to help?

1. All Iowans can contact the Iowa 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

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
Retained fees	\$1,568,651	\$1,609,174	\$4,031,310
Total funds	\$1,568,651	\$1,609,174	\$4,031,310
FTEs	13.98	12.57	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.

Iowa Statewide Poison Control Center

Promoting & Protecting the Health of Iowans

Division of Environmental Health
Phone: 1-800-222-1222
www.iowapoisson.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 Iowa Statewide Poison Control Center (ISPCC) works to reduce illness, deaths, and costs associated with poisoning through providing statewide around-the-clock emergency telephone advice. Iowans 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 cost-saving 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 handled safely entirely by phone!

Did you know? In FY10, over 23,000 calls to the Iowa Statewide Poison Control Center were managed safely at home. That equals a healthcare savings of over \$8 million!

Why is the Poison Control Center important to promoting and protecting the health of Iowans?

- Thousands of Iowans are exposed to poisons each year. In FY2010, the Poison Control Center received 61,673 calls. Nearly 32,000 of those calls were human cases.
- People of all ages are at risk of exposure to poisons. 52% of Iowans exposed to poisons are children.
- Poisonings rank as the 19th leading cause of death in Iowa.
- A single phone contact is needed so Iowans can get fast and correct information about treatment of possible poisoning.
- 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 \$10 in medical spending.
- Poison centers eliminate unnecessary trips to the emergency department or doctor.

Which Iowa Public Health Goals are we working to achieve?

Prevent injuries

Protect against environmental hazards

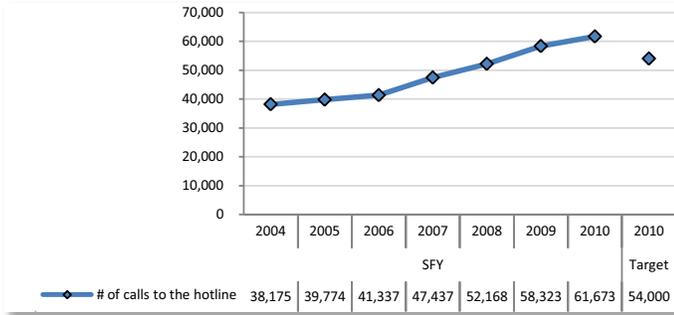
Prepare for, respond to, & recover from public health emergencies

What do we do?

- 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 round-the-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 (www.iowapoisson.org), and poison prevention brochures.
- Offer professional education to nurses, pharmacists, EMS personnel, and other healthcare providers.

How do we measure our progress?

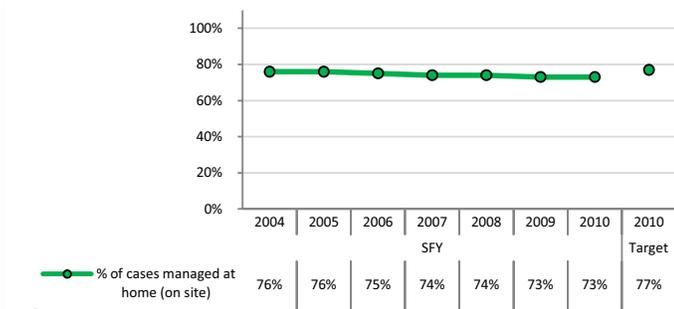
1 Number of calls to the emergency hotline.



Data Source: Evaluation of call logs. Data are available annually.

How are we doing? Call volume has increased 64% since SFY2002, with very little increase in staffing.

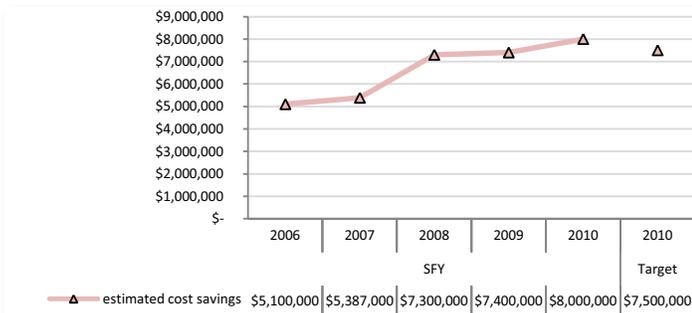
2 Percent of poisoning cases safely managed at home (on site).



Data Source: Evaluation of call logs. Data are available annually.

How are we doing? Three out of four poisoning cases can be managed safely 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.

3 Estimated cost savings to Iowa by safely managing poisoning cases at home.



Data Source: Evaluation of call logs. Data are available annually.

How are we doing? In FY10, over 23,000 children and adults were managed safely at home resulting in a net savings to Iowa's health care system of \$8 million. This is an 86% increase in savings compared to FY05.

What can Iowans do to help?

1. All Iowans need to be aware of and use, if needed, the emergency hotline for the Iowa Statewide Poison Control Center. Call 1-800-222-1222.
2. Healthcare professionals need to use the Iowa Statewide Poison Control Center. Go to www.iowapoisson.org to learn more.
3. All Iowans 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.iowapoisson.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, underground storage tank fund (USTF), & intra state receipts*: K19-1911; K67-6707; K92-9210.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$0	\$525,520	\$485,520
Tobacco funds	\$600,000	\$0	\$0
USTF	\$0	\$0	\$100,000
Other funds*	\$0	\$50,000	\$0
Total funds	\$600,000	\$575,520	\$585,520
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.

Prescription Services

Promoting & Protecting the Health of Iowans

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 Iowans with an STD or with TB infection or disease.

By treating 2000 Iowans 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 Iowan. For Iowans 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 Iowans?

- TB disease remains a public health problem in Iowa with an average of 44 new cases reported every year. Many Iowans 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 Iowans are currently infected with TB.
- 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 2009, 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.

Which Iowa Public Health Goals are we working to achieve?

- Prevent epidemics & the spread of disease
- Strengthen the public health infrastructure

What do we do?

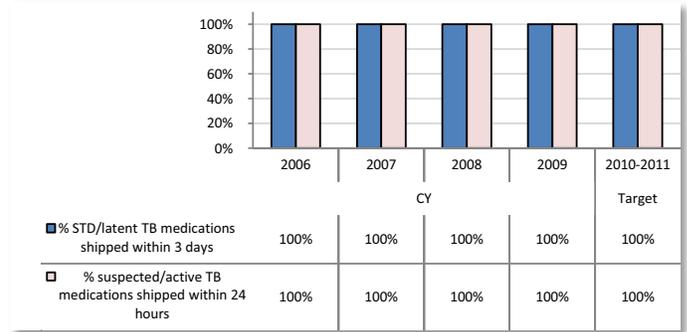
- Provide treatment for 2,000 Iowans with LTBI or TB disease each year.
- Provide treatment for more than 15,000 Iowans infected or exposed to chlamydial infection, gonorrhea, and syphilis each year.
- Ensure medications for active and suspected cases of TB are shipped within 24 hours of the prescription 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.

How do we measure our progress?

- ❶ Percent of STD and latent TB infection medications shipped within three working days of the prescription request.
- ❷ 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 Iowans do to help?

1. Iowans 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 Iowans 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 Iowans 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, Iowa Department of Corrections, Iowa Department of Human Services, juvenile detention centers, family planning clinics, Planned Parenthood clinics.

Funding sources

General fund and intra state receipts*: K15-1541

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$142,997	\$118,167	\$112,488
Other funds*	\$0	\$23,600	\$0
Total funds	\$142,997	\$141,767	\$112,488
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.

Professional Licensure

Promoting & Protecting the Health of Iowans

Division of Administration & Professional Licensure
Phone: 515-281-0254
www.idph.state.ia.us/licensure



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 Web-based 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 Iowa 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 Iowans?

- Thousands of Iowans rely on the 44,000 professionals and 6,000 businesses regulated by Professional Licensure.
- All Iowans benefit when health care is provided by competent, ethical professionals who hold active licenses.
- 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.

Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

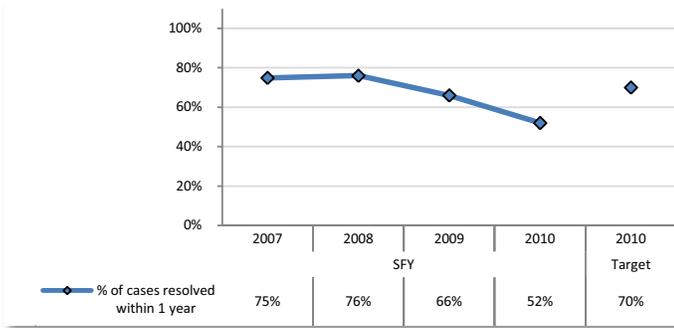
What do we do?

- 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	Massage Therapy	Podiatry
Barbering	Mortuary Science	Psychology
Behavioral Science	Nursing Home Administrators	Respiratory Care Practitioners
Chiropractic	Optometry	Sign Language Interpreters & Translators
Cosmetology Arts & Sciences	Physician Assistants	Speech Pathology & Audiology
Dietetics	Physical & Occupational Therapy	Social Work
Hearing Aid Dispensing		

How do we measure our progress?

1 Percent of cases resolved within one year of receiving a complaint.

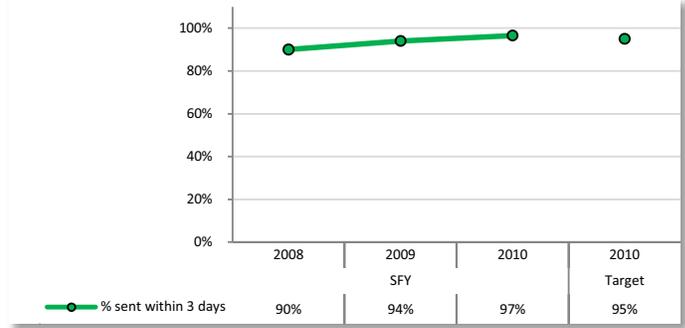


Data Source: Bureau database. Data are available monthly.

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 SFY10, the 19 boards received 347 complaints. Of these cases, 179 (52%) were resolved within one year. From July 2009 to June 2010, 226 cases were submitted for investigation and 215 investigations were completed.

2 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 2009 and June 2010, the Bureau mailed 22,911 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 22,127 licenses and wallet cards. Printing is done within 1 working day and mailing is done within 3 working days.

What can Iowans 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 practices.
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

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
Retained fees	\$1,943,150	\$2,038,157	\$2,903,813
Total funds	\$1,943,150	\$2,038,157	\$2,903,813
FTEs	15.96	16.54	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.

Radiological Health

Promoting & Protecting the Health of Iowans

Division of Environmental Health
Phone: 515-281-3478
www.idph.state.ia.us/eh/radiological_health.asp



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 Iowans 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 Iowans 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 Iowans – 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 2nd 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 Iowans?

- Exposure to radiation in large amounts can cause immediate and long-term health effects, including cancer and death.
- Iowans 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.
- Iowa 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.
- Iowans of all ages are at risk for over-exposure from tanning beds.

Which Iowa Public Health Goals are we working to achieve?

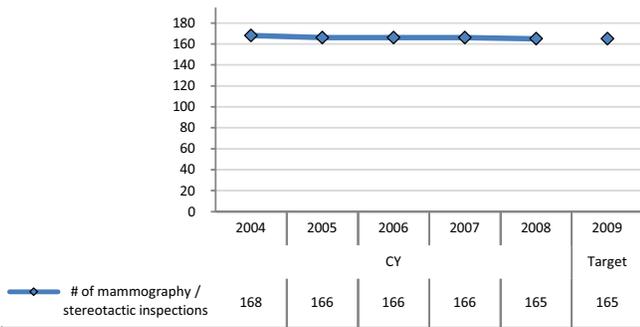
- Protect against environmental hazards
- Strengthen the public health infrastructure
- Prepare for, respond to, & recover from public health emergencies
- Promote healthy behaviors

What do we do?

- 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 Iowans 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.

How do we measure our progress?

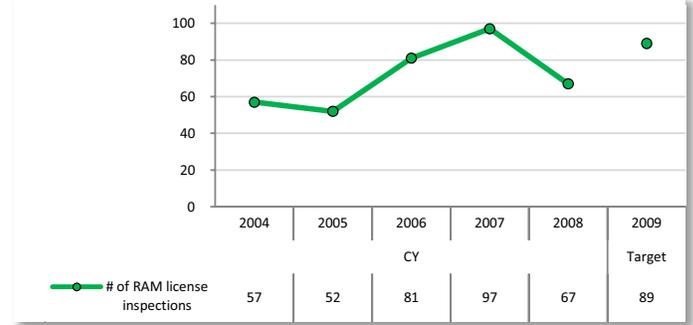
1 Number of inspections of mammography and stereotactic facilities.



Data Source: Mammography database. Data are available annually.

How are we doing? Consistent with percent of inspections based on rotation rules.

2 Number of radioactive material (RAM) licenses inspected.



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 Iowans do to help?

1. All Iowans can make themselves aware of the possibility of exposure to radiation, especially from medical procedures.
2. All Iowans 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 Iowans 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 funds, intra state receipts* (Dept of Public Defense), private grants*, & retained fees*: K19-1915/1920; 0153-1922/1926.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
Federal funds	\$226,073	\$214,887	\$261,528
Other funds*	\$1,124,296	\$1,108,024	\$2,864,016
Total funds	\$1,350,369	\$1,322,911	\$3,125,544
FTEs	12.35	12.18	12.90

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.

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

Sexually Transmitted Disease Prevention

Promoting & Protecting the Health of Iowans

Division of Behavioral Health

Phone: 515-281-3031

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



These diseases very often have no symptoms. However, 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 2009. 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 Iowa 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 75% of reported chlamydial infections and about 65% of reported gonorrhea infections are found in young Iowans ages 15 to 24.

Why is STD Prevention important to promoting and protecting the health of Iowans?

- STD cases have increased steadily over the last ten years. The increases may have many causes, but much of it is due to cases that are not diagnosed until one partner has already infected others. Early testing and treatment is important.
- In more than half of STD infections like *Chlamydia*, gonorrhea, and certain stages of syphilis, there are no symptoms, 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

What do we do?

- 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 at no expense to Iowans 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.

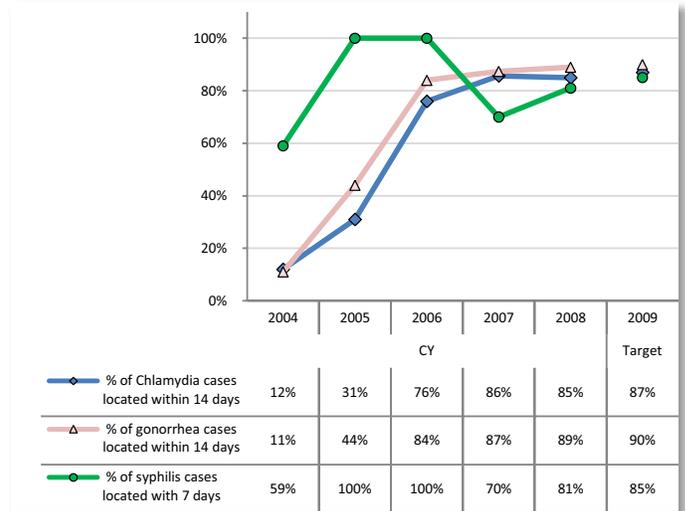
▶ How do we measure our progress?

- ❶ Percent of all reported infectious cases of syphilis located by state and local disease prevention specialists (DPS) within seven working days.
- ❷ Percent of all reported cases of gonorrhea located by state and local DPS within 14 working days.
- ❸ 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., co-infected with another STD, re-infected, not treated by the provider, and/or specifically requested 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 Prevention Program to assign only certain priority cases to public health investigators for follow-up.



▶ What can Iowans do to help?

1. Promote abstinence-based, medically accurate, comprehensive sexual education for youth. Sharing correct and complete information with those most at risk for infection has been shown to 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: HIV Prevention, Adult Hepatitis C, 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 funds; State funds are used for a 75% match for the Title V Block Grant: K15-1563; 0153-1564/1566

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$68,141	\$68,197	\$64,787
Federal funds	\$772,280	\$705,548	\$765,225
Total funds	\$840,421	\$773,745	\$830,012
FTEs	3.42	3.50	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.

State Systems Development Initiative

Promoting & Protecting the Health of Iowans

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 Iowa 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 Iowans?

- Iowa’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

What do we do?

- 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 Iowa’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 inter-bureau culture is nurtured through regular interaction with long-term SSDI work groups.
- Strengthen Iowa’s maternal and child health infrastructure through increased capacity of the data workforce to meet data system development, maintenance, and integration needs.

How do we measure our progress?

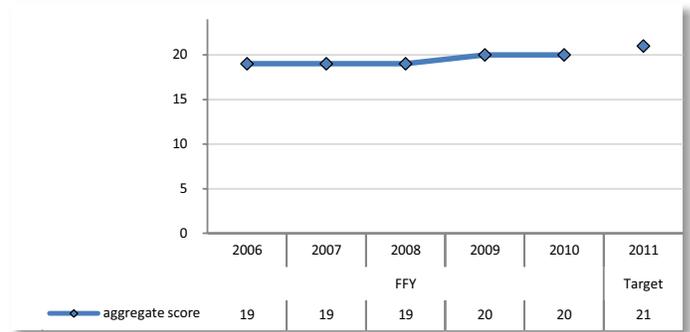
1 Title V Health Systems Capacity Indicator #9(A): the ability of States to assure that the MCH program and Title V agency have access to policy and program relevant information and data.

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 Iowa'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.

Seven component areas:

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 Iowans 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-making.
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 funds: 0153-0684

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
Federal funds	\$119,887	\$40,124	\$79,405
Total funds	\$119,887	\$40,124	\$79,405
FTEs	0.66	0.47	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 Licensure

Promoting & Protecting the Health of Iowans

Division of Behavioral Health
Phone: 515-242-6161
www.idph.state.ia.us/bh/admin_regulation.asp



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 Iowans receive quality treatment.

Did you know? Iowa currently has 114 licensed substance abuse assessment and treatment programs, with services available to residents of every county. Nine of those programs are funded to provide problem gambling treatment services statewide.

Why is regulating Substance Abuse & Gambling Treatment Programs important to promoting and protecting the health of Iowans?

- Addiction to substances and problem gambling affect the health, family relationships, and employment of too many Iowans. Addiction sometimes leads to problems with the law.
- Substance abuse and problem gambling impact all Iowans. Each year, more than 60,000 Iowans contact an addiction 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 Iowans. Marijuana is the second most common drug of abuse.
- Iowa 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

What do we do?

- 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 Substance Abuse Problem Gambling Program Committee 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.

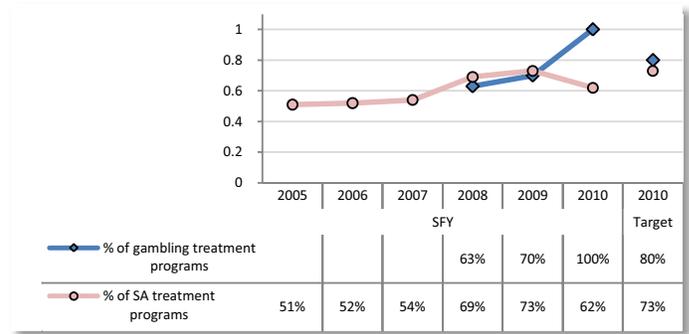
How do we measure our progress?

1. Percent of substance abuse treatment programs with 3-year 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. Three-year 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 Iowans do to help?

1. Iowans 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 gambling 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 funds & gambling fund: 0153-1968; K96-9604

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
Gambling funds	\$93,447	\$0	\$0
Federal funds	\$362,227	\$350,619	\$359,000
Total funds	\$455,674	\$350,619	\$359,000
FTEs	4.82	3.80	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

Promoting & Protecting the Health of Iowans

Division of Behavioral Health

Phone: 515-242-5934

www.idph.state.ia.us/bh/substance_abuse.asp



“Josh” seemed like a typical Iowa 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 Iowans money. Research from Iowa 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 Iowans?

- 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.
- 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.

Which Iowa Public Health Goals are we working to achieve?

Promote healthy behaviors

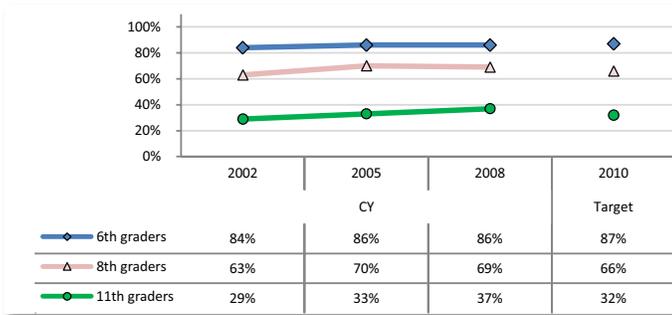
Strengthen the public health infrastructure

What do we do?

- 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-of-school 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.

How do we measure our progress?

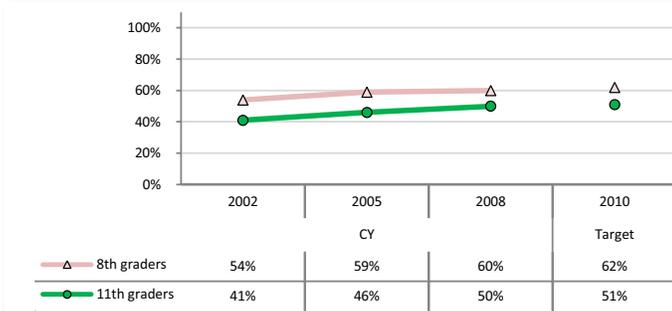
1 Percent of Iowa students (grades 6, 8, & 11) who have never used alcohol.



Data Source: Iowa Youth Survey. Data are available every two years.

How are we doing? We have already met our 2010 targets for 8th and 11th graders.

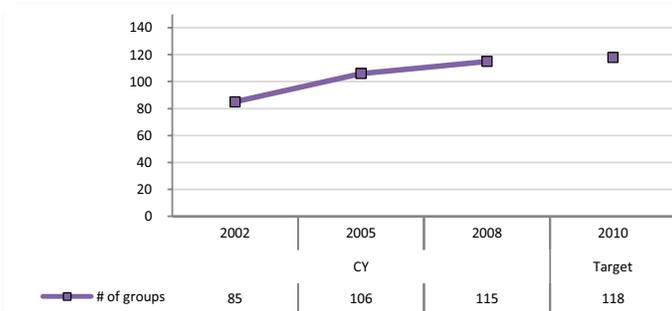
2 Percent of 8th and 11th grade students who think there is a possibility of "great risk or harm" in having three or more drinks of alcohol nearly every day.



Data Source: Iowa Youth Survey. Data are available every two years.

How are we doing? Through consistent prevention messages, more youth see risk or harm in daily alcohol use.

3 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 Iowans 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 Iowa Substance Abuse Information Center Helpline 24 hours a day, 7 days a week at 1-866-242-4111.
2. Learn about substance abuse by going to www.drugfreeinfo.org.
3. Get involved with local prevention efforts. To find your local substance abuse prevention agency, go to www.drugfreeinfo.org/php/srchedir.html.
4. Check Iowa 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 funds, & intra state receipts*: K01-0151/0154; K75-7502; 0153-0120/0152/0156/0166/0172(30%)/0174/0214(50%).

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$453,587	\$1,389,704	\$1,338,087
Tobacco funds	\$1,028,874	\$0	\$0
Federal funds	\$3,700,533	\$3,843,475	\$6,036,549
Other funds*	\$843,916	\$1,743,060	\$983,115
Total funds	\$6,026,910	\$6,976,239	\$8,357,751
FTEs	6.56	6.95	8.23

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 Treatment

Promoting & Protecting the Health of Iowans

Division of Behavioral Health
Phone: 515-242-5934
www.idph.state.ia.us/bh/substance_abuse.asp



"I can look in the mirror today and be proud of myself", a grandma shares as she reflects on her journey of recovery from heroin and cocaine. After receiving primary and ongoing aftercare treatment through Scott County providers, the woman is able to enjoy healthy relationships with family, maintain full-time employment, and offer amazing support to others struggling with addiction. She gives credit to programs with staff that never gave up on her, even when she wanted to, and ongoing aftercare treatment support.

The IDPH Substance Abuse Treatment program works to reduce the abuse of alcohol and other drugs with the ultimate goal of supporting addicted Iowans in their personal recovery efforts.

The IDPH Substance Abuse Treatment program works to ensure Iowans receive help where they are and when they ask for help.

Did you know? According to the Outcomes Monitoring System, in Iowa, alcohol was the most common primary substance reported being used by 55% of the clients, followed by marijuana at 24%, and methamphetamine at 12%.

Why is Substance Abuse Treatment important to promoting and protecting the health of Iowans?

- Substance abuse and related problems are among society's most far-reaching health and social concerns. Annually nearly 50,000 individuals seek substance abuse use assessments and/or treatment services in one of Iowa's publicly funded treatment agencies.
- 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.
- Iowa'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. In Iowa, over 70% of the open child welfare cases are related to substance use.
- People who drink even relatively small amounts of alcohol contribute to alcohol-related deaths and injuries on the job and on our streets. Between 2000 and 2007, approximately one-quarter to one-third of Iowa traffic fatalities involved an "alcohol-involved driver."

Which Iowa Public Health Goals are we working to achieve?

Promote healthy behaviors

Strengthen the public health infrastructure

What do we do?

- 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.
- Provide culturally specific treatment services through the Culturally Competent Treatment Program.
- Provide treatment to individuals reentering the community through the Jail-based Substance Abuse Treatment Project.
- 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 Iowans at any and all points in their personal recovery efforts.

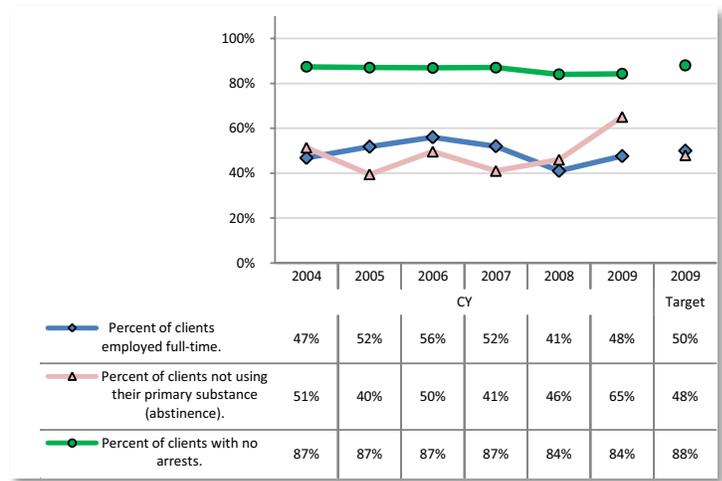
How do we measure our progress?

Treatment outcomes: Six months after treatment,

- ❶ Percent of clients not using their primary substance (abstinence).
- ❷ Percent of clients employed full-time.
- ❸ 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 Iowans 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.
4. Learn more about Substance Abuse Treatment resources and services at http://www.idph.state.ia.us/bh/admin_regulation.asp

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, Underground Storage Tank Fund (USTF), federal 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/ 0105; K52-5221/5223; K67-6701; K91-9102; K97-9702; 0153-0102/0104/0108/0116/0124/0126/0128/0130/0172 (70%)/0206/0214 (50%)

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$1,016,287	\$16,260,368	\$16,548,941
Gambling funds	\$2,215,000	\$0	\$0
Health care trust	\$1,371,752	\$1,032,905	\$0
Tobacco funds	\$13,800,000	\$0	\$0
USTF	\$0	\$0	\$500,000
Federal funds	\$14,409,305	\$15,463,078	\$14,397,746
Other funds*	\$577,769	\$2,496,807	\$70,000
Total funds	\$33,390,113	\$35,253,158	\$31,516,687
FTEs	9.69	8.28	8.08

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.

Youth Suicide Prevention

Promoting & Protecting the Health of Iowans

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 that brought TeenScreen to schools across the state, Iowa 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 2002-2007?

Why is Youth Suicide Prevention important to promoting and protecting the health of Iowans?

- Suicide is not only the 2nd leading cause of death for Iowans 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 suicide death, there are an estimated 25 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

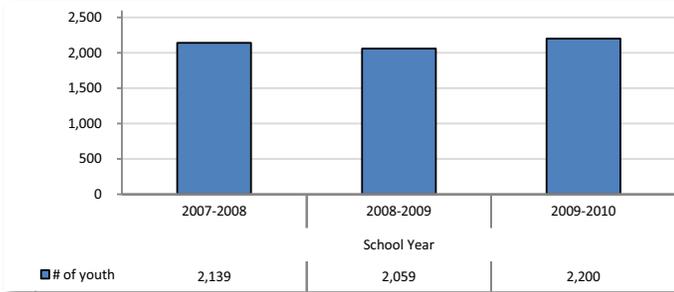
Promote healthy behaviors

What do we do?

- Provide information about symptoms of depression and warning signs for 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 and other suicide prevention strategies to youth in Iowa schools.
- Provide resources for Iowans 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.

How do we measure our progress?

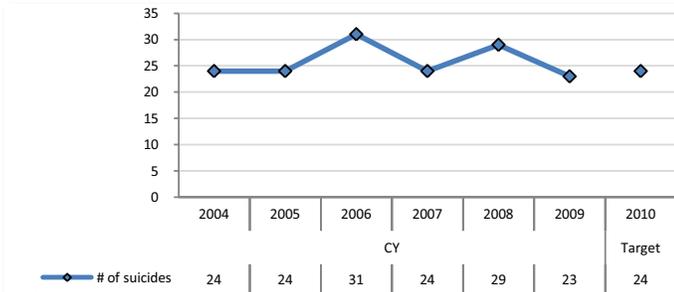
1 Number of youth receiving TeenScreen services.



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.

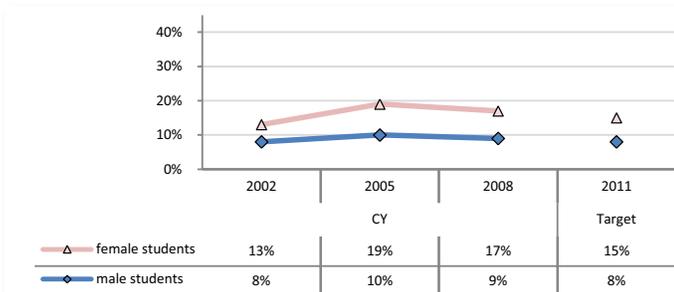
2 Number of Iowans age 19 & under who have died of suicide.



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

How are we doing? The youth suicide rate will fluctuate from year to year. Iowa experienced an increase in deaths from 2007 to 2008. 2009 was better than our target.

3 Percent of Iowa 11th 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 percentage of Iowa 11th graders reporting attempting suicide at least once in their life.

What can Iowans do to help?

1. Learn about the facts about suicide and depression at www.suicidology.org/c/document_library/get_file?folderId=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 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-and-tools/warning-signs.

Others working on similar issues

Other IDPH bureaus, offices, or programs: Substance Abuse Prevention and Treatment, Violence Prevention, Child & Adolescent Health.

Other organizations: SAMHSA, local grantees, Iowa Departments of Education and Human Services, Johnson and Polk County Suicide Prevention Coalitions.

Funding sources

Federal funds: 0153-0696

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
Federal funds	\$241,652	\$234,229	\$369,683
Total funds	\$241,652	\$234,229	\$369,683
FTEs	1.19	1.11	1.25

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.

Tobacco Use Prevention & Control

Promoting & Protecting the Health of Iowans

Division of Tobacco Use Prevention & Control

Phone: 515-281-6625

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. Compliance with the law has been high, with fewer than 2% of all businesses in Iowa receiving complaints by IDPH on potential violations.

Cessation services for Iowans were greatly expanded in 2008. On January 1, 2008 Quitline Iowa began offering a free, two-week supply of nicotine patches or gum to any adult wanting to quit using tobacco, and 15 community health centers across the state began offering a twelve-week supply of free cessation pharmaceuticals to low-income Iowans. Since this time, over 60,000 Iowans have been assisted in quitting by these programs.

Did you know?

Most adults in Iowa do not allow smoking inside their homes or cars. According to the 2008 Iowa Adult Tobacco Survey, smoking was not allowed in 77% of homes nor in 70% of family cars. This is a significant increase from 2002, when only 59% of adults did not allow smoking in their homes and 54% did not allow smoking in their cars.

Why is Tobacco Use Prevention and Control important to promoting and protecting the health of Iowans?

- Tobacco is the leading preventable cause of death of Iowans. More than 4,400 Iowa 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, Iowa's leading cause of death.
- Annual healthcare costs directly caused by smoking are now \$1 billion in Iowa. Iowa Medicaid covers approximately \$301 million of these costs.

Which Iowa Public Health Goals are we working to achieve?

Promote healthy behaviors

Protect against environmental hazards

Strengthen the public health infrastructure

What do we do?

- Just Eliminate Lies (JEL), Iowa's youth-led tobacco use prevention program supports peer education and anti-tobacco 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.IowaSmokefreeAir.gov and 1-888-944-2247.
- Support [Quitline Iowa](http://QuitlineIowa.org) (1-800-784-8669), which provides free, effective counseling to help Iowans 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.

How do we measure our progress?

1 Percent of adults and students that currently smoke cigarettes (past 30 days).

	2000	2002	2004	2006	2008	Cigarette smokers per 20 people
All Iowa adults	--	23%	20%	18%	14%	 14% (95% CI=12.5%-16.3%)*
Adults at or below 200% of the poverty guideline				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%	 3% (95% CI=1.3%-4.3%)*

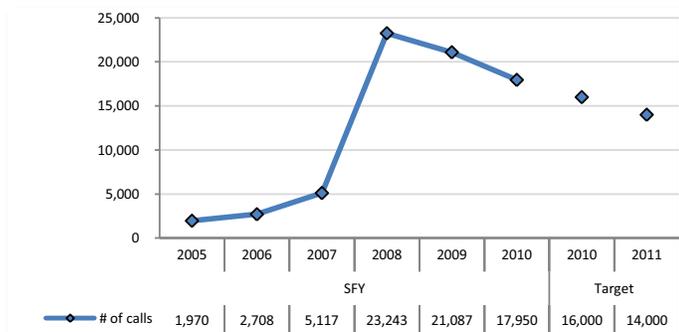
 = smoker  = non-smoker

* 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 Iowans living in households at or below 200% of the federal poverty level are more likely to be current smokers (21%) than Iowans with higher incomes (12%).

2 Quitline call volume per year.



Data Source: Quitline database. Data are available quarterly.

How are we doing? For the third consecutive year (2008-2010), over 5% of the estimated 327,000 adult smokers in Iowa were assisted by Quitline Iowa. Most state quitlines average less than 2% of smokers calling each year. In FY2010, almost 18,000 Iowans used Quitline Iowa. In January 2010 alone, almost 5,000 Iowans called Quitline Iowa, resulting in the second busiest month ever in the nine-year history of the quitline. Quitline Iowa easily surpassed the 2010 goal of 16,000 calls.

What can Iowans 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 they are ready to quit, 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, and other events at the state and local level, visit www.jeliowa.org.
4. Help to ensure that every workplace is smokefree by going to www.IowaSmokefreeAir.gov or 1-888-944-2247 for information and resources about the Iowa Smokefree Air Act or to register a complaint about potential 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, BRFS.

Other organizations: Tobacco Use Prevention & Control Commission, Iowa Cancer Consortium, 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 funds, receipts*, & carryover*: K01-0155/0203/0209/0211/0215/0217/0219/0221/0223; K52-5281/5283/5285/5287/5289; K93-9302/9308/9310/9312/9314/9352/9354/9356; 0153-9342/AR14/AR16.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$1,401,959	\$5,378,186	\$7,388,282
Tobacco funds	\$6,928,266	\$0	\$0
Health care trust	\$2,943,818	\$2,099,552	\$0
Federal funds	\$969,991	\$1,045,182	\$4,727,099
Other funds*	\$0	\$1,763,563	\$413,986
Total funds	\$12,244,034	\$10,286,483	\$12,529,367
FTEs	13.49	13.96	19.10

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.

Iowa Department of Public Health  Division of Tobacco Use Prevention & Control

Phone: 515-281-6225  Fax: 515-281-6475  www.idph.state.ia.us/tobacco

1st 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

Tuberculosis Control

Promoting & Protecting the Health of Iowans

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 great-grandparents 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, Iowa 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 Iowans?

- 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?

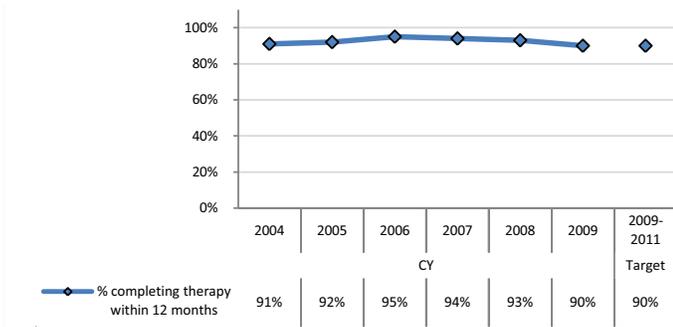
- Prevent epidemics & the spread of disease
- Strengthen the public health infrastructure
- Promote healthy behaviors

What do we do?

- 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 Iowans with TB and LTBI.

How do we measure our progress?

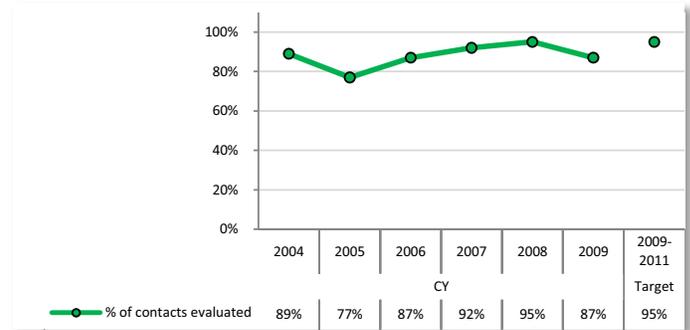
- ❶ Percent of patients with newly diagnosed TB, for whom therapy for one year or less is indicated, who complete therapy within 12 months.



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? Iowa consistently meets or exceeds the national program objective of 90%.

- ❷ 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? Iowa is above the national average for this objective and reached the goal of 95% for the first time in 2008.

What can Iowans do to help?

1. Maintain a healthy lifestyle, especially when visiting other countries where TB is common. For more information, go to www.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, American Thoracic Society, local health departments, hospitals.

Funding sources

General fund & federal funds: K15-1601; 0153-1602

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$61,735	\$60,987	\$60,414
Federal funds	\$365,764	\$267,453	\$314,589
Total funds	\$427,499	\$328,440	\$375,003
FTEs	1.52	1.70	1.80

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.

Violence Prevention

Promoting & Protecting the Health of Iowans

Division of Behavioral Health

Phone: 515-281-5032

www.idph.state.ia.us/bh/injury_violence.asp



A young woman being seen by a community family planning clinic reports that she became pregnant less than four months after dating her boyfriend, who refused to use condoms after they became exclusive dating partners. She felt she had minimal options, and decided to marry him to continue the pregnancy. Within days of the wedding, he became verbally, emotionally, financially, physically, and sexually abusive toward her. He refused to allow her to use birth control. When she got pregnant a second time (against her will), he was ecstatic, but she was devastated. She has had a hard time coming to grips with the reality of her abusive relationship, the lack of control over her own body, and the isolation she has felt.

IDPH violence prevention programs seek to reduce the rate of injury and death from intentional violence, especially suicide, domestic, and sexual violence. By supporting prevention programs and conducting professional training, communities are better able to recognize, appropriately intervene, and prevent further violence.

Did you know? Intentional injuries, such as interpersonal violence and suicide, are among the leading causes of death and injury for younger Iowans. People exposed to interpersonal violence and other adverse conditions in childhood are more likely to experience depression, substance abuse, and other health problems later in life.

Why is Violence Prevention important to promoting and protecting the health of Iowans?

- An average of 19 Iowans die each year due to domestic violence homicides or suicides.
- One in five Iowa women will experience physical violence by an intimate partner and one in 10 will experience sexual violence in their lifetimes. Men also experience this, but at much lower rates.
- 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 Iowans.
- Public health methods are effective in preventing violence through community involvement, education, and challenging the beliefs and habits that support violence.

Which Iowa Public Health Goals are we working to achieve?

Prevent injuries

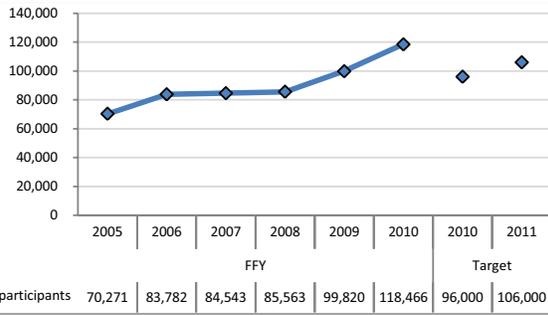
Promote healthy behaviors

What do we do?

- 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.

How do we measure our progress?

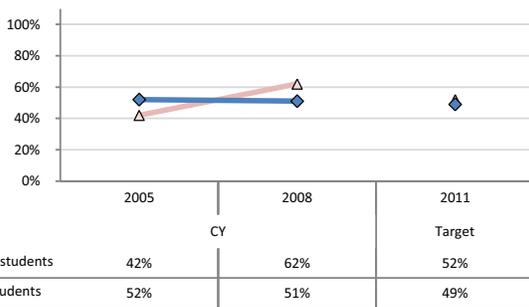
1 Number of students and professionals participating in sexual and domestic violence prevention programs.



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.

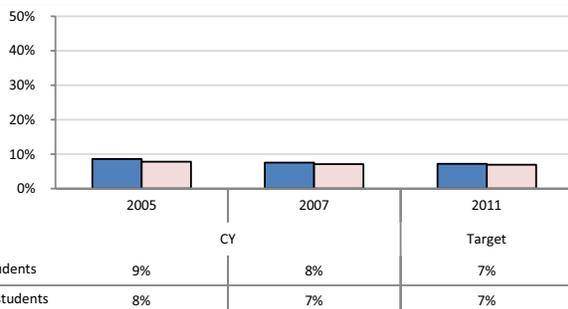
2 Percent of Iowa students (grades 6, 8, & 11) who report experience with being bullied.



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%.

3 Percent of Iowa 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 Iowa high school students reporting physical violence by a dating partner.

What can Iowans 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.
2. Contact local victim service programs, hotlines, or law enforcement to report violence in domestic situations. For more information, contact the Iowa Domestic Violence Hotline at 1-800-942-0333 or the Iowa Sexual Abuse Hotline at 1-800-284-7821.
3. 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/violence_against_women.asp.
4. Iowa 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 www.icyd.org or www.cdc.gov/ViolencePrevention/.

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 funds, & intra state receipts*: K19-1965; 0153-1752/1756/1758/1962/1980

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$261,500	\$232,477	\$234,229
Federal funds	\$412,918	\$419,123	\$442,595
Other funds*	\$43,295	\$52,083	\$238,553
Total funds	\$717,713	\$703,683	\$915,377
FTEs	0.80	0.99	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.

Safe Drinking Water

Promoting & Protecting the Health of Iowans

Division of Environmental Health
Phone: 515-281-8722
www.idph.state.ia.us/eh/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 programs; 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 Iowa 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 Iowa's drinking water safe – it's the daily mission of the IDPH Safe Drinking Water programs.

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 are Safe Drinking Water programs important to promoting and protecting the health of Iowans?

- Plentiful safe drinking water is important to public health.
- 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 Iowa Public Health Goals are we working to achieve?

Protect against environmental hazards

Prevent epidemics & the spread of disease

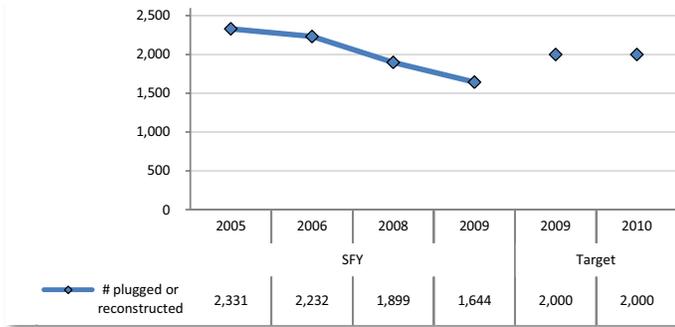
Promote healthy behaviors

What do we do?

- Iowa 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. IDPH 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.
- IDPH maintains the Iowa State Plumbing Code, the minimum standard for plumbing in Iowa cities.

How do we measure our progress?

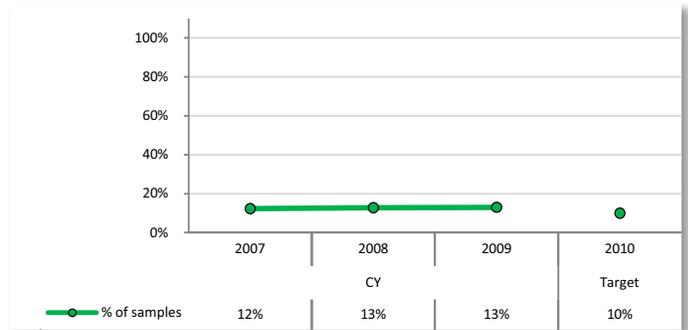
1 Number of wells plugged and reconstructed.



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.

2 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 Iowans do to help?

1. All Iowans 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 funds, & retained fees*: K13-1402/1404; K19-1903/2041; 0153-1904.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$151,570	\$0	\$0
Federal funds	\$111,002	\$108,792	\$56,232
Other funds*	\$1,893,441	\$2,119,966	\$7,729,193
Total funds	\$2,156,013	\$2,228,758	\$7,785,425
FTEs	5.11	6.19	8.30

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.

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/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 water well program** (well tests, plugging, and renovation): www.idph.state.ia.us/eh/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

Swimming Pools and Spas

Promoting & Protecting the Health of Iowans

Division of Environmental Health
Phone: 515-281-8722
www.idph.state.ia.us/eh/swimming_pools.asp



Every summer in Iowa, hundreds of thousands of Iowans 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 Iowa 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 Iowans 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 Iowans?

- Iowans 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 Iowans continue to stay active with few worries.
- Iowa Code requires that IDPH inspect and regulate public swimming pools and spas.

Which Iowa Public Health Goals are we working to achieve?

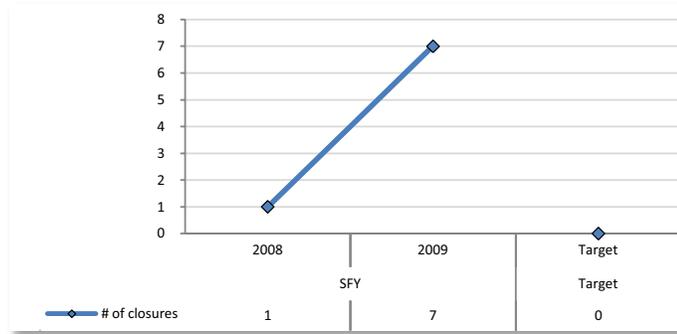
- Protect against environmental hazards
- Prevent epidemics & the spread of disease
- Prevent injuries

What do we do?

- 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.

How do we measure our progress?

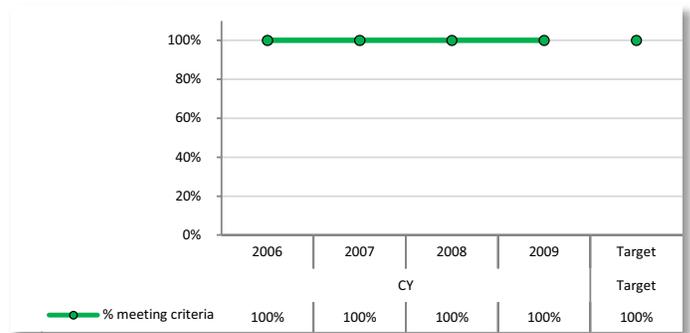
1 Number of pool/spa closures.



Data Source: Local Inspector reports. Data are available annually.

How are we doing? In state fiscal year 2009, there were 7 pool/spa closures required. Our target for 2010-2011 is to achieve 0 closures.

2 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. In 2009, 100% of programs met criteria; some required slight modifications. Our target for 2010-2011 is to maintain this level of performance.

What can Iowans 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.
2. 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 www.cdc.gov/healthyswimming.

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.

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
State funds	\$65,265	\$11,153	\$23,828
Total funds	\$65,265	\$11,153	\$23,828
FTEs	1.00	0.60	0.25

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.

WIC – Special Supplemental Nutrition Program for Women, Infants and Children

Promoting & Protecting the Health of Iowans

Division of Health Promotion & Chronic Disease Prevention
Phone: 515-281-4919
www.idph.state.ia.us/wic/default.asp



When money is tight, difficult decisions must be made. For some Iowans, 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 Iowans — 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 through 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 WIC important to promoting and protecting the health of Iowans?

- More than 45% 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 Iowa Public Health Goals are we working to achieve?

Promote healthy behaviors

Strengthen the public health infrastructure

What do we do?

- 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 contractors.
- 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 Iowa economy by buying over \$45 million dollars of food from more than 650 Iowa 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, 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.

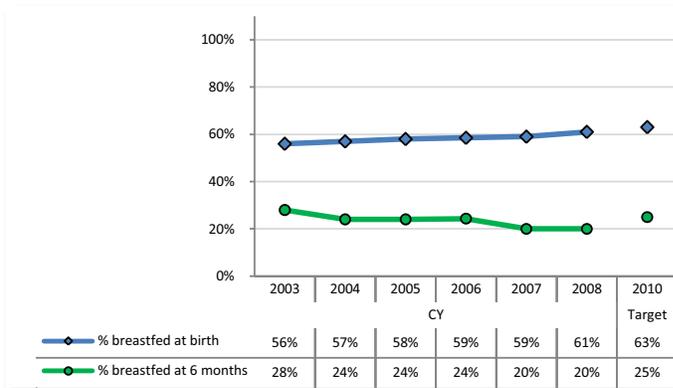
How do we measure our progress?

- ❶ Percent of WIC infants breastfed at birth.
- ❷ 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 Iowa infants are increasing. Of all Iowa infants born in 2007, 74% of were ever breastfed (Data Source: National Immunization Survey).

Duration rates have increased, but at a much slower pace. Duration rates are particularly a challenge because Iowa 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 2007, 42% were still being breastfed at 6 months of age (Data Source: National Immunization Survey).



What can Iowans do to help?

1. All Iowans 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 Iowans can refer potentially eligible families to WIC. For more information about WIC, go to www.idph.state.ia.us/wic/families.asp.
3. All Iowans 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 access the online website to order materials.

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

	FY2009 Actual	FY2010 Actual	FY 2011 Estimate
Federal funds	\$50,981,073	\$49,330,417	\$43,116,974
Total funds	\$50,981,073	\$49,330,417	\$43,116,974
FTEs	13.59	13.59	15.25

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.

Women's Health

Promoting & Protecting the Health of Iowans

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 modern-day 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 Iowa.

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 Iowans?

- 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.
- 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 Iowans the opportunity to influence women's health policy.
- The Iowa Women's Health Information Center website (www.womenshealthiowa.info) provides free, objective, and medically-accurate health information. Men's health topics may also be searched via this website.

Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

What do we do?

- Assure coordination of primary care, preventive services, and mental health services for Iowa 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.

▶ How do we measure our progress?

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 include reference websites where more information is available.

▶ What can Iowans do to help?

1. All Iowans 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 website.
2. All Iowans 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 Iowans 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, 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 website, 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 (FFY2010 - \$2,500; FFY2011 perhaps \$5,000)

	FY2009 Actual	FY2010 Actual	FY2011 Estimate
Federal funds	\$4,000	\$3,000	\$4,000
Total funds	\$4,000	\$3,000	\$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.