

## Redesigning public health takes next step

By Rob Stewart\*

The proverbial ink was barely dry on Version One of the [Iowa Local Public Health Standards](#) before work began on drafting the state criteria and standards for public health. On Oct. 11, the Public Health Standards Development Committees met in Des Moines to begin their work.

Iowa Department of Public Health (IDPH) Director Mary Mincer Hansen, R.N., Ph.D., said that developing the state criteria and standards after the completion of the local standards was a strategic part of the redesign. "We knew that once we learned what the locals needed, only then could we begin discussing what we need to do at the state level," Dr. Hansen said.

Committee members, many of whom also served on the local standards development committees, will meet once a month from October 2006 through March 2007 to draft the standards. After each meeting, the current draft will be posted on the [Redesigning Public Health in Iowa](#) Web site.

The committees plan to present a draft of the state criteria and standards at the [April 2007 Public Health Conference](#). Pam Willard, Johnson County Board of Health member and member of the Workforce Committee, talked about what to expect at the 2007 conference. "For the April draft, we'll have looked at the state

*(Continued on page 5)*



The Oct. 11 state standards development kickoff included presentations and multi-disciplinary round table discussions such as this one. (l-r) Joyce Allard and John Carter of IDPH, Larry Barker of Scott County, and Cindy Kail of Greene County.

## Walk brings suicide "Out of the Darkness"

By Ilima Young-Dunn\*

In 2005, 331 Iowans ended their own lives. Nearly every day, somewhere in Iowa, someone commits suicide. As a result, countless friends and family are left behind with feelings of loss, guilt, shame and anger.

To help those in need of suicide prevention services, and those left behind, more than 200 Iowans participated in a walk to raise money and awareness on Sept. 23 at Ada Hayden Heritage Park in Ames.

*(Continued on page 6)*



# Quitline to help Iowa Medicaid members stop smoking

**36 percent of 32 million members  
smoke nationwide.**

By Aaron Swanson\*

There is good news for [Iowa Medicaid](#) members who need help quitting tobacco. Beginning Jan. 1, 2007, Medicaid will provide coverage for the nicotine patch, nicotine gum, and a generic prescription medication designed to help smokers quit more easily.

Bonnie Mapes, director of the [Division of Tobacco Use Prevention and Control](#) at the Iowa Department of Public Health (IDPH), says this coverage will have a positive impact on the health of Iowans as well as health care costs. "By providing Medicaid beneficiaries with access to smoking cessation medications, we can impact the rising costs of treating smoking-related illnesses and improve the health of Iowans."

The [Campaign for Tobacco Free Kids](#) reports that about \$1 billion is spent annually in Iowa on health care costs directly related to smoking. Iowa's Medicaid program pays roughly \$301 million each year to cover such costs.

Medicaid members also typically have higher rates of tobacco use compared to others. In 2000, the [Centers for Disease Control and Prevention](#) estimated that of the approximately 32 million people nationwide who received health insurance through Medicaid programs, roughly 36 percent smoked.

To receive this new benefit, Medicaid-eligible individuals must speak with their health care provider, who will then refer the patient

to [Quitline Iowa](#). Funded by IDPH, Quitline Iowa is a toll-free, statewide smoking cessation telephone counseling hotline (1-800-QUIT-NOW). Trained counselors provide callers with information about the health consequences of tobacco use, assistance in making a personalized quit plan, and on-going support.

"Quitline Iowa is extremely pleased to be partnering with Medicaid to provide tobacco cessation services to Medicaid members throughout Iowa" said Dr. John Lowe, director of the [Iowa Tobacco Research Center](#) and Quitline Iowa. "The most effective, evidence-based approach for tobacco cessation treatment is to combine behavioral counseling with cessation medications. Using this approach maximizes the likelihood of a successful quit attempt."

If the patient chooses to enroll in one of Quitline Iowa's ongoing counseling programs, he or she

will be eligible to receive, through the prior approval process, a four-week supply of either the nicotine patch or nicotine gum. Two additional approvals are available with documentation of continued enrollment in Quitline Iowa counseling. The maximum allowed duration of therapy will be 12 weeks per 12-month period. Approvals will only be granted for Medicaid members who are 18 years of age or older. In addition, generic bupropion, a cessation pharmaceutical, will be available without prior authorization.

\* Aaron Swanson is a community health consultant in the IDPH Division of Tobacco Use Prevention and Control.



**Quitline Iowa Program Coordinator Esther Baker (standing) and Training Coordinator Jeanie Kimbel (seated) review the Quitline database in the counselors' office.**



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# Survey to help tailor health literacy Web site

## Public health workers and partners encouraged to respond by Dec. 1

By Joyce Allard\*

Local public health agencies and other partners now have the opportunity to provide input that will help shape a recently launched health literacy Web site. The site is part of *Plain & Simple: A health literacy project for Iowa*. It was **announced** by the Iowa Department of Public Health (IDPH) in October to coincide with Health Literacy Month.

Project Coordinator Don McCormick says the aim of the project is to “support state and local public health workers in their efforts to communicate most effectively with the people they serve – the public.”

The *Plain & Simple Web site* is designed to provide health literacy tools for public health workers and partners across Iowa. McCormick hopes that it will also become a forum for them to learn from one another. The first step, he says, is to find out what people want on the site.

“We want this to be their site,” McCormick said. “If they want

To achieve this goal, the project members are asking public health workers and partners in Iowa to complete a short **survey** on the *Plain & Simple Web site* by Dec. 1. The results of the survey will not only help the project team develop the Web site, but also allow them to assess other needs such as regional training.

The *Plain & Simple* project is funded by the **Wellmark Foundation**. It is coordinated by the Iowa Department of Public Health in cooperation with the **Iowa Association of Local Public Health Agencies (I-ALPHA)** and the **Iowa Public Health Association (IPHA)**.

Renea Segren, executive director of United Community Health Center in Storm Lake and



understanding about health literacy and then to identify the resources needed to address the issue.”

In addition to launching the site, the project will also provide all 101 local public health agencies in Iowa with introductory materials on health literacy and a writers’ guide. These resources are expected in early 2007.

To take the survey or learn more *Plain & Simple: A health literacy project for Iowa*, visit [www.idph.state.ia.us/health\\_literacy](http://www.idph.state.ia.us/health_literacy). For more information or to submit content to the site, write to [dmc-cormi@idph.state.ia.us](mailto:dmc-cormi@idph.state.ia.us) or call 515-281-8960.

\* Joyce Allard is the community education coordinator at IDPH.

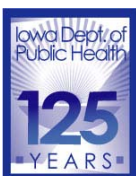
*“This survey is an opportunity for local public health agencies and other partners to explore their understanding about health literacy and then to identify the resources needed to address the issue.”*

*- Renea Segren, IPHA*

information or a certain tool, we’ll do our best to get it. If an agency is making internal documents easier to read or working with local partners on health literacy projects, we

want to tell others about it.”

IPHA member, stressed the importance of this survey to the project. “Health Literacy is an important issue gaining national attention,” she said. “This survey is an opportunity for local public health agencies and other partners to explore their



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# Prepare Iowa provides educational opportunities

By Rob Stewart\*

Have you ever sat in a car for three hours to attend a training session that lasted only one afternoon? If so, Dena Fife, Learning Management System (LMS) coordinator at the Iowa Department of Public Health recommends you take a look at the [Prepare Iowa](#) Web site.

"Prepare Iowa is an exciting resource for Iowa's public health workers," Fife said. "Its courses are accessible 24-7. All are free or very affordable, and available to everyone."

Prepare Iowa, also referred to simply as the LMS, was originally designed as a bioterrorism and emergency response planning preparedness tool. Recently, the LMS has been modified to include training for public health, health care, and laboratory workers.

Public health courses currently available include public health administration, mental health for non-mental health workers, news writing and media relations, and risk communication, just to name a few. In all, Prepare Iowa offers more than 100 courses, as well as direct links to courses offered by the [Federal Emergency Management Agency](#) and other organizations.

Fife says the only expenses incurred from taking a course through the LMS is one's own investment of time and, in some cases, a textbook. Fife was quick to point out, however, that many regional educators in the state have purchased these texts and have them available for loan.

While Prepare Iowa courses are available to the general public, Fife stressed that the target audience is local public health and health care workers. Fife said Prepare

Iowa is reaching that audience.

Fife also pointed out that users of the on-line system aren't necessarily located in Iowa. "Prepare Iowa is used well beyond our state's borders," Fife said. "Currently, there are 6,636 Prepare Iowa users; 3,129 are located in Iowa, while the others represent all 50 states and 13 different countries."

Fife said some users have commented that the assessment required before enrolling in courses does take some time. Looking into this,

Iowa Department of Public Health  
Upper Midwest Center for Public Health Preparedness



**PREPARE IOWA**  
LEARNING MANAGEMENT SYSTEM

*Prepare Iowa is funded by the [Centers for Disease Control and Prevention](#) through the [Cooperative Agreement on Public Health Preparedness and Response for Bioterrorism](#) and the [Cooperative Agreement with the Association of Schools of Public Health](#). Prepare Iowa is managed and facilitated through a partnership between the [Iowa Department of Public Health](#) and the [Upper Midwest Center for Public Health Preparedness](#) at the University of Iowa's College of Public Health.*

however, Fife found a common theme. "When asked what roles they played in their jobs, some people had checked every available box," Fife said. "This is why their assessment took so long." Fife now recommends that users check only those areas most beneficial to their day-to-day duties.

To learn more about Prepare Iowa, or to register for a course, visit [www.prepareiowa.com/Public](http://www.prepareiowa.com/Public), or call Dena Fife at 515-242-5165 or Tim Beachy at 319-353-5955.

\* Rob Stewart is an intern in the Office of Community Education at the Iowa Department of Public Health.



Iowa Department of Public Health

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# State standards to facilitate local efforts

Continued from page 1

standards in terms of how the state can facilitate the local standards and criteria," said Willard. "After the April conference, we'll begin to

think about state level responsibilities in addition to supporting local public health."

Willard added that one of the most exciting aspects of developing the state standards and criteria will be the collaborative effort of the project, which will utilize input from a broad range of local and state public health professionals. "With the wide consultation and small size of the state, our efforts could serve as a model for other states."

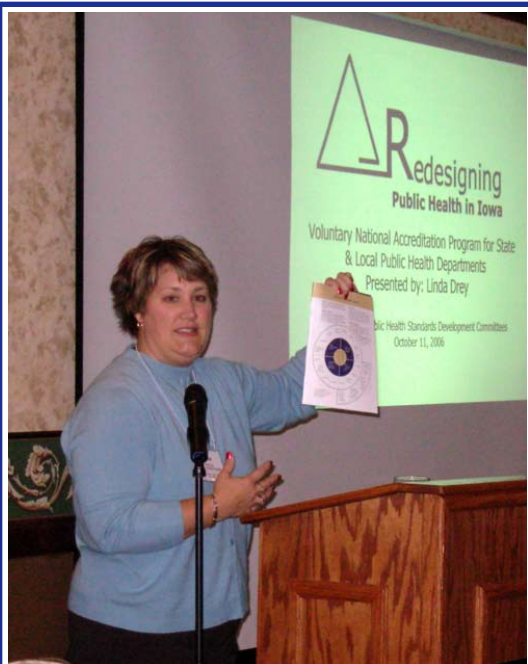
Larry Barker, director of the Scott County Health Department and co-chair of the Workforce Committee, said the committees will work to create criteria that will assist local agencies and partners in meeting criteria. "We'll be asking ourselves what

the state needs to do to support the local agencies," said Barker. "There may be a need for technical assistance from the state, or code changes - just to name a few - to meet local standards."

Barker says the Redesigning Public Health in Iowa project will deal with new challenges as the committees move toward implementation. "One of the biggest challenges will be in educating our staffs, boards of health, boards of supervisors and constituents about the standards," said Barker. "We'll also have to articulate these changes to the state legislature."

To learn more about Redesigning Public Health in Iowa or to read the drafts, visit [www.idph.state.ia.us/rphi](http://www.idph.state.ia.us/rphi).

\* Rob Stewart is an intern in the Office of Community Education at IDPH.



**Linda Drey of the Siouxland District Health Department talks about the Voluntary National Accreditation Program for State and Local Health Departments.**

**Fourth graders gather around HAL, the University of Northern Iowa's "Healthy and Active Lifestyles" mascot, in Lincoln Park on Sept. 21, during the Mayor's Fun Run in downtown Waterloo. The children ran or walked the one-mile route with Mayor Timothy Hurley.**

**Jane Schadle of the IDPH Office for Healthy Communities, said events like these are important to improving and maintaining the health of Iowans. "This is so much more than a walk down Main Street by the Waterloo's fourth graders," said Schadle. "The kids get to run/walk with their mayor and the town gets to celebrate its children. This event showcases the importance of physical activity to their community and beyond."**



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# Funds, awareness raised at suicide prevention walk

Continued from page 1

Each year in cities across America, “Out of the Darkness Community Walks” are held by the [American Foundation for Suicide Prevention](#) (AFSP). This year marks the first time Iowa has hosted such an event.

The walk was organized by a group of eight suicide survivors and sponsored by Des Moines Area Community College (DMACC), the Iowa Department of Public Health (IDPH), Iowa State Bank and Knapp Properties, Inc.

Kathryn Clark, one of the event’s organizers, said she felt compelled to get involved. “Although my sister’s suicide was in 1997, many days I feel I am still on that journey of recovery,” Clark said. “By bringing suicide ‘out of the darkness,’ I hope no other Iowa family will have to face the police or coroner because a loved one chose suicide.”

Guest speakers included: IDPH Director Mary Mincer Hansen; Terri Henkels, director of the Polk County Health Department; and Doug Barcus, a suicide survivor who spoke about the loss of his wife. The Iowa State University Drum Line, which lost one of its own members to suicide several years ago, was on hand to provide the soundtrack

## November 18 Nat’l Survivors of Suicide Day

On National Survivors of Suicide Day, Saturday, Nov. 18, conferences for survivors will take place simultaneously across America. In Iowa, conferences will be held in Cedar Rapids, Des Moines, Humboldt, and Mason City.

The conferences will include a live telecast from the American Foundation for Suicide Prevention headquarters in New York, a panel of survivors from Iowa, and a breakout session during which attendees may discuss how their lives have been impacted by suicide. All conferences will be linked by a live national broadcast by satellite/Web cast from 12:00 to 1:30 p.m. The program will also be broadcast live on the AFSP Web site followed by a live online chat.

For more information about the conference, visit [www.afsp.org](http://www.afsp.org) and click on Surviving Suicide Loss.

and adrenaline for the one-mile walk around the lake at Ada Hayden Heritage Park.

Many of the walkers were suicide survivors – those who have lost a loved one to suicide. Others were individuals who have struggled with depression or other mood disorders. Still others were allies who wish to break the silence about suicide and suicide prevention.

The walk, which is expected to become an annual event, raised \$15,000 that will be used for research, education, and suicide prevention both nationally and locally.

To learn more about suicide prevention, visit [www.afsp.org](http://www.afsp.org).

*\* Ilima Young-Dunn is the program chair for the Human Services program at DMACC.*



After the walk, participants were given balloons to attach a message to loved ones lost or words of encouragement to suicide survivors. The balloons were released to the song “Over the Rainbow.”



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Team Voices

# Bureau of Emergency Medical Services

Recently, Kirk Schmitt, chief of the Bureau of Emergency Medical Services (EMS), spoke about the bureau and its role within the Iowa Department of Public Health and the state.

## What is EMS' mission?

First of all, I'd like to point out that EMS is often an individual's first access to emergency health care. Take a car crash. EMS is often the first on the scene. The bureau's mission is to guarantee that all EMS providers in Iowa meet the minimum standards of training and certification to ensure the public's health and safety.

## What programs/services does EMS provide to accomplish this mission?

We certify individuals working in EMS. We also regulate and monitor the quality of the EMS services and training activities. In Iowa, there are more than 12,500 active EMS providers who staff nearly 900 authorized services.

## Who gets trained and how?

Through the legislative appropriations and fees EMS collects, we provide and distribute funding to the counties to pay for training, continuing education for volunteers who are already certified, and training for new volunteers. Each year, more than 1,100 new providers are trained through our 20 authorized EMS training programs.

## EMS service programs in Iowa are volunteer-based. What challenges does that present?

One challenge is figuring out how volunteers can continue certification when they have the time constraints one would expect from a volunteer. Also, increased demand from federal agencies for disaster and terror-related training requires a lot of time from volunteers. I should point out that while EMS services are 82 percent volunteer-based, this covers only about 10 percent of Iowa's population. The other 18 percent of our services are career EMS providers. They serve about 90 percent of Iowa's population.

## I've heard Iowa's trauma system described as "all-inclusive." Can you explain?

Yes, that's right. If you were in a car crash, as we just discussed, your condition would be evaluated and then you'd be taken to the nearest hospital capable of providing the most appropriate type of care. In Iowa, we have four levels of authorization for hospitals, each defined by the types of resources and capabilities available. The Bureau of EMS administers and coordinates this "all-inclusive," statewide system.

## Who partners with EMS and how have those partnerships been advantageous?

There are too many to mention here, so let me just give you an example. In the past few years, we've given [Safe Kids of Iowa](#) data on the number of pediatric trauma related injuries. This helped them develop programs in EMS communities to improve outcomes. Like many partnerships, we both benefited.

## What other notable successes has EMS had?

I'm especially proud of our work with providing automatic external defibrillators (AEDs) in rural Iowa communities. We've been able to provide

nearly 500 non-age specific defibrillators to rural EMS provider services in the last three years. And, in the last two years, we placed 425 AEDs in rural Iowa community centers, schools, and other public places.

## What's coming up for EMS?

We already provide standards for EMS individuals, services and training programs. Now we've begun developing standards for the EMS systems themselves. This is quite exciting and marks an important point in the development of EMS in Iowa.



*An important function of EMS is to build awareness about the role ambulances and other emergency vehicles play in protecting the public's health.*



Eighty-two percent of

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# TV's "Extreme Makeover" comes to Tama County

## Dedicated environmental health officer recommends radon vent

By Linda Rosenberger\*

Fame didn't go to Lee Wiges' head. When ABC's "Extreme Makeover Home Edition" came to Tama County in September, Wiges, the county's environmental health officer, didn't bend the rules one bit. "This house, as any other new construction, had to be built according to Tama County regulations," Wiges said.

Wiges' work with Extreme Makeover didn't end with insisting the show's contractors follow Tama County's rules. In fact, he was involved in every stage of construction. In early August, Wiges met with representatives from Extreme Makeover to discuss the possibility of building in Tama County. He was there on Sept. 10, when construction began on the Kibe family home, and he performed inspections throughout the project. Wiges visited the site daily until construction was complete.

One of Wiges most important contributions was the addition of a radon vent to the Kibe's new home. According to

the [Environmental Protection Agency](#), radon gas is radioactive and has been identified as a leading cause of lung cancer in the United States, second only to smoking.

Wiges says radon gas can be a problem in all types of houses, new or old. "In Tama County, radon levels test significantly higher than the acceptable level," he said. "The pipe (in the Kibe's new home) will allow the radon gas to vent out of the house. It is an extra expense, but it is less expensive to install during new construction and I advise all new homeowners to install one."

Wiges passion for environmental health began long before Extreme Makeover came to Tama County. Wiges, who recently received the Sanitarian of the Year Award from the [Iowa Environmental Health Association](#), has worked diligently since he began his work with Tama County in 1998. Since then, he has implemented a variety of systems that have made a positive impact on the environmental health of the county.



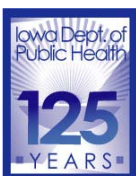
**Sanitarian of the Year, Lee Wiges makes his final inspection of a water system that serves a three bedroom home near Chelsea.**

Wiges is also known for building strong relationships with local realtors, attorneys, contractors and the Department of Natural Resources. For him, good working relationships are keys to advancing the public's awareness of environmental health issues.

"Lee has gained the respect of credible contractors because he is fair to all and communicates his expectations for compliant systems," said Ken Sharp, manager of the [Office of Local Board of Health Technical Assistance](#) at the Iowa Depart-

ment of Public Health. "Lee has a day-to-day conscientiousness about his work that supports the overall good of Tama County's environmental health."

*\* Linda Rosenberger is the director of Tama County Public Health and Home Care.*



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# Web site provides access to funding opportunities

By Rob Stewart\*

This year, the Iowa Department of Public Health (IDPH) [Web site](#) has seen a number of changes. Additions have included new and improved functions for searching for information and, just recently, a calendar for upcoming events. An area of the site that has undergone very little change, however, is still one of the most important, especially if you happen to be looking for funds.

"The IDPH [Grants, Bids & Proposals Web site](#) can be an organization's key to securing the funding they need," said Cheryl Christie, contract administrator at IDPH. "Unfortunately, there are a number of projects that, while they may qualify for funding, may not be aware of the available opportunities through IDPH."

Christie says that, ideally, the IDPH [Bureau of Finance](#) would like to personally notify every program that may be eligible for funding opportunities. In reality, however, she says this would not only be inefficient, but probably unfair. "Regardless of how we alerted people of funding opportunities, it's quite possible we could leave someone out," Christie said. "That's why we use the Web site to post all of the competitive selection documents. It's the only fair way to do it."

Competitive selection documents include the services IDPH wants to fund, eligibility requirements for potential applicants, funding requirements, application requirements, and legal conditions.

While directing applicants to the Web site is the fairest method of notification, Christie says that some technical considerations do bear mention. That is, certain computer programs are necessary to open and view many of the files on the site.

The first of these is a portable document format (PDF) reader, such as Adobe

Acrobat Reader. This application is needed to open the proposal guidance documents, including the Request For Proposal (RFP), Request For Application (RFA), and Request For Bid (RFB) documents. The second program one's computer needs is a file compression utility, such as WinZip or PKZip. Without this kind of tool, the compressed application forms on the site will not open properly.

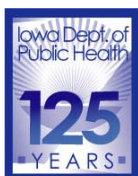
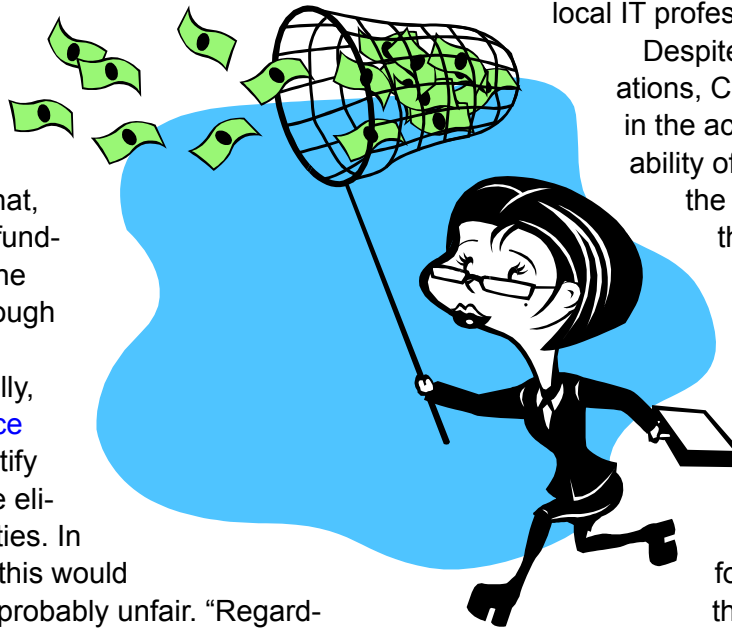
Most PDF and compression utilities can be downloaded for free from the Internet. "Just talk to your local IT professional," Christie says.

Despite these technical considerations, Christie remains confident in the accessibility and maneuverability of the site. She also stressed the importance of visiting the site before and during the application process. "We especially encourage applicants to read the Contractual General Conditions on the site," Christie said. "This is the only place they are posted, and it's important for applicants to be aware of the terms and conditions that will be in effect if their application is successful."

Finally, Christie wanted to stress that this site is updated as soon as a new funding opportunity becomes available. "If you visit regularly, you just might find one that would benefit the people you serve."

For more information on funding opportunities, or to begin the application process, click on the Grants, Bids & Proposals Quick Link on the IDPH Web site at [www.idph.state.ia.us](http://www.idph.state.ia.us).

\* Rob Stewart is an intern in the Office of Community Education at IDPH.



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# Iowan named Federal Employee of the Year

Dr. Nancy Cox, director of the Influenza Division at the Centers for [Disease Control and Prevention](#) (CDC), was recently named Federal Employee of the Year by the Partnership for Public Service.

Cox, a native Iowan raised on a farm in rural Palo Alto County, was honored for her work in helping to prepare the United States and the world for a potential influenza pandemic. Cox graduated from Iowa State University with a bachelor's degree in bacteriology, and received her doctoral degree from the University of Cambridge. She began working at the CDC in 1975.

In addition to this award, Cox has also been honored by *Time* Magazine as one of 2006's "[100 Most Influential People of the Year](#)." Also in 2006, *Newsweek* selected Cox as one of the "[15 People Who Make America Great](#)."



Photo courtesy by Dr. Greg Gray, U. of I.

*(l-r) Dr. Nancy Cox with Trisha Kreman and Dr. Mike Pentella at the University Hygienic Lab.*

## Mumps outbreak cost assessment expected later this year

By Meghan Harris\*

In the spring of 2006, Iowa was the center of the largest U.S. mumps disease outbreak in almost 20 years. Beginning in January and ending in May, the epidemic tested the ability of the state and local health departments to respond to a large-scale, sustained epidemic. Recently, the Centers for Disease Control (CDC) and the Iowa Department of Public Health (IDPH) partnered to examine the costs of the epidemic to Iowa's public health system.

IDPH [Center for Acute Disease Epidemiology \(CADE\) Bureau Chief](#), Pam Deichmann, says cost assessments of large-scale public health responses are important. "They give both the state and local public health agencies concrete validation for the types of support they request, especially financial support."

In August, several epidemiology staff from IDPH and CDC

hosted a series of conference calls with local public health agencies throughout Iowa. Eight counties (Johnson, Black Hawk, Dubuque, Dallas, Warren, Linn, Scott and Polk) were asked to participate based on their experiences and county composition.

Individual staff members from county health departments and IDPH who participated in the mumps response were asked to complete a time assessment survey. These counties and IDPH also completed their own collective cost assessment surveys.

The CDC is working to analyze the study results this fall. A draft document is expected to be published later this year.

\* Meghan Harris is an epidemiologist in CADE.

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Please send your suggestions for future articles, comments on this issue and requests regarding our mailing list to Focus Editor Don McCormick at [focus.editor@idph.state.ia.us](mailto:focus.editor@idph.state.ia.us).