Iowa Department of Public Health

Promoting and Protecting the Health of Iowans.

2002
ANNUAL REPORT









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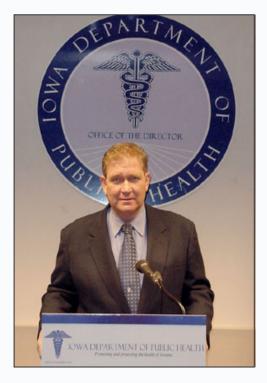
Message from the Director

Last year at this time, we were reeling from the aftermath of Sept. 11, trying to come to grips with the changed reality of American life and its meaning for public health.

We're still trying to come to grips with the new reality, having lost our naiveté about the kind of world in which we live. We recognize that it's brutally violent and the violence can come to anyone, in any place, in any form, from organized mass attacks to random acts of violence by one or two individuals.

Is violence a public health threat like diabetes, cancer and heart disease? Perhaps we have to look at it more and more in those terms. Meanwhile, we are continuing our efforts to coordinate and collaborate with federal, other state and local agencies in preparing for disaster. With the help of the federal money targeted for that purpose, we have added over 25 staff members, held lots of meetings and training sessions in and outside the department, and have plugged our people and resources into statewide and federal efforts to survey, investigate, identify and control any bioterrorist or other chemical attack.

We are also hooking into the National Pharmaceutical Stockpile system, making sure that the EMS units and disaster medical assistance teams around the state are prepared and that we have a system to recruit and deploy health professionals whenever and wherever they are needed



Dr. Stephen C. Gleason, Director

Promoting and protecting the health of lowans.

The Public Health Congress we held last June was a big help in assuring that preparedness is more than just a federal or state effort. We established a way of working together that should serve us well in fulfilling all our public health roles.

That brings me to another effort, initiated last year, designed to make sure that the different levels of public health are working together: it's called the Transformation of Public Health. As you recall, it's a process of developing strategies to strengthen the public health infrastructure, and ultimately, public health services in Iowa. The effort has slowed because of our desire to more exactly meet the needs of local agencies. But Julie McMahon, director of our Division of Community Health, and Tom Newton, interim director of our Division of Health Protection and Environmental Health, have re-ignited the effort within the department and are making plans to do so among our public health colleagues in local public health agencies.

Sept. 11 showed us where our weaknesses lie, but we also have plenty of strengths. One is reflected in the success of reducing kids' use of tobacco – the acknowledged single most important risk factor for many chronic illnesses. The Iowa Youth Tobacco Survey showed a phenomenal 32 percent drop in tobacco use among middle school students between 2000 and 2002 and a 15 percent drop among high school students during that period. The survey showed a strong association between this decrease and the antitobacco messages of JEL, Just Eliminate Lies, the Iowa youth-led effort to get kids to stop smoking.

While we don't want Iowans to "light up," we do want them to "lighten up," which is the name of the statewide movement – led in part by IDPH staffers – to eat and exercise for lasting health. The department's part in this effort originated from a small group of staffers who last year quietly started meeting to see what could be done to slow the epidemic of overweight/obesity. We and our partners, the Iowa Games and the Iowa State Extension Service, have set a goal that includes enrollment of 10,000 Iowans, the logging of 25 million miles of activity and a total weight loss of 25 tons. For more information, see the web site www.lightenupiowa.org.

This annual report will fill you in on all the other things we at the IDPH have been up to in the last year. If Sept. 11 helped us learn who our enemies are, the past year has shown us who are friends are, and we're grateful to have lots of them. To all of you, especially to my colleagues in public health at the IDPH and throughout the state, I thank you for your trust and support. We've come to depend on it.









VISION

Healthy lowans living in a healthy environment

MISSION

To promote and protect the health of lowans

PRINCIPLES

We must be leaders in promoting and protecting the health of lowans.

With a collective sense of social justice, our activities will reflect understanding and acceptance of diversity among lowans. We encourage involvement in our activities by all lowa communities.

We strive to be agents for change, initiating activities, responding to emerging issues, and assuring the highest quality of services we can provide.

We will base our decisions on accurate data, collaborating with organizations within and outside government. We want to arrive at decisions, whenever possible, through consensus.

Finally -- but perhaps most important -- we must focus on our customers, the people of lowa, individually and collectively, effecting outcomes that are clear improvements in their lives.

What the Department of Public Health Does

The Iowa Department of Public Health is the catalyst for promoting and protecting the health of Iowans. It strives to improve the quality of life for all Iowans through access to comprehensive health services focused on the prevention of disease and illness.

By applying scientific knowledge, the department engages public and private partners to secure resources, deliver services, and maintain the public health infrastructure necessary to achieve results.

10 Essential Public Health Services

The Iowa Department of Public Health (IDPH) is focused on offering the following essential services:

- •Monitoring health status; identifying community health problems and hazards.
- •Diagnosing and investigating health problems and hazards in the community.
- •Informing and educating the public about health issues.
- •Mobilizing community partnerships to identify and solve health problems.
- •Developing policies and plans that support individual and community health efforts.
- •Enforcing laws and regulations that protect health and ensure safety.
- •Linking people to needed personal health services, assuring the provision of health care when otherwise unavailable.
- •Assuring a competent public health and private health-care work force.
- •Evaluating effectiveness, accessibility, and quality of individual and population-based health services.
- •Researching for new insights and innovative solutions to health problems.

Iowa's Health Report Card for 2002

The leading health indicators are a set of measures that provide a snapshot of the nation's health. Through national and state-level report cards, the indicators spotlight achievements and challenges in the decade. They link *Healthy People 2010*, the national plan, with *Healthy Iowans 2010*, and in turn, form the building blocks for community health initiatives. The most current data on Iowa's progress is presented under each health indicator.

1. <u>Physical Activity:</u> A. The proportion of adolescents who engage in vigorous physical activity three or more days per week for 20 or more minutes per occasion. B. The proportion of adults who engage regularly, preferably daily, in moderate physical activity for at least 30 minutes per day.

A. Based on the Youth Risk Behavior Survey (YRBS), conducted by the Iowa Department of Education, 74% of students in grades 9-12 met the criteria of vigorous physical activity.

B. The most recent data on adults from the Behavioral Risk Factor Surveillance System (BRFSS) indicate that 26% of adult Iowans had no leisure time exercise or physical activity. This figure is just slightly above the median for the country as a whole.

2. Overweight and Obesity: A. The proportion of children and adolescents who are overweight or obese. B. The proportion of adults who are obese.

A. More information is needed to determine how many Iowa youngsters are overweight or obese. Preliminary measures from the Waterloo schools and Calhoun County suggest that one in three children are overweight. Over 10% of children age 0-5 on the Women, Infants, and Children Program in Iowa are overweight. About 32 percent of students in the YRBS described themselves as slightly or very overweight.

B. According to the BRFSS survey data, 21.5% of adults were obese in 2000, and in 2001, it was 22.5%. Over the last 10 years (1990-2000), there has been a 25% increase in obesity. Among the states, Iowa ranks 39th worst.

3. <u>Tobacco Use:</u> A. Cigarette smoking by adolescents. B. Cigarette smoking by adults.

A. Based on the Iowa Youth Tobacco Survey, 10.9% of students in middle schools used tobacco in the last 30 days—a 32.6% decrease from 2000 when the first survey was conducted. For high school students, the figure is 33.7%, a 14.8% reduction.

B. There has been little change in the percent of adults who smoke, according to the Adult Telephone Survey of Tobacco Use, Opinions, and Related Behaviors for Iowa Adult Residents. The current prevalence rate of smoking among Iowa adults is 23.5%, with a corresponding figure of 23% in 2001.

4. <u>Substance Abuse:</u> A. The proportion of adolescents not using alcohol or any illicit drugs during the past 30 days. B. The proportion of adults using illicit drugs during the past 30 days. C. The proportion of adults engaging in binge drinking of alcoholic beverages during the past month.

The Leading Health Indicators

Physical Activity

Overweight and Obesity

Tobacco Use

Substance Abuse

Responsible Sexual
Rehavior

Mental Health

Injury and Violence

Environmental Quality

Immunization

Access to
Health Care

- A. YRBS data indicated that 48% of Iowa's youth in grades 9-12 did not use alcohol during the past 30 days. For other illicit drugs, 83% did not use marijuana, 96% did not use cocaine, and 97% did not use inhalants such as aerosol paints.
- B. Only treatment admissions data are available.
- C. BRFSS data indicated that 16.2% of Iowans consumed five or more drinks on one occasion in the last 30 days. This percentage is above the national median of 14.8%.
- 5. <u>Responsible Sexual Behavior</u>: A. The proportion of adolescents who abstain from sexual intercourse or use condoms if currently sexually active. B. The proportion of sexually active persons who use condoms.
- A. YRBS data indicated that 57% of adolescents (grades 9-12) abstained from sexual intercourse. If they were sexually active, 59% used condoms.
- B. Not available.
- 6. Mental Health: A. The proportion of adults with recognized depression who receive treatment.
- A. There is no statewide database that separates mental illness diagnoses and treatment.
- 7. Injury and Violence: A. Deaths caused by motor vehicle crashes. B. Homicides.
- A. Since 1999, motor vehicle fatalities have declined. The Iowa Department of Transportation figures showed that in 1990, there were 490 fatalities, compared to 445 in 2000 and 447 in 2001.
- B. Since 1996, homicides, the most reliable indicator of crime, have been declining. The current figure is 1.7 per 100,000 population—one of the lowest rates in the country.
- 8. <u>Environmental Quality</u>: A. The proportion of persons exposed to air that does not meet the U.S. Environmental Protection Agency's health-based standards for ozone. B. The proportion of nonsmokers exposed to environmental tobacco smoke.
- A. The Iowa Department of Natural Resources (DNR) has reported that Iowa has attained all the standards for ozone. There are about five to six days annually when standards are exceeded in different locations across the state.
- B. Data from the Youth Tobacco Survey showed that 63% of middle school and 74% of high school students were exposed to environmental tobacco smoking. Among adults, the Iowa Adult Tobacco Use survey showed that 27% were exposed to cigarette smoke at home and about 26% who worked outside the home in an indoor setting were exposed to tobacco smoke.
- 9. <u>Immunization</u>: A. The proportion of young children who receive all vaccines that have been recommended for universal administration for at least 5 years. B. The proportion of noninstitutionalized adults who are vaccinated annually against influenza and ever vaccinated against pneumococcal disease.
- A. The Centers for Disease Control and Prevention reported that 78.5% of young children are fully immunized—one of the highest percentages in the nation.
- B. According to BRFSS, 26% of Iowans were vaccinated for influenza in the past year and 23% have been vaccinated against pneumococcal disease.
- 10. Access to Health Care: A. The proportion of persons with health insurance. B. The proportion of persons who have a specific source of ongoing care. C. The proportion of pregnant women who begin prenatal care in the first trimester of pregnancy.
- A. The proportion of Iowans, aged 18-64, with health insurance is 90%, according to BRFSS. When Iowans receiving Medicare are counted, 8.1% do not have health insurance. The Current Population Survey, U.S. Census Bureau, has reported that 6% of Iowa's children (48,100) lack coverage.
- B. About 87% of BRFSS respondents said they had one or more than one person they thought of as their personal doctor or health-care provider.
- C. Nearly 88% of pregnant women begin prenatal care in the first trimester of pregnancy. This figure is one of the highest in nation.

Administration

The Division of Administration provides administration and oversight to the programs and activities within the department. The division is responsible for continually reviewing the changing climate of public health and assessing the needs of the department in order to adjust programs, activities and resources to best provide services to Iowans. This includes fiscal management, information management, purchasing, policy development, and federal legislative relations as well as management of vital records, health statistics, state medical examiner, child death review, and professional licensure. The current division director also serves as the chief deputy director of the department.



Jane Colacecchi, Chief Deputy Director, Division Director

Notable events for the Division of Administration FY02

- Reorganization of the department in FY 02 under the Division of Administration allowed for the streamlining of administrative staff.
- The department continues to improve span of control by changing the ratio of employees to supervisors from an average ratio of 8 to 1 to a ratio of 12 to 1.

Administration Programs

Behavioral Risk Factor System Survey (BRFSS): Uses an ongoing monthly telephone survey – financially and technically supported by the U.S. Centers for Disease Control and Prevention – to collect information on health risk behaviors of Iowans age 18 and older. Don Shepherd, 515-281-7221.

Child Death Review Team (CDRT): Reviews the deaths of all Iowans under age 17 in or out of state and of all non-resident children who die in Iowa. Stephanie Pettit, 515-281-3108.

Chronic Renal Disease Program: Provides financial assistance to eligible clients with end-stage renal disease who are receiving dialysis or who have received a kidney transplant. Marilyn Ubaldo, 515-281-4967.

Finance: Manages and coordinates various support services, including accounting, budgeting, contract administration, internal audits, purchasing, etc. Marcia Spangler, 515-281-4955.

Information Management: Provides information-technology support services to internal and external customers. Greg Fay, 515-281-6601.

Office of the State Medical Examiner: Investigates suspicious or unexplained deaths in a system that will operate efficiently and serve the needs of the citizens of Iowa. Julia Goodin, M.D., 515-281-6726.

Professional Licensure: Administers and enforces laws and administrative rules with counsel from the Attorney General's Office. Oversees 18 licensure boards, including Athletic Training, Barbers, Behavioral Science, Chiropractors, Cosmetologists, Dietitians, Hearing Aid Dispensers, Massage Therapy, Mortuary Science, Nursing Home Administrators, Optometry, Physical & Occupational Therapy, Physicians Assistants, Podiatry, Psychology, Respiratory Care, Social Work, Speech Pathology & Audiology. Marge Bledsoe, 515-242-6385.

State Center for Health Statistics: Provides health data for development of health policy at the state and local levels. Jude Igbokwe, 515-281-4068.

Sudden Infant Death Syndrome Program (SIDS): Provides grief support to Iowa families who have experienced the death of children from SIDS. Stephanie Pettit, 515-281-3108.

Vital Records: Gathers and maintains vital event records for public health assessment, supplies information for health research, and documents of life events (births, deaths, and marriages). Jill France, 515-281-6762.

Community Health

The mission of the Division of Community Health is to strengthen Iowa's public health delivery system at the state and local levels. The division promotes and supports development of a public health infrastructure and provides resources to assure that Iowa's public health system has the capacity to perform Core Functions of Public Health, deliver the Essential Public Health Services and to be responsive to current and emerging public health issues. This includes liaison with local boards of health, providing technical assistance regarding the boards' role and responsibilities and facilitating collaboration between the boards and local providers who contract with the department to deliver public health services at the community level.

The Division of Community Health is concerned about access to health care by all Iowans and addresses access through the Office of Minority Health, the Bureau of Health Care Access, as part of all programming and through special projects. In addition, the division assures the delivery of a



Julie McMahon, Division
Director

wide range of personal and population-based services including public health nursing, home care aide services, family health services, oral health care, nutrition services, disease prevention services, immunizations and genetic services.

Notable Events for the Division of Community Health FY02

- Approximately \$770,000 was secured for improving technological capacity of public health agencies in the 89 counties identified as rural counties. An advisory committee representing the rural counties provided leadership in determining how the funds could be used most effectively. Improved technological capacity has resulted in greater efficiencies, improved communications and increased ability for Iowa's rural counties to respond to emergency situations.
- The Office of Minority Health provided mentorship for the University of Northern Iowa Global Health Corp graduate program for a Ford Fellowship recipient, the Des Moines University College of Osteopathic Medicine graduate program in Public Health and undergraduate McNair Scholarship program with the Iowa State University. Community outreach and resources have been developed to encourage and network with minority students to increase interest and provide resources in education and employment in the health and science profession.
- As our nation and Iowa addresses the potential for a terrorist event, division staff provided technical assistance to local boards of health and local providers throughout Iowa as counties develop disaster plans. In addition, staff continue to participate on multiple committees addressing specific areas of the department's plan.
- The WIC Program purchased 27,000 hard cover books (about fruits) for one- and two-year-olds in the WIC Program. The staff worked with the Department of Education to develop parent education materials addressing the importance of reading to their children.
- •As follow-up to an ASTDD on-site review and as part of the Bureau of Oral Health's continued leadership in advancing oral health in Iowa, the bureau held an Oral Health Summit in April. Over 125 participants developed strategies to raise the importance of oral health as a public health initiative and move Iowa forward in addressing the goals of *Healthy Iowans 2010*.

Community Health Programs

Abstinence Only Education Project: Attempts to reduce the incidence of teen pregnancy and STDs through abstinence-only until marriage education. Janet Beaman, 515-281-3052.

Barriers to Prenatal Care Project: Conducts multidisciplinary research to identify causes of infant deaths in Iowa. Kim Piper, 515-281-6466.

Center for Genetics (Birth Defects Institute): Administers programs that provide a system for genetic health-care services in Iowa. Tonya Diehn, 515-281-7584.

Center for Local Public Health Services and Health Improvement: Established in January, 2002 to strengthen the public health delivery system in Iowa at both the state and local level. This will be achieved through strengthening the capacity of Iowa's local boards of health who, through local health departments, public health agencies, programs and services, strive to create healthy people and communities in Iowa

The center will promote and support development of a public health infrastructure at local and state level to assure that Iowa's public health system has the capacity to be responsive to current and emerging public health issues. Local boards of health, public health nursing, and Home Care Aide are located within the center. Julie McMahon, 515-281-3104.

Center for Rural Health and Primary Care: Facilitates and advocates for access to quality health services for Iowans in rural and medically under-served areas. Doreen Chamberlin, 515-281-8517.

Child and Adolescent Reporting System (CAReS): Provides local child health contractors with a system to collect client information, document client records, and develop plans to address clients' needs. IDPH analyzes and uses the information to meet federal reporting requirements, program planning and evaluation, and quality assurance evaluation. Maggie O'Rourke, 515-281-7721.

Child Health Center Dental Treatment Programs- Continues to provide technical assistance and consultation by Bureau of Oral Health (BOH) staff to the dental components of the 26 Maternal and Child Health Centers funded by IDPH. Dental screening, dental health education, counseling, and referral for dental care of women and children are provided as part of their comprehensive prenatal services and child health services. Basic dental services were made available by referral to local dentists who were reimbursed on a fee-for-service basis. Eligibility is limited to low-income women and children enrolled in the maternal and child health centers. Julie McMahon, 515-281-3104.

Child Health Specialty Clinics (CHSC): Offers a variety of direct services and care coordination to children with special health care needs and their families. Jeffrey Lobas, M.D., 319-356-1118.

Chore Program: Provides services to people who, due to incapacity or illness, are unable to perform home-maintenance functions. Julie McMahon, 515-281-3104.

Decision-Making Assistance Program: Assists pregnant minors in making informed decisions concerning their pregnancies. Carol Hinton, 515-281-6924.

Dental Cards: Emphasizes the importance of regular dental check-ups and encourages families to seek regular dental care. Dental card templates continue to be made available for download from the IDPH web site. These cards serve as a friendly reminder to families, schools, and all primary care providers of the importance of having regularly scheduled dental visits. Julie McMahon, 515-281-3104.

Dental Care for Persons with Disabilities: Serves low-income children and young adults with developmental disabilities, up to age 21. It is jointly sponsored by the University of Iowa and the Iowa Department of Public Health. Treatment is made available through the University Hospital School Dental Clinic and a network of 13 private dental offices throughout the state. Julie McMahon, 515-281-3104.

Dental Sealant Programs: Supported by the state, school-based dental sealant programs are currently being conducted throughout the state. Children in grades 2, 3 and 4 are eligible to participate, with an emphasis on children having difficulty accessing dental care. Programs include schools in Davenport (University of Iowa), Waterloo (Black Hawk Co. Child Health), Washington County (Washington County PHN Services), Ottumwa (American Home Findings) and Palo Alto County (Upper Des Moines Opportunity, Inc.). Julie McMahon, 515-281-3104.

Disease Prevention Specialists: Works with local public health agencies, health-care providers and the public to provide education, technical assistance and disease intervention in all areas of communicable disease control. James Goodrich, 515-242-5149.

Early ACCESS: Assists families with young children and providers of local public health to work together in identifying, coordinating, and providing needed services and resources that will help the infant or toddler grow and develop. Carrie Fitzgerald, 515-242-6167.

Early and Periodic Screening, Diagnosis and Treatment Program (EPSDT): Prevents chronic illness through examinations, identification of conditions and intervention early enough to provide effective treatment and ensure that eligible children in Medicaid receive a screening examination. Kathleen Luloff, 515-281-7613.

Empowerment Areas: In a cooperative effort among the departments of Public Health, Human Services, Education, and other state agencies, reduces duplication of services to families and children, and identifies ways of coordinating funding to provide the most services with the available money. Goal is to create local plans that enable children to be healthy and ready to learn by age five. Jo Hinrichs, 712-297-7218.

Expanded Maternal Serum Alpha-fetoprotein Screening Program (MSAFP): Identifies pregnancies in which the fetus may be at risk for having a neural tube defect or other abnormality. Tonya Diehn, 515-281-7584.

Family Planning Program: Promotes the health of people of reproductive age and families by providing access to family planning and reproductive services. Kathy Widelski, 515-281-4907.

Flouride Mouthrinse Program - Targets children in schools located in communities with fluoride deficient public water sources and is known as the *CATCH A SMILE* school fluoride mouth rinse program. Grades one through nine are eligible to participate in the weekly rinse program. In addition to rinse activities, three elementary grades receive dental floss and toothbrushes for in-school dry brushing and flossing. The the IDPH provides the dental supplies for this school administered program and training as required for students, school nurses, teachers and administrators. Julie McMahon, 515-281-3104.

Food Stamp Nutrition Education Plan: Provides nutrition education to food-stamp eligible families through grants to local nutrition coalitions and targeted social marketing. Doris Montgomery, 515-281-7359.

Healthy Child Care Iowa (HCCI): Provides training, technical assistance, and consultation to child-care providers to improve health and safety in child-care environments. Sally Clausen, 515-281-6071.

Healthy Families Line: Supplies families with information on various health care issues and programs. 1-800-369-2229.

Healthy Opportunities for Parents to Experience Success (HOPES): Develops healthy, safe, strong and self-sufficient families by assessing a family's assets for their capacity to help their children develop to an optimum level of school readiness when age appropriate. Promotes optimal child health and development through family education and support. Jo Hinrichs, 712-297-7218.

HIV/AIDS Program: Monitors the HIV/AIDS epidemic in Iowa and coordinates statewide HIV/AIDS prevention and care programs. Patricia Young, 515-242-5838.

Home Care Aide Program (HCA): Helps prevent inappropriate institutionalization of patients and preserve families by providing supportive services or trained and supervised paraprofessionals. Julie McMahon 515-281-3104.

Immunization: Provides and promotes vaccines for Iowa's children, adolescents, and adults. Marnell Kretschmer, 515-281-4917.

Iowa Access to Baby and Child Dentistry (ABCD)- Designed to improve access to dental care by low-income children. Iowa ABCD pilot programs target ages zero to five. They are designed to identify and ease barriers to early preventive care through infrastructure-building, care coordination and community-building with local dentists to provide a dental home to low-income children. Julie McMahon, 515-281-3104.

Iowa Birth Defects Registry (IBDR): Provides statewide surveillance and monitoring of birth defects, conducts research to identify genetic and environmental risk factors, and promotes birth defects prevention educational activities. Tonya Diehn, 515-281-7584.

Iowa Covering Kids Project: Assists low-income, uninsured children to obtain health care. Sonni Vierling, 515-281-4516.

Iowa Medicare Rural Hospital Flexibility Program/Critical Access Hospitals: Assures availability of primary care services, emergency services and limited acute inpatient services in rural areas. Designates hospitals as "necessary providers" for the purposes of Critical Access Hospital designation. Marvin Firch, 515-281-4808.

Iowa Neonatal Metabolic Screening Program (INMSP): Identifies newborns with selected metabolic disorders so that early diagnosis and treatment can be started to avert metabolic crisis, neurological and developmental damage, and death. Tonya Diehn, 515-281-7584.

Iowa Nutrition Education Network: Encourages Iowans to increase the variety of foods in their diets; increase consumption of fruits, vegetables, and grains; choose a diet lower in fat; and increase their physical activity. Network Coordinator, Doris Montgomery, 515-281-7359; Senior Nutrition, Carlene Russell, 515-281-7119; Marketing Specialist, Carol Voss, 515-242-5566.

Iowa Review of Family Assets (IRFA): Offers a computerized self-assessment of family strengths by parents of newborns. Parents receive information on community programs. Carrie Fitzgerald 515-242-6167.

Local Boards of Health: Provides technical assistance and education to local boards of health in performing core public health functions and providing essential public health services. Julie McMahon, 515-281-3104.

Maternal and Child Health Block Grant (Title V): Collaborates in a state-wide system that provides access to community-based, culturally competent, coordinated, perinatal services. Jane Borst, 515-281-4911.

Maternal Health Programs: Provides a maternal health database, OB Indigent program and Iowa Review of Family Services, which helps new families gain access to needed advice, education, support and professional services. Jane Borst, 515-281-4911.

Minority Health Advisory Task Force: Provides recommendations on health care access and service delivery to the diverse populations within the state. Focuses on eliminating racial and ethnic health disparities by 2010. Janice Edmunds-Wells, 515-281-4904.

Neuromuscular and Related Genetic Disease Program: Provides comprehensive health services statewide to individuals and families with a variety of neuromuscular disorders and performs educational outreach. Tonya Diehn, 515-281-7584.

Newborn Hearing Screening System: Tests, on a voluntary basis, the hearing of newborns before leaving the hospital or birthing center. Denise Ramsey, 515-242-5639.

New Iowans Outreach: Supports local public health agencies and communities assisting immigrants in accessing health services. Carlos Macias, 515-281-4094.

Physicians Care for Children Program: Provides diagnoses and treatment to acutely ill children. Maggie O'Rourke, 515-281-7721.

Prescription Drugs Program: Provides prescription drugs at no cost for people who have sexually transmitted diseases, tuberculosis infection and tuberculosis disease. James Goodrich, 515-242-5149.

Primary Care Office: Promotes expansion of health-care resources for vulnerable populations and those living in areas with no access to primary care. Activities include primary care access analysis and intervention planning, shortage area designation assistance through the Office of Shortage Designations, project development and grant application assistance, education and advocacy for network development for primary care systems. Carl Kulczyk, 515-281-7223.

PRIMECARRE – **Primary Care Recruitment and Retention Endeavor:** Helps recruit and retain health-care providers in rural and under-served areas through loan repayment. Patricia Kehoe, 515-281-5069.

Public Health Nursing Program: Helps prevent illness, promote health and wellness, and prevent or reduce inappropriate institutionalization of low-income and elderly persons. Julie McMahon, 515-281-3104.

Refugee Health Activities: Assures that refugees in Iowa have health assessments and are assisted in developing relationships with primary care providers. Van Phabmixay, 515-281-8810.

Regional Genetic Consultation Service (RGCS): Provides comprehensive genetic health-care services and educational outreach statewide. Tonya Diehn, 515-281-7584.

School-Based Youth Services Program: Provides for the development of centers in or near schools to enable community-service providers to deliver services in coordination with schools to help children succeed. Carol Hinton, 515-281-6924.

Sexually Transmitted Diseases Prevention Program (STDs): Works to provide an effective system of services and information to prevent STDs and ensure comprehensive, high-quality STD-related health services. John Katz, 515-281-4936.

Special Supplemental Nutrition Program for Women, Infants, and Children (WIC): Provides nutrition education, supplemental foods, breast-feeding promotion and support, and referrals for health services to low-income women and their children. Judy Solberg, 515-281-3713.

State Office of Rural Health: Works in conjunction with the state-wide advisory committee to improve access to care for Iowans in rural areas. Provides consultation to communities and health-care providers on community health care needs assessments and planning, availability of grants and programs, development of certified rural health clinics, grant writing and technical assistance and provision of health data and information. Kathy Williams, 515-281-7224.

Statewide Perinatal Care Program: Reduces mortality and morbidity of infants by conducting site visits and providing technical assistance to hospital and medical staff. Kim Piper, 515-281-6466.

Tuberculosis Control Program: Provides support to four regional TB coalitions, close contact investigations, outreach activities reimbursement, free medication, and professional education and consultation. Allan Lynch, 515-281-7504.

Volunteer Health Care Provider Program: Indemnifies health-care volunteers wanting to provide free medical services but hindered because of the cost of malpractice coverage in free clinics. Doreen Chamberlin, 515-281-8517.

Women's Health Services: Coordinates women's health activities. Janet Peterson, 515-242-6388.

Health Promotion, Prevention, and Addictive Behaviors

The Division of Health Promotion, Prevention, and Addictive Behaviors provides a wide variety of programs that focus on the development of a healthy lifestyle. The division consists of the following programs: arthritis, asthma, brain injury, breast and cervical cancer early detection, cardiovascular risk reduction, comprehensive cancer control, diabetes, disability prevention, gambling prevention and treatment, medical substitute decision making board, prevalence studies within the jail population, substance abuse prevention and treatment, and regulation for substance abuse treatment. The division also provides administrative support for the Governor's Advisory Council on Brain Injury.



Janet Zwick. Division Director

Division staff collects data and information regarding disability, addictive behaviors, incidence of asthma, arthritis and diabetes

and health risks found within the state and disseminates that information to interested parties. One program administers a grant for breast and cervical cancer screening and diagnosis, while another coordinates a cardiovascular research study with uninsured and underinsured female participants age 40 - 64. Staff members provide technical assistance to an assortment of public and private entities. The Division of Health Promotion, Prevention, and Addictive Behaviors works cooperatively with other divisions within the department, other state agencies and community based programs that address life style issues.

Notable Events for the Division of Health Promotion, Prevention, and Addictive Behaviors FY02

- •The division was awarded a State Incentive Grant through the Center for Substance Abuse Prevention. This grant will target 12 to 17-year-olds for prevention services to reduce the use of alcohol, tobacco and marijuana.
- •Established the Iowa Consortium for Comprehensive Cancer Control. The consortium's purpose is to develop and implement a state plan to improve cancer prevention and control efforts in Iowa. Coordinated by a steering committee, under the guidance of the Iowa Department of Public Health and the American Cancer Society, Midwest Division, the Cancer Consortium is comprised of over 100 people, representing approximately 50 entities.
- •The Brain Injury Program received a federal grant that will support continued operation of the pre-discharge planning and peer support programs.

Health Promotion, Prevention & Addictive Behaviors Programs

Anatomical Gift Awareness and Transplantation Fund: Supports activities to increases public awareness of organ and tissue donation. Allen VanderLinden, 515-281-4636.

Arrestee Drug Abuse Monitoring Project (ADAM): Through quarterly interviews of new arrestees in Polk and Woodbury Counties, compares the self-reported drug usage, arrest and treatment history of arrestees to the drug contents of their urine samples. This project provides information on socioeconomics, drug treatment, mental health institutionalization, and incarceration history, and drug and alcohol history and usage. Diana Nicholls Blomme, 515-281-3347.

Asthma Control Program: Reduces asthma by planning and implementing scientific health-behavior models, effective management and education. It also is establishing a statewide surveillance system. Andrea Hoffman, 515-281-4779.

Breast and Cervical Cancer Early Detection Program: Provides no or low-cost breast and cervical cancer screenings, diagnostic testing and case management services for women who meet age and income eligibility criteria. Jill Myers-Geadelmann, 515-242-6067.

Cardiovascular Health Program (CVH): Works to reduce Iowans' heart attack and stroke risk through community-based screening, education, and intervention that promotes behavior change. This program also administers obesity/overweight contracts. Arlene Johnson, 515-281-7097.

Community Coalition Grants: Supports coalition development to prevent alcohol, tobacco, and other illegal drug use. Pam Deichmann, 515-281-3763.

Comprehensive Cancer Control: Takes an integrated and coordinated approach to reducing cancer incidence, morbidity, and mortality through the development of a state plan that addresses prevention, early detection, treatment, quality of life, and research. Lorrie Graaf, 515-281-7739.

Comprehensive Substance Abuse Prevention Contracts: Provides community-based, primary prevention services for alcohol, tobacco, and other drug abuse to all 99 counties. Prevention specialists provide assessment, program development, communication, program delivery, evaluation, record keeping and consultation services. Pam Deichmann, 515-281-3763, or Cindy Schroder, 515-281-7080.

County Prevention Contracts: Provides substance-abuse prevention, intervention and/or aftercare through contracts available to county governments. Allen VanderLinden, 515-281-4636.

Diabetes Control Program (DCP): Strives to reduce the impact of diabetes on Iowans by certifying outpatient diabetes-education programs and collaborating with the Iowa Diabetes Network for health professional education, public awareness, and community intervention. Deb Van Den Berghe, 515-242-6204.

Disability Prevention Program: Works to reduce the incidence and severity of secondary conditions among people with disabilities. Roger Chapman, 515-281-6646.

Drug and Violence Prevention County Contracts: Provide community-based alcohol, tobacco, and other drug and violence prevention services using the principal of effectiveness. Pam Deichmann, 515-281-3763.

5+5 Program: Encourages Iowans to eat healthier (5+ fruits and veggies/day) and become physically active (5 days/week) to reduce chronic disease. A program manual provides guidelines for communities and a list of resources and organizations. Carol Voss, 515-242-6516, and Tim Lane, 515-281-7833.

Gambling Treatment Program: Provides education, referral, and counseling for persons affected directly or indirectly by problem gambling. Frank Biagioli, 515-281-8802, or 1-800-BETS OFF (1-800-238-7633).

Iowa Advisory Council on Brain Injuries: Studies the needs of people with brain injuries. Provides advocacy for such people and their families. Promotes injury prevention. Thomas Brown, 515-281-6283.

Iowa Arthritis Program: Provides a statewide, comprehensive approach to arthritis and conducts intervention and awareness activities for professional and public audiences. Laurene Hendricks, 515-281-5675.

Iowa Communications Network (ICN): Makes the IDPH more accessible to local health workers and others interested in public health through videoconferencing. The department conducts 200 to 300 videoconferences each year. Tim Lane, 515-281-7833.

Iowa Substance Abuse Information Center (ISAIC): Provides state-wide resources and information about alcohol, tobacco, other drugs, gambling and health. 1-866-242-4111.

Law Enforcement Education Partnerships (LEEP): Develop partnerships between law enforcement agencies and community organizations to address violence and substance-abuse prevention in their communities. Pam Deichmann, 515-281-3763.

Mentoring Program: Supports mentoring projects using standards of effective practice. A match is required. Pam Deichmann, 515-281-3763.

State Incentive Grant (SIG): Provides funding for community-based programs to reduce alcohol, tobacco, and marijuana use in 12 to 17-year-olds. Two important features of the SIG program are the implementation of Model Programs and the development of coalition capacity and effectiveness for social norm change. Deb Synhorst, 515-281-4404, or Marilyn Wulff, 515-281-4816.

Substance Abuse Aftercare/Continuing Care: Provides service to people who have completed primary treatment. Provides for patient support group participation and ongoing individual treatment sessions (based on need) for up to one year following primary treatment. G. Dean Austin, 515-242-6514.

Substance Abuse Treatment: Provides substance-abuse treatment to Iowans in all 99 counties through a block grant, state appropriations to IDPH, and Medicaid. Includes outpatient to residential 24-hour care. A screening, assessment/evaluation is conducted to determine the best level of care. G. Dean Austin, 515-242-6514.

Substance Abuse Treatment Program Licensing: Conducts on-site licensure inspections when new applications are submitted or before licenses are renewed. Substance abuse treatment, assessment and evaluation (OWI services) are required by state law to obtain a license issued by the IDPH, Commission on Substance Abuse. G. Dean Austin, 515-242-6514.

Substitute Medical Decision-Making Boards: Makes decisions for patients in need of medical care, but who cannot provide their own informed consent because they do not understand the nature and consequences of the proposed care, and who do not have other substitute decision-makers available. Roger Chapman, 515-281-6646.

Training: Provides state-wide training on alcohol, tobacco, and other drugs for health professionals and the public. Joe Kane, 515-309-3315.

Treatment Demand and Needs Assessment Project: Conducted an adult household survey based on needs-assessment interviews that identified gaps in the treatment system where such needs could be addressed. The main goals were to develop estimates of the substance-use treatment needs of adult Iowans. Janet Zwick, 515-281-4417.

Well-Integrated Screening and Evaluation for Women Across the Nation Program (WISEWOMAN): Conducts research to test the impact of nutrition and physical activity behavior modification intervention on women 40 to 64 years of age. Jill Myers Geadelmann, 515-242-6067.

Health Protection & Environmental Health

The Division of Health Protection and Environmental Health contains a wide variety of programs with a primary purpose of ensuring a safe and healthy environment for Iowans. The division consists of the following program areas: Bureau of Lead Poisoning Prevention, Bureau of Toxicology and Environmental Health Services, Bureau of Radiological Health, and the Office of Local Technical Assistance. Division programs within these four areas provide both educational and regulatory functions.

Division staff collects data and information regarding the environmental health risks found within the state and disseminates that information to interested parties. Staff members provide technical assistance to an assortment of public and private entities, including but not limited to: local health departments and boards of health, business owners, homeowners, environmental health practitioners and others. The Division of Health Protection and



Tom Newton, Interim Division Director

Environmental Health additionally works cooperatively with other divisions within the department, as well as other state agencies addressing environmental health concerns.

Notable Events for the Division of Health Protection and Environmental Health FY02

- •Numerous epidemiological and toxicological consultations were provided to local boards of health, communities, state agencies, and the citizens of Iowa. In addition to providing disease information, staff has assisted designees from local boards of health in recognizing levels of exposure, spatial geographic areas affected by environmental exposure, and potential remedies. All 99 counties received consultative services either in person or through electronic/phone consultations.
- •Approximately \$200,000 secured for "Building Environmental Health Services Capacity in State and Local Departments of Health" through the Centers for Disease Control and Prevention. The funding will allow for continued training and environmental health infrastructure building through mini-grants to local health departments.
- •Division staff played an integral role in providing technical assistance on chemical, nuclear, and bio-terrorism in the wake of the September 11, 2001 tragedies. Staff members continue to assist in planning for a terrorist event and assessing the training needs of local public health and emergency management providers.

Health Protection & Environmental Health Programs

Adult Blood Lead Epidemiology and Surveillance (ABLES): Collects results of all blood-lead testing on Iowans 16 and older and provides information to those who have high blood-lead levels. Rita Gergely, 515-242-6340.

Childhood Lead Poisoning Prevention: Collects results of all blood-lead testing on Iowans under age 16. Tests to identify lead-poisoned children, reduces lead hazards in older homes and provides medical case management to lead-poisoned people. Rita Gergely, 515-242-6340.

Consumer Product Safety: Conducts recall inspections and special investigations at the request of the U.S. Consumer Product Safety Commission. Debbi Cooper, 515-242-6337.

Drinking Water Treatment Unit Registration: Assures third party testing of manufacturer claims for treatment units. Includes annual registration of all certified units. Bruce Middleton, 515-281-4680.

Fluoridation of Community Water Systems and Water Treatment: Monitors for appropriate levels of fluoridation in community water systems to reduce tooth decay. Mike Magnant, 515-281-8722.

Grade "A" Milk Certification: Assures the dairy industry and consumers that products produced locally or received from other states have been produced and manufactured in compliance with federal requirements. Kurt Rueber, 515-281-3773.

Hazardous Substances Emergency Events Surveillance System: Reduces state-wide mortality and morbidity among employees, emergency responders, and the general public from accidental chemical releases and spills. Debbi Cooper, 515-242-6337.

Hazardous Waste Site Health Assessment: Provides assessments of hazardous waste sites to determine health implications. Charles Barton, 515-281-6881.

Indoor Air Quality: Provides consultation and assistance to the public and professionals on indoor air quality. Investigates indoor air-quality complaints, and collects information on a case by case basis. Rick Welke, 515-281-4928.

Iowa Statewide Poison Control Center (ISPCC): Using a statewide 24-hour emergency hotline, provides immediate poison-prevention information and treatment guidance to the public and health-care professionals. Call toll-free, 800-222-1222.

Lead Professional Certification: Provides training and certification of lead professionals, including sampling technicians, inspector/risk-assessors, lead-abatement workers, and lead-abatement contractors. Rita Gergely, 515-242-6340.

Migrant Labor Camp Inspections: Issues permits and provides routine inspection certifications. Tom Schlife, 515-281-5719.

PCB (Poly Chlorinated Biphenal) Inspection: Inspects PCB sites for the U.S. Environmental Protection Agency. Provides technical assistance to the public and industry. Tom Schlife, 515-281-5719.

Pesticide Exposure Surveillance: Keeps record of people exposed to pesticides to reduce statewide morbidity and mortality among employees, emergency responders, and the public due to the release of pesticides. Karen Buechler, 515-281-6596.

Plumbing Code: Maintains and revises the Iowa Plumbing Code, which outlines the minimum standards for plumbing in Iowa cities. Interprets the code as necessary and provides technical assistance to designers, inspectors, trade professionals, and the public. Mike Magnant, 515-281-8722.

Pre-Renovation Notification : Requires notification of lead-based paint before renovation, remodeling or repainting in homes built before 1978. Rita Gergely, 515-242-6340.

Public Swimming Pools and Spas: Regulates water quality and safety of public pools and spas. Contracts inspections to local officials. Mike Magnant, 515-281-8722.

Radiation-Producing Equipment Inspection: Ensures the safety of health-care recipients by ensuring the proper operation of x-ray machines. Issues permits to practice to operators of radiation-producing equipment, including mammography machines. Don Flater, 515-281-3478.

Radioactive Materials Licensing Program: Ensures that people applying for new or renewal radioactive materials licenses have the facilities, equipment, and procedures to protect employees and the public from exposure to ionizing radiation. Don Flater, 515-281-3478.

Radon: Certifies persons and certifies and inspects businesses that perform radon measurements and radon mitigation. Provides radon assistance and information through the Radon Hotline, promotes community coalitions, and collects radon measurement and mitigation results. Rick Welke, 515-281-4928.

Risk Assessments for Superfund Sites: Conducts baseline risk-assessments for Superfund sites in the state under contract with the U.S. Environmental Protection Agency (EPA). Charles Barton, 515-281-6881

Tattoo Artists and Establishment Permit Programs: Provides procedures to ensure that tattoos are provided in a safe and sanitary manner. Talisa Butts, 515-281-8074.

Technical Assistance to Boards of Health: Increases the effectiveness of local environmental health programs by providing technical assistance on the essential services of public health. This includes assistance on employment practices, training, technical programs, and other areas as needed. Ken Sharp, 515-281-7462.

Toxicology: Addresses environment-related public health questions, including those on mercury dental amalgam, soy, hog lots, and pressure-treated lumber. Assists the Iowa Statewide Poison Control Center on technical questions. Provides aid to physicians when diagnosing and treating patients who may have been poisoned. Charles Barton, 515-281-6881.

Communications, Planning, & Personnel

The Office of Communications, Planning and Personnel (OCPP) is responsible for coordinating the department's communications, administrative rules promulgation and strategic planning. It also administers the Certificate of Need program and is responsible for the department's internal and external communications to market the department and public health.

The office is also charged with coordination of the agency's annual reports and other publications and administration of a document-review system to pre-publication review of grant proposals, requests for proposals and all other materials meant for external consumption.



Tom Carney, Director

Notable Events for the Office of Communications, Planning and Personnel for FY02

- In September 2001, Iowa had its first case of West Nile Virus in a crow from Scott County. The communications office worked closely with the Center for Acute Disease Epidemiology to develop public messages regarding the illness. People were advised to use repellant with DEET and remove standing water around their homes. The two units worked again in the Spring of 2002, along with the State Hygienic Laboratory at the University of Iowa and the Iowa State University College of Veterinary Medicine, to develop and promote messages about collection of dead birds for West Nile virus sampling.
- In October 2001, Anthrax deaths in Florida, New York, and the District of Columbia following the attack on the World Trade Center caused intense interest by the general public and the media. Initial media reports said that the anthrax used in the incidents may be somehow related to strains of anthrax that originated in Iowa. This prompted intense levels of public concern in Iowa which led to several IDPH news conferences. The communications office worked with the Office of Governor Tom Vilsack, Iowa Department of Emergency Management and Iowa Department of General Services to develop fact sheets and messages on the relative safety of handling mail and packages.
- The Iowa Department of Public Health became a partner with the University of Iowa College of Public Health, Center for Public Health Practice on two federal grants. Both grants address the training and education needs of the public health work force at the state and local levels. The Upper Midwest Public Health Training Center (UMPHTC) and the Iowa Center for Public Health Preparedness (ICPHP) are the two center grants. These training and education activities positively impact the public health workforce and provide opportunities for additional professional growth and development. These centers are in line with national efforts on workforce development and public health professional competencies.
- The IDPH started an internship section on its web site in January 2002. This has helped increase IDPH's visibility as a source for undergraduate and graduate students in Iowa to obtain a quality internship experience. Student demand is far greater than IDPH's ability to provide positions. Lack of space at IDPH is one reason for inability to have more students each year. In FY02, over 30 students completed an academic internship at the department.

Communications, Planning, & Personnel Programs

Abuse Education Review Panel: Amended by the 2001 General Assembly, Iowa Code Section 135.11 authorizes the director of the Iowa Department of Public Health to establish an abuse education review panel. The purpose of the Abuse Education Review Panel is to review and approve curricula for mandatory reporters of child and dependent adult abuse who are not covered under a licensing or examining board or whose licensing or examining board does not mandate continuing education in this issue area. Mary Anderson, 515-242-6333.

Barn Raising/Governor's Conference on Public Health: Organized by the IDPH and its partners, the Governor's Conference on Public Health brings together the largest group of leaders from across the state who have an impact on the health of their communities. These participants build healthy communities. Barn raising symbolizes this collective effort. The first conference was held in 1997 and is held every two years. Plans for Barn Raising IV, to be held on August 14-15, 2003 at Drake University, are underway. Louise Lex, Ph.D., 515-281-4348.

Certificate of Need (CON): Ensures through a proposal review process that growth and changes in the health-care system occur in an orderly, cost-effective manner, and that the system is efficient. Barb Nervig, 515-281-4344.

Communications: Does internal and external communications and marketing; document review; graphics and publications. Tom Carney, 515-281-7174.

Compliance with the Accountable Government Act: Comprised of members who provide a coordination role for the respective AGA key components, a department steering committee oversees the implementation of the Accountable Government Act. The chief deputy director is chair of the committee and executive team coordinator. Key components are health data resources; strategic plan; health enterprise plan; division plans/department operational plan; individual performance plans; service contracting; budgeting and auditing; performance measures, and education. In preparation for AGA, department management and staff have sought to increase their understanding of requirements and expectations of AGA through training and inservice. Drafts of enterprise and strategic plans have already been submitted to the Department of Management. Steve Boal, 281-4517.

Healthy Iowans 2010: Coordinated by the IDPH, Iowa's health plan *Healthy Iowans 2010* is a companion to the national *Healthy People 2010* report. It is a comprehensive set of health goals developed by more than 500 individuals and over 200 groups. This road map is being followed, and action steps are being tracked at the end of each year to assure that there are advances in the health status of Iowans, regardless of their age, race, ethnicity, gender, or disability. Louise Lex, Ph.D., 515-281-4348.

Personnel: Handles hiring, promotion, benefits and pay roll. Mary Sams, 515-281-6222.

Reception: Has first contact with customers as part of the office's public information effort. Greets visitors, answers incoming phone calls, routes calls to the appropriate person/division/department and answers general questions. Schedules and maintains conference rooms, receives e-mails from the webmaster and routes these to the appropriate person/division/department. Helps update the Iowa Administrative Code. Dena Fife, 515-281-7689.

Scope of Practice Review Committee Process: Evaluates changes in the regulation of health professionals objectively. The committee determines whether health professionals are competent to provide the proposed care while protecting and ensuring the public's health and safety. Mary Anderson, 515-242-6333.

Training and Educational Outreach: Assists with training coordination and systems development, provides educational opportunities, and facilitates the placement of public health and health-science students in internships or practicums or quality work experiences at the department. Dawn Gentsch, 515-281-8585.

Disease Epidemiology & Disaster Preparedness

The Office of Disease Epidemiology and Disaster Preparedness (ODEDP) was established in October 2001 incorporating the Bureau of EMS (EMS), the Center for Acute Disease Epidemiology (CADE) and creating a *new* Center for Disaster Operations and Response (CDOR). The mission of the ODEDP is to serve in a leadership capacity for the development and implementation of an integrated system of health and public health services in preparedness for and response to disaster/terrorism incidents, outbreaks of infectious disease and other public health threats and emergencies.



Mary Jones, Director

Notable Events for the Center for Acute Disease Epidemiology FY02

- CADE, working in cooperation with the department's communications office, the Iowa Department of Agriculture and Land Stewardship, the University Hygienic Laboratory, Iowa State University, and local health departments, developed and implemented protocols and procedures for the surveillance of West Nile Virus in Iowa. To date (FY03), 44 human cases, 113 birds, 1,039 horses, 17 chickens, and 8 mosquito pools have tested positive for West Nile Virus in Iowa.
 In the aftermath of the events of 9/11 and the anthrax mailings that followed in the fall of 2001,
- CADE provided consultation to health-care providers, public health professionals, and the general public on anthrax-related issues. CADE also developed educational materials and other information for a number of audiences, and hosted educational seminars, some over the Iowa Communications Network (ICN). Finally, CADE participated in the writing of the Centers for Disease Control and Prevention and Health Resource Service Administration cooperative agreements, and has participated in many activities since regarding bioterrorism preparedness and response efforts.

Notable Events for the Center for Disaster Operations and Response FY02

• Secured \$11.5 million for Public Health Preparedness and Response for Bioterrorism through the Centers for Disease Control and Prevention (CDC). The funding will upgrade state and local public health preparedness for and response to bio-terrorism, outbreaks of infectious disease, and other public health threats and emergencies. This program will increase preparedness and planning for bioterrorism for the state and local public health; increase epidemiology and surveillance for state and local public health; increase laboratory capacity; provide risk communication and dissemination of health information; and provide training and education to state and local public health, hospitals, and emergency medical services.

- Secured \$1.3 million for Hospital Bioterrorism Preparedness and Response through Health Resources and Service Administration (HRSA). The funding will provide for identification and implementation of bioterrorism preparedness plans and protocols for hospitals and emergency medical services systems.
- The first Public Health Congress was held June 18-19 2002, with 98 of 99 local public health departments participating. The Congress took action on how distribution of local public health funding resources from the CDC cooperative agreement Public Health Preparedness and Response for Bioterrorism would be accomplished and proposed methods for regionalization for system building.
- The Iowa Health Disaster Council was established by Dr. Stephen Gleason, director of IDPH to serve as an information-sharing venue regarding health and public health preparedness and response activities including the CDC and HRSA cooperative agreements, the National Pharmaceutical Stockpile (NPS), and the Iowa-Disaster Medical Assistance Teams (IA-DMAT).
- The CDC Subcommittee was established to actively participate in the development and implementation of local and state public health preparedness and response planning/operational procedures for bioterrorism, other outbreaks of infectious disease, and other public health threats and emergencies.
- The HRSA Subcommittee was established to actively participate in the development and implementation of hospital and EMS preparedness and response planning/operational procedures for statewide and regional hospital disaster/terrorism activities.
- The National Pharmaceutical Stockpile (NPS) Subcommittee was established to actively engage in the development and implementation of the NPS plan for Iowa. The plan allows for Iowa officials to request, receive, organize, distribute, dispense and recover a 12-hour Push Package and the Vendor Managed Inventory as needed during or immediately following an act of biological or chemical terrorism when local and statewide resources have been overwhelmed or exhausted.
- The IA-DMAT Subcommittee was established to actively engage in the development and implementation of a statewide plan and operational procedures for mobilization and deployment of volunteer medical care, public health practitioners/services, and other disaster experts to or near the disaster site when local resources have been overburdened or exhausted.

Notable Events for the Bureau of Emergency Medical Services FY02

- The Iowa Code Chapter 140 "Emergency Medical Services System Development Grants Fund" rules were adopted and filed by the Board of Health on May 8, 2002 and endorsed by the EMS Advisory Council April 10, 2002 to eliminate duplicate funding cycles, applications and contracts associated with various funding streams.
- The Iowa Emergency Medical Services (EMS) System Development Project awarded 95 Iowa counties to assess, plan, implement and enhance local EMS initiatives.
- A grant writing workshop, attended by representatives from 67 counties, was held May 3, 2002, to educate county EMS associations on revisions in funding process and to orient them to the new Request for Proposal process.
- Approximately 6,000 booster seats were provided by Ford Motor Company and distributed statewide. This program was developed to increase parents and caregivers' awareness about the importance of properly restraining children in motor vehicles.
- The EMSC Program partnered with the Iowa/Nebraska Kiwanis Club to provide pediatric equipment bags to 25 authorized services. Another 75 bags will be distributed in 2003.

Disease Epidemiology & Disaster Preparedness Programs

Bureau of Emergency Medical Services (EMS) 1-800-SAVE-EMS: Designated by code, the IDPH is the lead agency responsible for the development, implementation, coordination and evaluation of Iowa's EMS system. The Iowa EMS system serves the public to reduce suffering, disability, death, and costs from injury and illness through a commitment to excellence in emergency medical services. Tim Peterson, M.D., 515-242-5090; Ray Jones, 515-725-0319.

Trauma: The goal of Iowa's Trauma System is to match the patient's medical needs (injuries) to the existing medical resources. Trauma care represents a continuum of care that is best represented by an integrated system extending from prevention to acute care and through rehabilitation. This requires cooperation of multidisciplinary trauma care providers in each phase of care. A systems approach to trauma care recognizes this continuum of care and reduces costs, disability, and death associated with traumatic injury.

EMSC: The Iowa Emergency Medical Services for Children project is part of a federal initiative aimed to improve the level of pediatric emergency care. The EMSC recognizes that caring for children presents a special challenge to all providers. Emergency medical services is broadly defined as everything from injury prevention and assessing emergency services through out-of-hospital providers, emergency room, hospital and rehabilitative services.

Center for Acute Disease Epidemiology (CADE): Responsible for communicable disease surveillance in Iowa. Specific programs include influenza surveillance, food-borne illness surveillance, West Nile virus surveillance, and hepatitis C surveillance. CADE also provides consultation on rabies, vaccine preventable diseases, antibiotic resistance, and infection control. Patricia Quinlisk, M.D., 515-281-4941; Cortland Lohff, M.D., 515-281-4269; Disease Reporting Hotline (24/7): 1-800-362-2736.

Center for Disaster Operations and Response (CDOR) Responsible for the development and implementation of emergency plans and operating procedures for the department while ensuring integration into Iowa's Homeland Security and Emergency Plan. Additionally, CDOR is responsible for the department's Emergency Coordination Center (CC), Continuity of Operation's Plan, Iowa Disaster Medical Assistance Teams (IA-DMAT), the National Pharmaceutical Stockpile (NPS) and building evacuation for the department. Additionally, CDOR is responsible for administering the Centers for Disease Control and Prevention (CDC) and the Health Resources and Services Administration (HRSA) bioterrorism cooperative agreements. Mary Jones, 515-281-4355, or Public Health Emergency Notification Hotline (24/7): 1-866-834-9671.

Tobacco Use Prevention and Control

The mission of the Division of Tobacco Use Prevention and Control is to curb tobacco use and to assist the state in the enforcement of underage tobacco laws. This division works at the county level to establish local coalitions to provide tobacco education programs to youth and pregnant women.



JEL members march on the campus of ISU during the Youth Tobacco Summit.

Counter-marketing strategies and advertisements have been developed to educate the public on the harmful effects of tobacco. This division also assists local law enforcement as they perform compliance checks on retail outlets

Janet Zwick serves as Interim Director for this division and is also the Division Director of Health Promotion, Prevention, and Addictive Behaviors



Tobacco Use Prevention & Control Programs

JEL (**Just Eliminate Lies**): Coordinates activities of Iowa youth united to fight industry efforts that try to manipulate them into using tobacco. The goals of JEL are to change the general social attitude towards tobacco use, raise awareness through education, counter-market the tobacco industry's efforts, protect the rights of all from secondhand smoke, inspire and support cessation among the young tobacco user, and progress into a new age of informed decisions. Randi Huffman, 515-281-4299.

Community Partnerships: Provides funds to counties to prevent tobacco use among youth and help pregnant women quit. Community Partnerships establish coalitions among businesses and organizations to promote anti-tobacco programs. Sixty-two Community Partnerships work with the division to deliver programs to 94 of Iowa's 99 counties. Aaron Swanson, 515-281-5491.

Counter-Marketing: Airs ads acquired from other states as well as ads produced locally, using JEL students as on-air talent to reach the target audience of youth and pregnant women. Ads were used on radio stations that teens listened to, as well as TV and billboards. Mall ads were also used to reach pregnant women and youth. Keven Arrowsmith, 515-281-4768.

Enforcement: With the Iowa Alcoholic Beverages Division (ABD), monitors tobacco retailers to ensure tobacco is not sold to underage Iowans and that underage tobacco possession laws are more strictly enforced by law-enforcement agencies. Janet Zwick, 515-281-4417.

CDC Grants: Provide tobacco-use prevention programs to populations other than pregnant women and youth. Grantees must use evidence-based materials and programs recommended by the CDC. Don Owens, 515-281-6251.

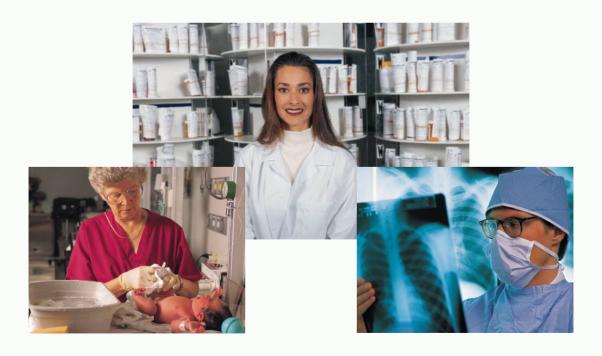
The Four Examining Boards

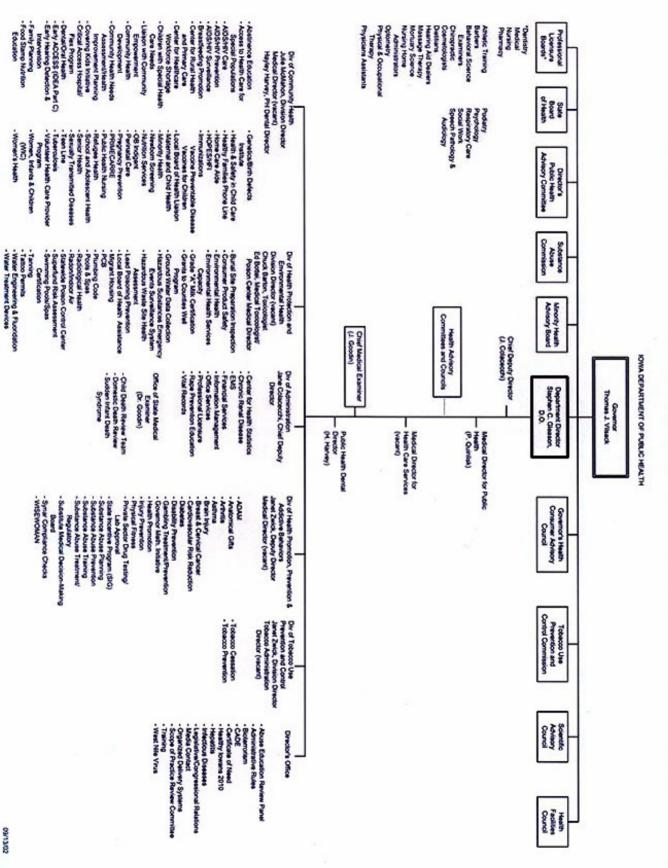
Iowa Board of Dental Examiners: Regulates dentistry to ensure professional, competent and safe dental care. Connie Price, 515-281-5157.

Iowa Board of Medical Examiners: Ensures that applicants for medical licensure are qualified, and once licensed, practice in a manner meeting licensure requirements. Ann Mowery, 515-242-6039.

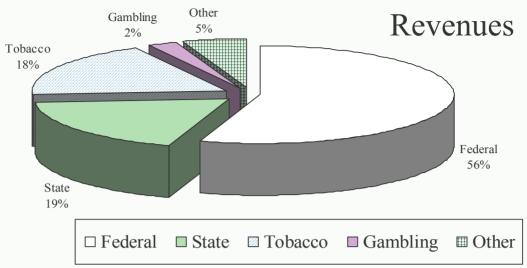
Iowa Board of Nursing Examiners: Develops standards for nursing, issuing and renewing licenses to practice, conducting complaint investigations and hearings, and approving continuing-education providers and offerings. Lorinda Inman, 515-281-3256.

Iowa Board of Pharmacy Examiners: Establishes and enforces minimum standards for pharmacy practice and the pharmacy industry. Lloyd Jessen, 515-242-5139.

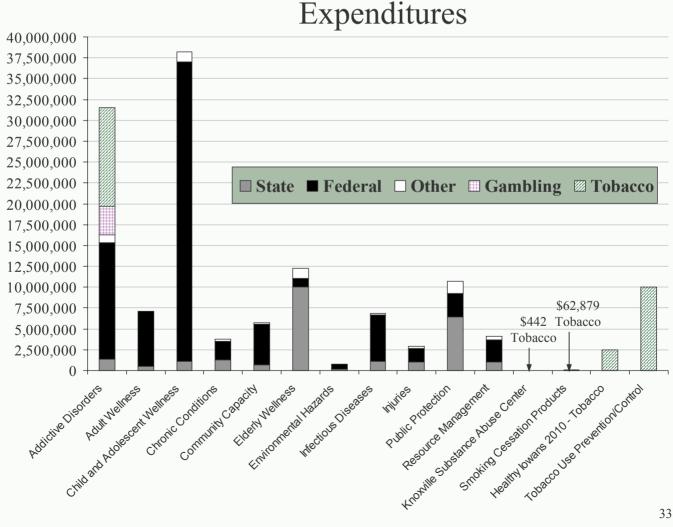




FY2002 Revenue and Expenditures



^{*} Note: Other pertains to monies received from private entities, foundations, and state agency fees.



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Key Information

Iowa Department of Public Health
Lucas State Office Building
321 E. 12th Street
Des Moines, Iowa 50319-0075
Phone 515-281-5787/Fax 515-281-4958
Deaf Relay 800-735-2942

Internet http://www.idph.state.ia.us

Department Director Stephen Gleason, D.O. Phone 515-281-5605/Fax 515-281-4958

IRIS Immunization Registry 800-374-3059

Vaccine for Children 800-831-6293

Disease Reporting 800-362-2736

Emergency Medical Services (800-SAVE-EMS) 800-728-3367

Women, Infants and Children (WIC) 800-532-1579

Genetic Counselors (Iowa City) 800-260-2065

Maternal and Child Health 800-383-3826

Teen Line 800-443-8336

Radon 800-383-5992

Substance Abuse Clearing House (Brochures) 866-242-4111

Information, Referral or Crisis
Drug and Alcohol Helpline
866-242-4111

Lead Poisoning Prevention 800-972-2026

Healthy Families 800-369-2229

Gambling Treatment Program 1-800-BETS OFF 1-800-238-7633

Cedar Rapids Clearinghouse (Brochures) 888-398-9696