Healthy Iowans 2017-2021

Iowa's Health Improvement Plan



Mental Health, Illness & Suicide

REVISED August 2019



Coordinated by the Bureau of Public Health Performance Iowa Department of Public Health



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FOCUS AREA: Mental Health, Illness, & Suicide

What Health Issues Are Included

Mental Health, Illness, & Suicide

Mental Health, Illness, & Suicide Measures of Health Improvement

MH-1 Decrease the percentage of adults who reported their mental health was not good 14 or more days in the past 30 days.

Baseline: 10% [2016] Baseline: 12% [2016] Baseline: 12.5% [2016]

Newest: 11% [2017]≈8%↑ increase Newest: 13% [2017]≈8%↑ increase Newest: 13% [2017]≈5%↑ increase

Income less than \$25,000 ⊗ Adults with Disability* ⊗

Target: 17% Target: 23%

Baseline: 19% [2016] Baseline: 25% [2016]

Newest: 22% [2017]≈16%↑ increase Newest: 26% [2017]≈3%↑ increase Data Source: UnitedHealth Foundation. America's Health Rankings analysis of BRFSS.

https://www.americashealthrankings.org/explore/2017-annual-report/state/IA *Additional IDPH analysis of national BRFSS data.

MH-2 Increase the number of mental health providers (per 100,000 population).

Overall © Target: 129

Baseline: 122 [2016]

Newest: 132 [2017]≈8%[↑] increase

Data Source: Centers for Medicare and Medicaid Services, National Provider Identification Registry. Courtesy: University of Wisconsin Population Health Institute, County Health Rankings. Rankings Data & Documentation, National Data & Documentation.

https://www.countyhealthrankings.org/

MH-3 Increase the percentage of children ages 3-17 with a mental/behavioral condition who have received treatment or counseling.

Overall ⊗ Target: 66%

Baseline: 63% [2016]

Newest: 61% [2017]≈3%↓ decrease

Data Source: Child and Adolescent Health Measurement Initiative www.cahmi.org. Data Resource Center for Child and Adolescent Health. National Survey of Children's Health (NSCH). National Outcome Measure #18. https://www.childhealthdata.org/browse/survey

MH-4 Decrease the rate of suicides (per 100,000 population).

Overall, age-adjusted ⊗ Male, age-adjusted ⊗

Target: 13 Target: 22
Baseline: 14.6 [2016] Baseline: 24 [2016]

Newest: 15.1 [2017]≈4%↑ increase Newest: 24.4 [2017]≈1%↑ increase

 Ages 15-19 ⊗
 Ages 20-29 ⊚
 Ages 30-39 ⊗

 Target: 9
 Target: 17
 Target: 20

Baseline: 10.3 [2016] Baseline: 18.8 [2016] Baseline: 21.6 [2016]

Newest: 15.4 [2017]≈50%↑ increase Newest: 17.7 [2017]≈6%↓ decrease Newest: 22.1 [2017]≈2%↑ increase

 Ages 40-49 ☺
 Ages 50-59 ☺

 Target: 20
 Target: 20

Baseline: 22 [2016] Baseline: 21.9 [2016]

Newest: 21.7 [2017]≈1% decrease Newest: 18.5 [2017]≈16% decrease

Data Source: CDC, NCHS. Multiple Cause of Death on CDC WONDER Online Database. Data are from the Multiple Cause of Death Files as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program.

https://wonder.cdc.gov/mcd-icd10.html

Iowa Health Issue: Mental Health, Illness & Suicide

Iowa Counties with Local Strategies

Adair, Adams, Allamakee, Audubon, Benton, Black Hawk, Boone, Buchanan, Calhoun, Cerro Gordo, Chickasaw, Clarke, Clay, Clayton, Clinton, Davis, Decatur, Des Moines, Dubuque, Greene, Henry, Howard, Iowa, Jasper, Jones, Keokuk, Lee, Linn, Lucas, Madison, Marshall, Mills, Monroe, Muscatine, Plymouth, Pocahontas, Pottawattamie, Poweshiek, Scott, Shelby, Sioux, Story, Union, Van Buren, Warren, Washington, Webster, Winneshiek

These community health improvement plans are available on the Iowa Department of Public Health, Community Health Needs Assessment and Health Improvement Planning (CHNA&HIP) website: https://idph.iowa.gov/chnahip/health-improvement-plans

Goals, Objectives & Strategies

Mental Health, Illness & Suicide

Goal #1 Prevent suicide deaths.

Alignment with National Plans

2012 National Strategy for Suicide Prevention

http://www.surgeongeneral.gov/library/reports/nationalstrategy-suicide-prevention/fullreport.pdf

Alignment with State / Other Plans

Overall Goal, Iowa Suicide Prevention Plan 2015-2018 https://idph.iowa.gov/substance-abuse/youth-suicide-prevention

Mental Health, Illness & Suicide

Objective 1-1	Reduce the annual number of deaths by suicide by 10%				
	from an average of 406 each year (2012-14) to 365 by 2018.				

Baseline	Baseline	Target	Target
Year	Value	Year	Value
2012-14	406	2018	365

Data Source | Iowa Department of Public Health, Bureau of Health Statistics. Vital Statistics of Iowa. Table 24: Suicide Deaths by & Location | Race and Age, Resident Data. http://idph.iowa.gov/health-statistics/data

Mental Health, Illness & Suicide

Strategy 1-1.1 Identify, coordinate, and establish suicide prevention activities across multiple sectors and settings by 2021. Strategy Type Community-focused

Strategy Source & Location

Iowa Suicide Prevention Plan 2015-2018, Goal #1.

Who's Responsible

Iowa Suicide Prevention Planning Group

Target Date Dec 31, 2021

Mental Health, Illness & Suicide

Strategy 1-1.2

Provide care and support to individuals affected by suicide attempts and deaths to promote healing, and implement community strategies to help prevent further suicides.

Strategy Type Individual/interpersonal-focused

Strategy Source & Location

Iowa Suicide Prevention Plan 2015-2018, Goal #5.

Who's Responsible

Iowa Suicide Prevention Planning Group

Target Date

Dec 31, 2021

Strategy 1-1.3 Provide de-identified data from the Iowa Office of the State

Medical Examiner's Case Management System to policy
makers in an effort to support suicide prevention efforts,

Strategy Type
Policy-focused

Strategy Source & Location

initiatives, and policy change.

Iowa Plan for Suicide Prevention 2015-2018

Who's Responsible

Iowa Office of the State Medical Examiner and the Iowa Department of Public Health,

Bureau of Behavioral Health

Mental Health, Illness & Suicide

Goal #2 Reduce the bi-annual numbers of suicidal ideation (thoughts of engaging in suicide behavior) and the number of deaths by suicide in the Iowa Army National Guard.

Alignment with National Plans

Army Regulation 600-63, Army Health Promotion, 14 April 2015; Army Regulation 350-53, Comprehensive Soldier and Family Fitness (unpublished)

Alignment with State / Other Plans

N/A

Mental Health, Illness & Suicide

Objective 2-1	Reduce the number of suicidal ideations by 25% over the next two	Baseline	Baseline	Target	Target
	years, from 46 (2018) to 35 by the end of 2020.	Year	Value	Year	Value
		2018	46	2020	35

Data Source | Commanders Critical Information Requirement (CCIR) tracker (unpublished) & Location

Mental Health, Illness & Suicide

Strategy 2-1.1 Ensure that at least one Master Resilience Trainer (MRT) is trained at each unit in the Iowa Army National Guard. The Adjutant Generals policy orders all units to have one MRT trained by the end of October 2017. As of 24 October 2016, 39 are trained out of 53 required.

Strategy Source & Location

Training Year 2019 Unit Level Ready and Resilient Suicide Prevention Program Requirements Plan, JFHQ (unpublished)

Who's Responsible Target Date
Unit commanders supported by Iowa Army National Guard Resilience team Oct 1, 2019

Mental Health, Illness & Suicide

Strategy 2-1.2 Provide Applied Suicide Intervention Skills Training (ASIST; aka gatekeepers) to at least 10% of each unit in the Iowa Army National Guard annually.

<u>Strategy Type</u> Individual/interpersonal-focused

Strategy Type

Policy-focused

Strategy Source & Location

Training Year 2019 Unit Level Ready and Resilient Suicide Prevention Program Requirements Plan, JFHQ (unpublished)

Who's Responsible Target Date
Commanders identify individuals and Suicide Prevention Office provides training.

Oct 1, 2019

Target Date

Dec 31, 2020

Strategy 2-1.3 Provide/train Ask, Care, Escort-Suicide Intervention (ACE-

SI) to at least 10% each of each unit in the Iowa Army National Guard annually.

Strategy Type

Individual/interpersonal-focused

Strategy Source & Location

Training Year 2019 Unit Level Ready and Resilient Suicide Prevention Program Requirements Plan, JFHQ (Unpublished)

Who's Responsible

Target Date

Commanders identify individuals, and Suicide Prevention Office provides training.

Oct 1, 2019

Mental Health, Illness & Suicide

Objective 2-2 Reduce the total number of deaths by suicide in the Iowa Army National Guard by 50% from 8 (2014-16) to 4 (2017-2019).

Baseline Baseline **Target** Year Value Year 8 2017-19 2014-16

Target Value 4

& Location

Data Source | Commanders Critical Information Requirement (CCIR) tracker (unpublished)

Mental Health, Illness & Suicide

Strategy 2-2.1 Ensure that at least one Master Resilience Trainer (MRT) is

trained at each unit in the Iowa Army National Guard. The Adjutant General's policy orders all units to have one MRT trained by the end of October 2017. As of 24 October 2016, 39 are trained out of 53 required.

Strategy Type Policy-focused

Strategy Source & Location

Training Year 2019 Unit Level Ready and Resilient Suicide Prevention Program Requirements Plan, JFHQ (unpublished)

Who's Responsible

Target Date

Unit commanders supported by Iowa Army National Guard Resilience Team

Oct 1, 2019

Mental Health, Illness & Suicide

Strategy 2-2.2 Provide/train Applied Suicide Intervention Skills Training (ASIST; aka gatekeepers) to at least 10% of each unit in the Individual/interpersonal-focused Iowa Army National Guard annually.

Strategy Type

Strategy Source & Location

Training Year 2019 Unit Level Ready and Resilient Suicide Prevention Program Requirements Plan, JFHQ (unpublished)

Who's Responsible

Target Date

Commanders identify individuals and Suicide Prevention Office provides training.

Oct 1, 2019

Mental Health, Illness & Suicide

Strategy 2-2.3

Provide/train Ask, Care, Escort-Suicide Intervention (ACE-SI) to at least 10% each of each unit in the Iowa Army National Guard annually.

Strategy Type

Individual/interpersonal-focused

Strategy Source & Location

Training Year 2019 Unit Level Ready and Resilient Suicide Prevention Program Requirements Plan, JFHQ. (Unpublished)

Who's Responsible

Target Date

Commanders identify individuals, Suicide Prevention Office provides training

Oct 1, 2019

Goal #3 Increase access to behavioral health services across the continuum.

Alignment with National Plans

Healthy People 2020, Mental Health & Mental Disorders

https://www.healthypeople.gov/2020/topics-objectives/topic/mental-health-and-mental-disorders/objectives

Alignment with State / Other Plans

N/A

Mental Health, Illness & Suicide

Objective 3-1 Build a care continuum that includes sub-acute services, crisis intervention, crisis homes, nursing facility care community-based services, and more hospital inpatient beds for acutely-ill behavioral health patients.

Baseline	Baseline	Target	Target
Year	Value	Year	Value
2016	0	2021	1
			continuum
			of care

Data Source | Iowa Hospital Association 2017 Position Paper

& Location https://www.ihaonline.org/Advocacy/Legislative-Agenda

Mental Health, Illness & Suicide

Strategy 3-1.1 Advocate for the following: increase crisis stabilization services in local communities, increase utilization of "transitional level of care units," increase sub-acute services, decrease days waiting placement.

Strategy Type Policy-focused

Strategy Source & Location

Iowa Hospital Association 2017 Position Paper

Who's Responsible lowa Hospital Association

Target Date
Dec 31, 2021

Mental Health, Illness & Suicide

Goal #4 Educate pharmacists to provide services to evaluate mental health pharmacotherapy and make referrals as appropriate.

Alignment with National Plans

N/A

Alignment with State / Other Plans

N/A

Mental Health, Illness & Suicide

Objective 4-1 Pharmacists are educated to provide and utilize the PHQ-9 and assessing the appropriateness of anti-depressant treatment.

Baseline Baseline Year Value

2016

Target Year 2019 Target
Value
74 phar-

0 training 2019 session

macies offering depression screenings

Data Source | New objective, to be developed.

& Location

Strategy 4-1.1 Hold education and training meetings with pharmacists involved in treatment of patients with mental health care needs.

Strategy Type

Professional/provider-focused

Strategy Source & Location

Iowa Pharmacy Association

Who's Responsible

Iowa Pharmacy Association

Target Date
Jan 1, 2021

Mental Health, Illness & Suicide

Objective 4-2 Train pharmacists, pharmacy technicians, and student pharmacists with the skills to recognize mental health condition exacerbations or crises developing and refer to appropriate

Baseline
YearBaseline
ValueTarget
YearValue201702020100

& Location

Data Source | Iowa Pharmacy Association

professional help.

Mental Health, Illness & Suicide

Strategy 4-2.1 At least 100 pharmacists, pharmacy technicians, and student pharmacists across Iowa are trained in Mental

Health First Aid.

Strategy Type

Professional/provider-focused

Strategy Source & Location

Iowa Pharmacy Association

Who's Responsible

Iowa Pharmacy Association

Target Date

Jan 1, 2020

Mental Health, Illness & Suicide

Goal #5 Reduce the use of prisons in Iowa to house individuals with chronic mental health issues.

Alignment with National Plans

N/A

Alignment with State / Other Plans

Iowa Department of Corrections Strategic Plan http://publications.iowa.gov/21093/

Mental Health, Illness & Suicide

Objective 5-1 Reduce the number of individuals in prison who have chronic and serious mental heath issues by 25%.

Baseline
YearBaseline
ValueTarget
YearValue20188,37120216,278

Data Source | Iowa Corrections Offender Network and ICON-Medical module.
& Location |

Mental Health, Illness & Suicide

Strategy 5-1.1 Educate service providers in the community on addressing the needs of persons reentering the community from prison.

Strategy Type
Professional/provider-focused

Strategy Source & Location

Department of Corrections series of scheduled meetings in each of the eight judicial districts (unpublished)

Healthy Iowans: MENTAL HEALTH, ILLNESS, & SUICIDE

REVISED August 2019

Who's Responsible

Department of Corrections Statewide Reentry Coordinator

Target Date
Mar 31, 2017

Mental Health, Illness & Suicide

Strategy 5-1.2 Under the direction of the National Alliance on Mental

Illness (NAMI), educate individuals with mental health health issues so they may manage their mental health issues on a daily basis. This includes an apprenticeship program for peer to peer.

Strategy Type

Individual/interpersonal-focused

Strategy Source & Location

Ongoing programs/trainings in each lowa Department of Corrections institution (unpublished)

Who's Responsible

Target Date

Department of Corrections executive officer for mental health

Dec 31, 2018

Mental Health, Illness & Suicide

Strategy 5-1.3 Begin Medicaid sign-up while individuals are still in prison,

as part of the reentry process.

Strategy Type
Individual/interpersonal-focused

Strategy Source & Location

Each Iowa Department of Corrections institution (unpublished)

Who's Responsible

Target Date

Department of Corrections Statewide Reentry Coordinator

Ongoing

Mental Health, Illness & Suicide

Goal #6 By 2020, increase the number of lowans who receive problem gambling treatment.

Alignment with National Plans

N/A

Alignment with State / Other Plans

N/A

Mental Health, Illness & Suicide

Objective 6-1 Increase admissions by Iowa Gambling Treatment Program-

funded providers by 10% each year.

Baseline Baseline Target
Year Value Year
2015 268 2020

Data Source I-SMART - Problem Gambling Domain, Office of Problem Gambling Treatment and Prevention & Location http://www.idph.iowa.gov/igtp/reports

Mental Health, Illness & Suicide

Strategy 6-1.1 Develop Annual Targeted Health Promotion Plan/Strategy

to drive call to action by lowans who are struggling with gambling related behaviors or their loved ones.

Strategy Type

Individual/interpersonal-focused

Strategy Source & Location

lowa Department of Public Health, Office of Problem Gambling Treatment and Prevention, funded providers, and ZLR (contractor)

Who's Responsible

Target Date
Jun 30, 2020

Target

Value

390

Office of Problem Gambling Treatment and Prevention, funded providers, and ZLR

(contractor)

Strategy 6-1.2	COMPLETE: Release	an RFP for ar	integrated call	center.	Strategy Type		
			eg. area ea		Policy-focused		
	Strategy Source & Location Iowa Department of Public Health, Bureau of Substance Abuse, Office of Problem Gambling and Prevention. RFP will focus on Suicide Prevention, assistance for substance and gambling related issues, including value						
	added services until decision to engage or not engage in services. Who's Responsible Iowa Department of Public Health, Bureau of Substance Abuse, Office of Problem Gambling and Prevention				Target Date Feb 1, 2017		
	Report Date Feb 19, 2018	ogress on Stra Complete	tegy On track	Off	track 🔲 N	o progress	
	Progress notes: BET YLI	-	e and website m live on 10/23/1	_			117, with
Mental Health,	Illness & Suicide						
Strategy 6-1.3	Annually, allocate a Appropriation for H				Strategy Type		
	Strategy Source & Location						
	Iowa Department of Public Health, Office of Problem Gambling and Prevention						
	Who's Responsible lowa Department o	f Public Health	ı, Office of Probl	em Gambli	ng and Preventi	on	Target Date June 30, 2020
Mental Health,	Illness & Suicide						
Strategy 6-1.4	Ensure that each m hand-offs" attempt Life Iowa Call Cente	ed for probler	n gambling by th		Strategy Type Individual/inte	rpersonal-foc	used
	Strategy Source & Location lowa Department of Public Health, Office of Problem Gambling and Prevention; Foundation 2 (Your Life Iowa contractor); IDPH funded problem gambling providers						
	Who's Responsible lowa Department o Foundation 2 (Your						Target Date Jun 30, 2020

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