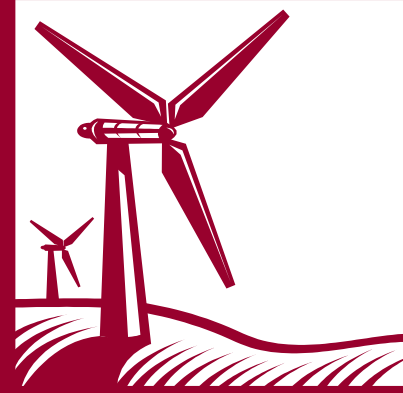


ACCESS UP *date*

June 2009



The ACCESS Update is a bi-monthly information source from the Iowa Department of Public Health: Bureau of Health Care Access.

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Burden of Farm Injury in Rural Iowa

By: Kathy Leinenkugel, Coordinator

Iowa Department of Public Health Occupational Safety and Health Surveillance Program

Agriculture is the most hazardous industry in the United States, with a rate of 27.3 deaths per 100,000 workers reported for 2007 by the Census of Fatal Occupational Injuries (CFOI). That compares to a rate of 3.7 deaths per 100,000 workers in all industries. Data collected by the Iowa Department of Public Health Occupational Safety and Health Surveillance Program (IDPH OSHSP) and its partner, the University of Iowa Fatality Assessment and Control Evaluation program (IA FACE), shows



that over the past 5 years, an average of 87 workers died each year due to work-related injuries in Iowa. Roughly 30 percent of those work-related deaths were related to agriculture, accounting for 27 of 90 deaths in 2008 and 24 of 89 deaths in 2007.

Information collected by the Great Plains Center for Agricultural Health lists the most common fatal farm accident as tractor overturns, usually involving older tractors that were not equipped with a Rollover Protective Structure or ROPS. Often these accidents occurred when someone was using the tractor to perform utility duties around the farm rather than doing field work. Other common types of farm accidents are linked to tractor, ATV, and machinery runovers or collisions with motor vehicles. The remainder involves entanglements or crush injuries by farm equipment, and injuries involving livestock, grain handling, or a variety of other situations.

There are additional farm-related deaths that are not included in the IA FACE/OSHSP numbers because the deaths involved adults doing activities that didn't meet the definition of a work-related death or involved children. Examples of injuries and fatalities not included in occupational data records would be rural Iowans hurt while mowing the yard or cutting firewood or accidents involving a family member or friend killed by farm equipment or farm animals. In 2008, we know of at least 6 traumatic

Continued on page 3

Iowa Legislative Update

Health Care Access State Fiscal Year 2010

By Doreen Chamberlin, Bureau Chief, Bureau of Health Care Access

This year's legislative session was extremely active but rewarding for the Health Care Access staff. New legislation enables us to move forward with some existing initiatives as well as address new health care workforce possibilities. In a critically tight budget year, the legislature had to make cuts to some programs, but was able to retain funding for others with the help of federal stimulus money. The bills that had an impact on the Bureau of Health Care Access programs included:

The Health and Human Services Appropriations bill, House File 811, provides funding for staff including the opportunity to fill a position that was frozen in 2009 administering the PRIMECARRE State Loan Repayment Program and the National Rural Recruitment and Retention Network initiative. This bill also funds Public Health Modernization, the Health and Long-Term Care Access Advisory Council, the Direct Care Worker Advisory Council, and the Direct Care Worker leadership and education initiative. It continues funding for the Mental Health Professional Shortage Area program consisting of a psychologist internship program and a stipend program for psychiatrists who serve as medical directors for Community Mental Health Centers and hospital based psychiatric in-patient units. Two other mental health programs receiving funding include the state's two post graduate mental health training programs for physician assistants and advanced registered nurse practitioners. The remaining two programs address the health care safety net. They include the Community Health Center incubator program which aids in starting up new community health centers to serve uninsured and underserved Iowans and the Iowa Collaborative Safety Net Provider Network which works to identify common unmet health care needs that can be addressed cooperatively within Iowa's health care safety net.

The Health Care Reform bill, Senate File 389, established seven separate initiatives which included: Legislative Health Care Coverage Commission, Adult Children Health Care Coverage, Children's Health Care, expansion of the Volunteer Health Care Provider Program, Health Care Workforce Support Initiatives and Fund Division, Gifts and Reporting of Sanctions Division, and Health Care Transparency.

The Bureau of Health Care Access is directly impacted by the Health Care Workforce Support Initiatives and Fund. While no new funds were appropriated, the legislative language establishes a framework for engaging in collaborative strategies for addressing workforce shortages through recruitment, retention and the development of the health care workforce.

Senate File 377 was written to provide the Iowa Department of Public Health the authority to accept prescription drugs from the Iowa Drug Donation Repository program in preparation for or during a disaster situation. This change in the program would help the health of low income Iowans or Iowa victims in the event of a state of emergency or disaster. Program oversight for the contract with the state's repository program is housed within the Bureau of Health Care Access. The Bureau will be working with the Center for Disaster Operations and Response to amend rules allowing the Department to take on this new capability.

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Burden of Farm Injury in Rural Iowa Cont.

Continued from page 1

deaths of children that occurred in rural Iowa from June to October due to the child being struck by vehicles including ATVs, tractors, skid loaders, or pick-ups. The youngest child was 15 months old, and the oldest was 8 years old.

The full extent of rural and agricultural injury and illness is difficult to establish due to fragmented surveillance projects across the state run by a variety of programs and agencies. Farm-related (agricultural) injuries seen by a health professional are required to be reported to IDPH, currently by using a paper report or through the Iowa Trauma Registry, but often the reporting is not done or is incomplete. Although Iowa Code includes language requiring "identifying the amount and severity of agricultural-related injuries and diseases in the state, identifying causal factors associated with agricultural-related injuries and diseases, and indicating the effectiveness of intervention programs designed to reduce injuries and diseases," it remains difficult to capture the data needed to meet these goals."

The OSHSP is working with other program areas within the health department, including the Center for Rural Health and Primary Care, Health and Vital Statistics, Emergency Medical Services, the Center for Acute Disease Epidemiology, and Disability Prevention to develop a coordinated surveillance system within IDPH of all agriculturally related injuries in Iowa as well as continuing to network with other programs across the state to raise awareness, identify trends, and develop strategies for injury prevention in rural Iowa.

My key message to rural Iowans is plan to be safe; then practice safety every day. You don't want a family member or friend to become a statistic marking a farm injury or death.

Kathy Leinenkugel at (515) 281-4930 or kleinenk@idph.state.ia.us

Not getting our newsletter or want to un-subscribe?

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join-HCA@lists.ia.gov

To un-subscribe to the Access Update send a blank e-mail message to:

leave-HCA@lists.ia.gov

You may receive an email back confirming your subscription choice. To confirm, you need to reply to the confirmation message.

Iowa Legislative Update Cont.

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The full legislative report submitted to the Center for Rural Health and Primary Care Advisory Committee can be found at http://www.idph.state.ia.us/hpcdp/rural_health_primary_care.asp. An overall department update can be found on the legislative page by the Department's legislative liaison Lynh Patterson at http://www.idph.state.ia.us/adper/legislative_updates.asp.

LINKS, RESOURCES & MAPS

Agricultural & Occupational Safety Information:

Iowa Department of Public Health - What we do: http://www.idph.state.ia.us/what_we_do.asp

IDPH OSHSP: http://www.idph.state.ia.us/strategic_plan/common/pdf/programs_profiles/Occupational_Health.pdf

IA FACE Program: <http://www.public-health.uiowa.edu/face/index.html>

Great Plains Center for Agricultural Health <http://www.public-health.uiowa.edu/GPCAH/index.html>

Iowa's Center for Agricultural Safety & Health <http://www.public-health.uiowa.edu/ICASH/>

National Children's Center for Rural and Agricultural Health and Safety <http://www.marshfieldclinic.org/NCCRAHS/>

Farm Safety 4 Just Kids: <http://www.fs4jk.org>

AgriSafe Network: <http://www.agrisafe.org>

Iowa State University Extension Service: <http://www.abe.iastate.edu/safety/farm-safety-publications.html>

National Ag Safety Database: <http://www.nasdonline.org/index.html>

Farm-related injury report form for IDPH: http://www.idph.state.ia.us/ems/common/pdf/farm_injury_report_form.pdf

The following publications are available from the Centers for Medicare & Medicaid Services Medicare Learning Network:

The revised Medicare Disproportionate Share Hospital Fact Sheet (April 2009), which provides information about methods to qualify for the Medicare Disproportionate Share Hospital (DSH) adjustment; Medicare Prescription Drug, Improvement, and Modernization Act of 2003 and Deficit Reduction Act of 2005 provisions that impact Medicare DSHs; number of beds in hospital determination; and Medicare DSH payment adjustment formulas, can be accessed at http://www.cms.hhs.gov/MLNProducts/downloads/2009_mdsh.pdf.

Worth Noting

Thomas R. Frieden, MD, MPH, begins role as CDC Director

Dr. Frieden, M.D., M.P.H., became the 16th director of the Centers for Disease Control and Prevention (CDC) and administrator for the Agency for Toxic Substances and Disease Registry (ATSDR). He was named director of CDC by the White House and the Department of Health and Human Services. Dr. Frieden was the director of the New York City (NYC) Health Department since 2002. He is an infectious disease expert and has lead initiatives that support wellness and prevention. "I'm excited about the opportunity to lead CDC. The depth and breadth of knowledge at CDC is enormous." A bio of Dr. Frieden is available at <http://www.cdc.gov/about/leadership/leaders/Frieden.htm>, and a high-resolution photo is available at <http://www.cdc.gov/media/subtopic/images.htm>.



Distance Learning for Rural Health Organizations

State Flex programs, rural hospital contacts, rural networks, and others involved in rural health care across the country can be recipients of this distance-learning educational opportunity found at the Rural Health Research Center Rural Hospital Education and Training Gateway Web site:

<http://www.ruralcenter.org/?id=rhe>.

Rural Health Research Centers

The Federal Office of Rural Health Policy (ORPH) funds research activities at six rural health research centers, as well as research conducted by individual investigators at other institutions. The [Rural Health Research Gateway website](#) provides summaries of current and completed research projects and related publications. A recent working paper is [Why Are Fewer Hospitals in the Delivery Business?](#) It examines the declining availability of hospital-based obstetric services in rural areas from the mid-1980s to the early 2000s. This website can offer insight to current rural health topics and issues.

The American Recovery and Reinvestment Act of 2009

Dollar-for-dollar the ARRA was the largest investment in rural health in our country's history. There has been much planning activity to prepare for the funding opportunities. The National Rural Health Association (NRHA) developed an [ARRA guide booklet](#) to assist communities.

Worth Noting Cont.

Grant Opportunities for Iowa Rural Communities

The HRSA Office of Rural Health Policy (ORHP) offers community-based grants. Since 2005, eleven communities have been awarded grant funding. Recently awards for the FY 2009 Rural Health Outreach Grants were announced and congratulations go to Mercy Health Network – North Iowa Regional Hospitals. The eight critical access hospital project partners will deliver “Yes We Can: Families Working Together to Prevent Diabetes” project to their extensive rural area. Laura Zwiefel, BSN, director of nursing at Hancock County Memorial Hospital is the contact representative for the project, and will be attending the August ORPH All Grantee Meeting in Washington, DC.

The Rural Network Development Planning Grant Program guidelines are to be released in July. The Network Development Planning Grant Program provides one year of funding to rural organizations that seek to develop a formal integrated health care network. Applicants should not have a significant history of collaboration. There will be a TA Conference call on August 18. Contact Mary Collier to register at mcollier@hrsa.gov.

Since 2005, rural communities in Iowa have received over two million grant dollars to initiate health, wellness, and prevention programs. In FY 2008, Henry County Soldiers and Sailors Memorial Hospital and Clarke County Hospital each were awarded \$75,000 for Small Health Care Provider Quality Improvement Grant Program projects.

The Iowa State Office of Rural Health works with grant writers and communities to develop, endorse, and support these grant applications. To learn more including location and grantees from Iowa, go to the sites below:

<http://ruralhealth.hrsa.gov/funding/>

http://www.idph.state.ia.us/hpcdp/rural_health.asp

ACCESS Update Reader Survey Results

We are grateful to the 118 participants in the recent newsletter survey. Your input was valuable and based on the results we will be making a few changes in the newsletter including: making it more concise and accurate, including information from local program and organizations, and reflecting the favored topics. Results included:

- 98% read the newsletter on-line vs. hardcopy
- 58% redistribute the newsletter to others
- 89% felt it was valuable to their job and 50% felt it valuable to their communities
- 95% want promising practices and innovation articles
- 83% want research and statistical articles
- 94% appreciate the Legislative Update
- 58% can spend 4-8 minutes reading the newsletter
- 96% appreciate the photos and links

The highest rated topic areas for articles are 1) Current or hot topics, 2) Quality, 3) Federal/state guidelines, and 4) Current medical clinical trends

A couple of things to note: the newsletter is in PDF format which ensures minimal size for downloading purposes. We include the Staff Directory with each issue because our complete contact information is not available on the IDPH website. Feel free to contact Gloria Vermie or Katie Jerkins regarding the newsletter. We welcome your requests and thoughts.

Program Announcements

FLEX NEWS

The Iowa Board of Medicine created a draft policy statement <http://medicalboard.iowa.gov/DraftInterventionalPainPolicy4309-1.html>. The statement relates to Certified Nurse Anesthetists (CRNAs) practicing in pain clinics. Some critical access hospital administrators approached FLEX staff at the Annual FLEX Conference and expressed concern regarding retention of CRNAs if they are not allowed to continue practicing in pain clinics and the hardship to patients resulting from pain clinics closing and travel distance required to obtain pain management care.

The Iowa Board of Medicine presented the policy draft to the Legislature's Administrative Rules Review Committee. Legal counsel for CRNAs argued the drafting of the policy should have followed the rule making process. The Iowa Hospital Association reported the association is opposed to the draft policy. Two legislators voiced their concerns on the negative impact to access for populations living in rural areas. More to come in future newsletters.

In April, U.S. Department of Health and Human Services/CMS revised the critical access hospital fact sheet. The four page resource concisely outlines the legislation and activity of CAHs. <http://www.cms.hhs.gov/mlnproducts/downloads/critaccesshospfctsht.pdf>.

Please update your records: Kate Payne's phone number has changed to 515-331-2402 and fax has changed to 515-331-2597.

PRIMARY CARE OFFICE NEWS

Shortage Designations

Among other things, the Primary Care Office staff have the responsibility in Iowa for analyzing areas and population groups for shortages of primary care, mental health care, and dental providers. Using HRSA guidelines, when an area is deemed to have a shortage of providers the PCO requests a shortage designation from the HRSA Shortage Designation Branch. Once designated, areas must be re-designated every four years. Such designations provide communities access to a variety of recruitment and retention tools and other resources. The shortage designation process hinges on the knowledge garnered from Iowa health providers and health administrators. We need you to inform the PCO of physician staffing changes and to confirm information on staffing which could lend the area to being designated as a health professional shortage area (HPSA). If you receive a call from Lloyd Burnside, Shortage Designation Staff Specialist, or Bobbi Buckner Bentz, PCO Director, please assist us in determining whether or not your area could be designated as a HPSA, and learning about the resources available to HPSAs.

National Health Service Corps: Additional Funding

The American Recovery and Reinvestment Act (ARRA) of 2009 provided the National Health Service Corps (NHSC) with additional funds that will effectively double the force of NHSC clinicians practicing in designated HPSAs. Participation in NHSC is a two-step process: 1) facilities must apply to be an approved NHSC site for scholars and loan repayers and 2) clinicians must apply for loan repayment and scholarship.

The application for clinicians interested in receiving loan repayment became available June 2nd on the NHSC website at: <http://nhsc.hrsa.gov/loanrepayment/>. The application review process will be on-going until approximately September 2010, when the ARRA funds are anticipated to be expended. Funds will be dispersed on a first-come first-

Program Announcements Cont.

serve basis and will also be prioritized by HPSA score. As Iowa's HPSA scores are lower than many areas of the country, it is important clinicians apply as soon as possible.

Employment sites interested in becoming eligible NHSC sites can learn more and download the Recruitment and Retention Assistance Application at: <http://nhsc.hrsa.gov/communities/apply.htm>.

SHIP NEWS

The April, May, and June expenditures are due on or before August 7, 2009. Please contact Katie Jerkins if your hospital is having a hard time spending all of their 08-09 funds. At this time we have not received the 09-10 SHIP notice of grant award, this should arrive in late August or early September. We will notify all SHIP contract administrators as soon as we hear anything. For more information regarding the SHIP program please visit http://www.idph.state.ia.us/hpcdp/ship_program.asp.

Please update your records: Katie Jerkin's phone number has changed to 515-233-2831 and fax has changed to 515-233-2545.

SORH NEWS

Good news! This year the Health Resources and Services Administration (HRSA), Office of Rural Health Policy (ORHP), State Office of Rural Health (SORH) program was re-appropriated through the federal Omnibus Act. The 50 SORH programs across the nation were pleased with the reappropriation effort which was supported by Iowa Senator Harkin. Based on the federal amount appropriated, the Iowa SORH grant award was revised upward to include an additional \$17,000. The additional amount will allow small funding pots to support: 1) provider and hospital staff training, 2) projects with partners to ensure efforts with workforce and physician data services, and 3) support for state conferences. While the SORH program was re-appropriated this year, it has not been legislatively "reauthorized". National and state organizations are encouraging congressional representatives to now reauthorize the SORH program which was originated in 1997. Reauthorization will allow continued stable funding to support rural health issues and the ability for long-term planning. Congress requires a 3:1 dollar state match. The match amount shows a serious commitment to rural health efforts by Iowa government.

The SORH is working with the Iowa Rural Health Association (IRHA) to help fund and plan educational webinars. The webinars are a response to a member survey and the decrease in travel for education secondary to budget restrictions felt by many organizations and health providers. The webinars will target topics and information vital to rural health providers and medical and community groups. The webinars will be at no-cost to participants. For more information about the webinars, go to the IRHA site at <http://www.iaruralhealth.org>.

WORKFORCE NEWS

If you haven't visited the Web site for Iowa's Area Health Education Centers lately, it's time to take another look! Iowa's AHECs have been very busy ramping up efforts to assist communities with building their local health professions workforce. Take a look at <http://www.iowaahcec.org> and keep checking back! Things are moving right along, and you can expect ongoing developments.

Calendar and Events

Positive Approaches to Challenging Behaviors

July 9 – 10, 2009

Clear Lake, IA

Registration: Meredith Field meredith-field@uiowa.edu or 319-384-6797

Listen & Learn - Iowa Collaborative Safety Net Provider Network Update

Iowa Rural Health Association (IRHA)

July 16, 2009

Registration: <http://www.iaruralhealth.org>

Melissa Primus at 515-282-8192

Des Moines YMCA Camp

July 26 – August 1, 2009

Boone, IA

<http://lungia.org/asthma/camp.cfm>

Agri Wellness Annual Conference Behavioral Health & Safety Conference

August 3-5, 2009

Sioux Fall Convention Center & Sheraton Hotel

Sioux Falls, South Dakota

Registration: <http://www.agriwellness.org>

The Healthcare Workforce Crisis: A Summit on the Future of Primary Care in Rural and Urban America

Health Resources and Services Administration (HRSA)

August 10-12, 2009

Marriott Wardman Park Hotel, Washington, DC

Registration: <http://www.team-psa.com/workforcesummit2009/agenda.asp>

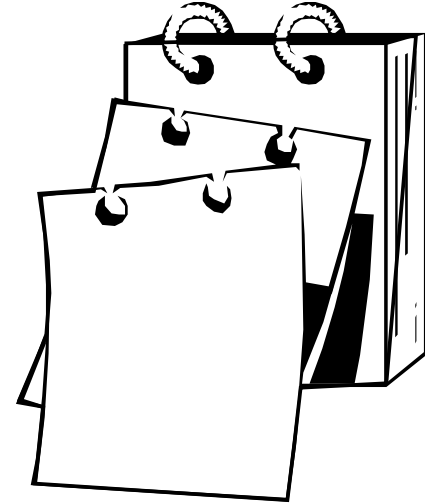
Listen & Learn – Iowa Prescription Drug Program – Rural Health Clinic Participation

Iowa Rural Health Association (IRHA)

August 13, 2009

Registration: <http://www.iaruralhealth.org>

Melissa Primus at 515-282-8192



2009 NHSC Scholar Orientation Conference

August 13-15, 2009

The Bureau of Clinician Recruitment and Service

Tampa Marriott Waterside Hotel, Tampa, FL

Registration: Frank Ausby fausby@hrsa.gov

Association of Staff Physician Recruiters Conference

August 30-September 2, 2009

Hyatt Regency, Minneapolis, MN

Registration: <http://www.aspr.org/displaycommon.cfm?an=1&subarticlenbr=9>

National Association of Rural Health Clinics

2009 Fall Institute & Annual Meeting

September 3-5, 2009

Nashville, TN

Registration: <http://www.narhc.org>

Listen & Learn – Congressional Legislative Update and impact of Rural Health

Iowa Rural Health Association (IRHA)

September 8, 2009

Registration: <http://www.iaruralhealth.org>

Melissa Primus at 515-282-8192

ACCESS UP *date*

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Gloria Vermie Iowa State Office Rural Health	(515) 281-7224	gvermie@idph.state.ia.us
Kevin Wooddell Administrative Assistant	(515) 281-6765	kwooddel@idph.state.ia.us

“Positive Approaches to Challenging Behaviors”

A Two-Day Regional Training Program

“Positive Approaches to Challenging Behaviors” is a 2-day, regional training program, open to all providers of home and community-based services interested in helping individuals transition to homes in community settings through Iowa’s Money Follows the Person (MFP) program. This training will take place **July 9 and 10 in Clear Lake, Iowa, hosted by Opportunity Village.**

Training location: Opportunity Village, the Forum at the Kinney Lindstrom Activity Center, Clear Lake, Iowa

Dates and time: July 9 and 10 from 10:00 a.m. to 4:00 p.m.

This training program was developed by John Lee, a member of the behavioral psychology staff at the Center for Disabilities and Development at the University of Iowa, and Stacie Lane, a transition specialist for Iowa’s MFP program. They each have considerable experience in behavior supports training and providing supports to individuals with challenging behaviors. John Lee has a background in special education and Stacie Lane is a certified instructor for crisis prevention.

“Positive Approaches to Challenging Behaviors” was developed to align with the web-based curriculum offered by the College of Direct Support, designed to train members of the direct care workforce. In addition to information on current best practices in providing behavior supports, this program will offer participants interactive, practical opportunities to apply the training to their own case studies, and resources to share with other staff at provider sites.

The training is intended for direct care workforce supervisors and senior direct care worker staff, who are willing to mentor other team members at their provider sites. Because of a high level of interest in the training and limited space (a facility capacity of 50), providers may be asked to limit the number of staff they send to allow a variety of provider staff to attend.

There is no charge to attend the training, and training materials and lunch will be provided. Funding for this training program is being provided by Iowa’s Real Choices Systems Transformation and Money Follows the Person grants. Providers may apply for a \$300 scholarship from the “Road to Community” grant to help cover the expenses of provider staff who attend the training.

For more information or to register for the training, please contact Meredith Field, Center for Disabilities and Development, at meredith-field@uiowa.edu or 319-384-6797.

To apply for scholarships through Road to Community, please email requests to roadtocommunity@q.com or mail requests to Road to Community, c/o Michael J. Davis, 820 45th Street, West Des Moines, IA 50265. Please see the attached documents for additional information, scholarship guidelines and application.

Providers interested in hosting the training should get in touch with Meredith Field at CDD or with their MFP Transition Specialist.