Healthy Iowans 2017-2021

Iowa's Health Improvement Plan



Injury & Violence

REVISED August 2019



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



Suggested Citation:

Iowa Department of Public Health. *Healthy Iowans 2017-2021*. Des Moines: Iowa Dept. of Public Health, Revised August 2019. Healthy Iowans Website: https://idph.iowa.gov/healthy-iowans/plan.

Governor: Kim Reynolds

Lieutenant Governor: Adam Gregg IDPH Director: Gerd W. Clabaugh

Report Contact Information:

Jonn Durbin, MA, CPM jonathan.durbin@idph.iowa.gov 515-281-8936

Louise Lex, PhD, MS louise.lex@idph.iowa.gov 515-281-4348

FOCUS AREA: Injury & Violence

What Health Issues Are Included

Falls

Motor Vehicle Crashes

Adverse Childhood Experiences (ACES)/Trauma Informed Care

Occupational & Farm Safety

Injury & Violence Measures of Health Improvement

IV-1 Decrease ↓ the death rate related to falls for those who are ages 65 and over (per 100,000 population ages 65+ age-adjusted rate).

Ages 65+ ☺ Target: 87

Baseline: 92 [2016]

Newest: 82 [2017]≈10% decrease

Data Source: CDC, National Center for Injury Prevention and Control. WISQARS (Web-based Injury Statistics Query and Reporting System) https://www.cdc.gov/injury/wisqars/fatal.html

IV-2 Decrease \downarrow the hospitalization rate related to falls for those who are ages 65 and over (per 100,000 population ages 65+).

<u>Ages 65+ ⊗</u> Target: 1,159

Baseline: 1,220 [2016]

Newest: 1,258 [2017]≈3%[↑] increase

Data Source: Iowa Department of Public Health, Behavioral Health Division, unpublished data. https://idph.iowa.gov/falls-prevention

IV-3 Decrease \downarrow the percentage of adults ages 65 and over reporting having one or more falls in the last year.

Overall Non-White or Hispanic Adults 65+ with Disability*

Target: 30 Target: 40

Baseline: 32 [2016] Baseline: 41 [2016] Baseline: 43 [2016]

Data Source: Iowa Behavioral Risk Factor Surveillance System (BRFSS). https://idph.iowa.gov/brfss *Additional IDPH analysis of national BRFSS data. Data is available in even-numbered years.

IV-4 Decrease ↓ the death rate related to motor vehicle crashes (per 100,000 population age-adjusted).

Overall © NonCore (non-metro/rural) ©

Target: 12 Target: 18 Target: 15

Baseline: 13.5 [2016] Baseline: 20 [2016] Baseline: 16.5 [2012-2016]

Newest: 12 [2017] \approx 11% decrease Newest: 17 [2017] \approx 13% decrease Newest: 16 [2013-2017] \approx 2% decrease

Data Source: CDC, NCHS. Multiple Cause of Death on CDC WONDER Online Database. Data are from the Multiple Cause of Death Files as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Underlying Cause of Death: Motor vehicle accidents (V02-V04, V09.0, V09.2, V12-V14, V19.0-V19.2, V19.4-V19.6, V20-V79, V80.3-V80.5, V81.0-V81.1, V82.0-V82.1, V83-V86, V87.0-V87.8, V88.0-V88.8, V89.0, V89.2) https://wonder.cdc.gov/mcd-icd10.html

IV-5 Decrease \downarrow the rate of children who are victims of maltreatment (per 1,000 children under age 18).

Overall ⊗ Target: 10

Baseline: 12 [2016]

Newest: 15 [2017]≈25%[↑] increase

Data Source: U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. National Child Abuse and Neglect Data System (NCANDS) Child File. Courtesy: Kids Count. https://datacenter.kidscount.org/

IV-6 Decrease ↓ the rate of youth residing in juvenile detention, correctional, and/or residential facilities (per 100,000 youth ages 10-17).

OverallMaleBlackTarget: 196Target: 332Target: 978

Baseline: 207 [2015] Baseline: 350 [2015] Baseline: 1,030 [2015]

Data Source: Sickmund, M., Sladky, T.J., Kang, W., and Puzzanchera, C. (2017) "Easy Access to the Census of Juveniles in Residential Placement." Online. https://www.ojjdp.gov/ojstatbb/ezacjrp/

IV-7 Increase ↑ the percentage of children ages 0-17 with 2 or more adverse childhood experiences (ACEs) who are in excellent or very good health.

Overall © Target: 90%

Baseline: 86% [2016]

Newest: 87% [2017]≈2% increase

Data Source: Child and Adolescent Health Measurement Initiative www.cahmi.org. Data Resource Center for Child and Adolescent Health. National Survey of Children's Health (NSCH). National Outcome Measure #19. https://www.childhealthdata.org/browse/survey

IV-8 Decrease ↓ the rate of deaths from work-related injuries (per 100,000 full time workers).

Overall © Agriculture, forestry, fishing and hunting ©

Target: 4 Target: 15

Baseline: 5 [2016] Baseline: 17 [2016]

Newest: 4.7 [2017]≈2%↓ decrease Newest: 25.9 [2017]≈55%↑ increase

Data Source: U.S. Bureau of Labor Statistics, Current Population Survey, Census of Fatal Occupational Injuries.

https://www.bls.gov/iif/oshstate.htm#IA

IV-9 Decrease \downarrow the rate of non-fatal work-related injuries and illnesses (per 100 full time workers).

Overall © Agriculture, forestry, fishing and hunting* ©

Target: 3 Target: 7

Baseline: 4 [2016] Baseline: 7.5 [2016]

Newest: 3.6 [2017] \approx 5% \downarrow decrease Newest: 4.1 [2017] \approx 45% \downarrow decrease

Data Source: U.S. Bureau of Labor Statistics, U.S. Department of Labor, Nonfatal occupational injuries and illnesses data by industry.

^{*}Excludes farms with fewer than 11 employees. https://www.bls.gov/iif/oshstate.htm#IA

Iowa Health Issue: Falls

Iowa Counties with Local Strategies

Audubon, Buchanan, Calhoun, Cerro Gordo, Emmet, Hardin, Ida, Jackson, Jasper, Keokuk, Louisa, Lyon, Pocahontas, Union, Van Buren

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

Goals, Objectives & Strategies

| Falls Goal #1 Decrease | patient falls in the healthcare setting. | | | | | | |
|------------------------|--|------------------|-------------------|----------------|----------------------------|-----------|--|
| Alignment with Nati | onal Plans | | | | | | |
| | e & Medicaid Services (CMS), Hospital Improvement Innovation I orpatients.cms.gov/about-the-partnership/hospital-engagement | • | • | ngagement | networks.htn | <u>nl</u> | |
| Alignment with State | e / Other Plans | | | | | | |
| N/A | | | | | | | |
| Fall <u>s</u> | | | | | | | |
| Objective 1-1 M | laintain the continuous goal of a 20% reduction in the number of ills per 1,000 in the healthcare setting. | Baseline Year | Baseline Value | Target Year | Target Value | | |
| | | 2014 | 3.27 | 2021 | 1.01 | | |
| Data Source Falls | HIIN Data, Iowa Health Care Collaborative | | | | | | |
| · | Strategy 1-1.1 Work in collaboration with the Iowa Healthcare Collaborative to educate hospitals in fall prevention strategies. Strategy Type Professional/provider-focused | | | | | | |
| | Strategy Source & Location | | | | | | |
| | Iowa Healthcare Collaborative | | | | | | |
| | Who's Responsible Iowa Hospital Association-Quality Team and Iowa Healthcare C | Collaborative | 9 | | <u>et Date</u> 31, 2019 | | |
| - | Report Date Feb 12, 2019 Progress on Strategy Complete On track Off tr | ack 🔲 | No progress | | | | |
| | Progress notes: In spring of 2018, a fall prevention campaign | was pushed | out to all hos | spitals. | | | |

Falls

Goal #2 Reduce falls in the elderly population.

Alignment with National Plans

National Council on Aging, 2015 Falls Free National Action Plan

https://www.ncoa.org/resources/2015-falls-free-national-falls-prevention-action-plan/

Alignment with State / Other Plans

lowa Department on Aging https://www.iowaaging.gov/programs-services/health-prevention-wellness/falls-prevention

Falls

Objective 2-1 Develop templates for collaborative practice agreements in longterm care facilities related to falls prevention.

Baseline Baseline **Target Target** Year Value Year Value 2015 2019 **TBD** 0

& Location :

Data Source | To be developed.

Falls

Strategy 2-1.1 Work with DIA and the Iowa Pharmacy Association longterm care/senior care committee to create collaborative practice agreements with local providers.

Strategy Type

Professional/provider-focused

Strategy Source & Location

New strategy

Who's Responsible Iowa Pharmacy Association **Target Date** Jan 1, 2019

Falls

Goal #3 Reduce injuries and deaths from falls by expanding the availability of evidence-based programs.

Alignment with National Plans

2015 Falls Free National Action Plan https://www.ncoa.org/resources/2015-falls-free-national-falls-prevention-action-plan/

Alignment with State / Other Plans

Iowa Falls Prevention Coalition Plan (to be published)

<u>Falls</u>

Objective 3-1

Increase the percentage of Iowa counties that have evidencebased classes available from 35% to 50%.

Baseline Baseline **Target** Target Year Value Year Value 2016 35% 2019 50%

Data Source | National Council on Aging Falls Database (baseline data from CY2016) - accessed by Iowa Department of Public & Location | Health Office of Disability, Injury & Violence Prevention staff.

Falls

Strategy 3-1.1

By 2019, increase the number of local health departments participating in county or regional falls prevention coalitions.

Strategy Type Community-focused Strategy Source & Location

Survey of local health departments - conducted annually

Who's Responsible

Target Date

Iowa Department of Public Health, Office of Disability, Injury & Violence Prevention

Jan 1, 2020

Falls

Strategy 3-1.2

Each year, analyze and provide updated data on trends related to deaths and hospitalizations from falls by county.

Strategy Type Policy-focused

Strategy Source & Location

Falls In Iowa report

Who's Responsible

Target Date

Iowa Department of Public Health, Office of Disability, Injury & Violence Prevention &

Jul 1, 2021

Iowa Falls Prevention Coalition

Falls

Objective 3-2

Increase the number of older lowans who indicate they have been Baseline Baseline **Target** Target referred to falls prevention program by their health care provider. Year Value Year Value 2017 12% 2020 25%

& Location

Data Source | Iowa Department of Public Health, Office of Disability, Injury & Violence Prevention program reports.

Falls

Strategy 3-2.1 Collaborate in the statewide falls prevention strategy for clinical settings to increase routine screening for falls, referral to evidence-based programs, and potential reimbursement mechanisms.

Strategy Type

Professional/provider-focused

Strategy Source & Location

Iowa Statewide Falls Prevention Strategy https://idph.iowa.gov/falls-prevention/resources

Who's Responsible

Target Date

Iowa Department of Public Health and Iowa Healthcare Collaborative

Sept 1, 2019

Falls

Strategy 3-2.2

Educate patient care coordinators about the CDC STEADI (Stopping Elderly Accidents, Deaths, & Injuries) Toolkit for clinicians and how to refer patients to evidence-based community programs.

Strategy Type

Professional/provider-focused

Strategy Source & Location

The Iowa Department of Public Health (IDPH) Administration for Community Living Falls Prevention Grant includes a plan to engage patient care coordinators in hospital and clinic systems in Iowa (located in IDPH program files).

Who's Responsible

Target Date

Iowa Department of Public Health (Office of Disability, Injury & Violence Prevention) and

Dec 31, 2019

the Iowa Healthcare Collaborative

Falls

Strategy 3-2.3

Develop a reimbursement mechanism to support the network of evidence-based falls prevention classes across the state.

Strategy Type Policy-focused

Strategy Source & Location

Based on the business plan developed by the Iowa Falls Prevention Coalition (available from the Iowa Department of Public Health, Office of Disability, Injury & Violence Prevention program files)

Target Date
July 31, 2019

Iowa Health Issue: Motor Vehicle Crashes

Iowa Counties with Local Strategies

Buchanan, Calhoun, Mitchell

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

Goals, Objectives & Strategies

Motor Vehicle Crashes

Goal #1 Increase traffic safety.

Alignment with National Plans

Healthy People 2020, Injury & Violence Prevention, Objective 13

https://www.healthypeople.gov/2020/topics-objectives/topic/injury-and-violence-prevention/objectives

National Highway Traffic Safety Administration Counter Measures That Work

https://www.nhtsa.gov/sites/nhtsa.dot.gov/files/811736.pdf

Alignment with State / Other Plans

Iowa State Strategic Highway Safety Plan https://www.iowadot.gov/traffic/shsp/home

Governor's Traffic Safety Bureau Highway Safety Plan http://www.dps.state.ia.us/commis/gtsb/publications.shtml

Motor Vehicle Crashes

| Objective 1-1 | Reduce traffic fatalities 15% from the 2007 - 2011 average of 396 | Baseline | Baseline | Target | Target |
|---------------|---|----------|----------|--------|--------|
| | to 337 by January 1, 2020. | Year | Value | Year | Value |
| | | 2007-11 | 396 | 2020 | 337 |

Data Source | Iowa State Strategic Highway Safety Plan

& Location | Highway Safety Plan, Iowa Department of Public Safety/Governor's Traffic Safety Bureau, FFY 2017, Performance Measure #1.

Motor Vehicle Crashes

Strategy 1-1.1 Increase the statewide safety belt usage rate 0.213% from

the 2016 observational survey rate of 93.8% to 94.0% for the 2018 survey.

Strategy Type Individual/interpersonal-focused

Target Date

Jun 30, 2021

Strategy Source & Location

Highway Safety Plan. Statewide Observational Seat Belt Usage Survey.

Who's Responsible

The Annual Observational Safety Belt Usage Survey is conducted by Iowa State University, Survey and Behavioral Research Services, under contract with the Governor's Traffic Safety Bureau.

Motor Vehicle Crashes

Provide de-identified data from the Iowa Office of the State Strategy Type Strategy 1-1.2

Medical Examiner Case Management System to the Iowa Department of Transportation (DOT), Iowa Department of Public Safety (DPS), and elected officials to aid in policy development to reduce the number of motor vehicle crashrelated fatalities.

Policy-focused

Strategy Source & Location

Iowa Office of the State Medical Examiner, Iowa DOT, and Iowa DPS

Who's Responsible Iowa Office of the State Medical Examiner, Iowa DOT, and Iowa DPS **Target Date** Dec 31, 2020

Motor Vehicle Crashes

Reduce alcohol-impaired driving fatalities 3.33% from the Strategy 1-1.3

2011-2015 average of 90 to 87 by December 31, 2018.

Strategy Type Individual/interpersonal-focused

Strategy Source & Location

Highway Safety Plan

Who's Responsible

Target Date Agencies under contract with the Governor's Traffic Safety Bureau and Iowa Impaired Dec 31, 2018

Driving Coalition.

Iowa Health Issue: Adverse Childhood Experiences (ACEs)/Trauma Informed Care

Iowa Counties with Local Strategies

Calhoun, Cerro Gordo, Greene, Jasper, Linn, Monona, Muscatine, Sac, Shelby

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

Goals, Objectives & Strategies

Adverse Childhood Experiences (ACEs)/Trauma Informed Care

Goal #1 Reduce the number of Iowa children reporting risk factors associated with adverse childhood experiences (ACEs).

Alignment with National Plans

Healthy People 2020, Injury & Violence Prevention,

Objectives 37, 38, & 42 https://www.healthypeople.gov/2020/topics-objectives/topic/injury-and-violence-prevention

Alignment with State / Other Plans

ACEs 360 Iowa http://www.iowaaces360.org/

Iowa Child Abuse Prevention Program http://www.pcaiowa.org/programs/icapp/

Iowa's Comprehensive HIV Plan 2017-2021 https://idph.iowa.gov/hivstdhep/hiv

The Washington State's ACEs Public-Private Initiative http://www.appi-wa.org/about/guiding-principles

Iowa Healthiest State Initiative http://www.iowahealthieststate.com/

University of Iowa Child Protection Program https://uichildrens.org/medical-services/child-protection-program

Adverse Childhood Experiences (ACEs)/Trauma Informed Care

Objective 1-1 COMPLETE: Increase the number of policy makers and state department officials who are aware of ACEs.

| Baseline Year | Baseline Value | Target Year | Target Value |
|------------------|-------------------------------|----------------|-------------------------------|
| 2016 | 20 policy makers/ state | 2017 | 50 policy makers/ state |
| | agency officials | | agency officials |

Data Source ACEs Policy Coalition will track this number based on interactions with state policy makers and department & Location | officials during the 2017 legislative session.

Report Date Feb 11, 2019

Year 2018 Value

Progress on Objective ✓ Met, trend in right direction
Not met, trend in right direction Met, no trend Not met, no trend Met, trend in wrong direction Not met, trend in wrong direction

Progress notes:

50

Representatives from the ACES Coalition initiated conversations to inform policy makers and state department officials about the importance of ACEs in improving the effectiveness of prevention and treatment programs. In 2018 the Coalition increased their attention on meeting with members of key state agencies, including DHS, DE, and IDPH.

Adverse Childhood Experiences (ACEs)/Trauma Informed Care

Strategy 1-1.1 COMPLETE: Host two lobby days during the 2017 legislative Strategy Type session to raise awareness regarding the impact of ACEs.

Individual/interpersonal-focused

| | Strategy Source & Location Policy Priority of the ACEs Policy Coalition | | | | | | | |
|---------------------------|--|--|--|--|-------------------------------|-----------------------------------|----------------|--------------------------|
| | Who's Responsi ACEs Policy Coa | <u>ble</u> lition (Child and Fa | ımily Policy Cent | er co-chair | s this Coalitic | n) | | t <u>Date</u> D, 2017 |
| | Report Date Feb 11, 2019 | Progress on Stra ✓ Complete | tegy On track | Off: | track | No progress | 3 | |
| | Progress notes: | Building off the su advocacy events of Human Services A Day, and a legisla | occurred during appropriations su | 2018, included by the second s | ding presenta ee, the ACEs | ations to the Policy Coalition | Health and | |
| Adverse Childho | od Experiences (AC | Es)/Trauma Inform | ned Care | | | | | |
| - | Adopt strategies foo adversity. | cused on preventir | ng and mitigating | g childhood | Baseline Year | Baseline Value | Target Year | Target Value |
| | | | | | 2016 | 0 | 2018-19 | 1 |
| Data Source & Location | Child and Family Po | olicy Center analys | is of legislation p | oassed duri | ng the 2017 s | session. | | |
| Adverse Chile | dhood Experiences | (ACEs)/Trauma Inf | ormed Care | | | | | |
| Strategy 1-2. | impact of ACEs lowans, which e makers to deve the areas of prewhich would re | solution or proclar on the long term hencourages state of lop priorities for a evention, early into duce the prevalen problems, and the | nealth and well-lepartments and ction to address ervention, and moce of mental hea | being of I policy ACEs in hitigation, alth and | Strategy Typ Policy-focus | _ | | |
| | Strategy Source | & Location | | | | | | |
| | Policy Priority of | f the ACEs Policy C | oalition | | | | | |
| Advarca Chil | Who's Responsi ACEs Policy Coa | lition (Child and Fa | | er co-chair | s this Coalitic | n) | | <u>t Date</u>), 2018 |
| Strategy 1-2. | · | pand programs th | | health | Strategy Typ | ۱۵ | | |
| Strategy 1-2. | and family well- | | at improve cimu | Health | Policy-focus | | | |
| | Strategy Source Child and Family | & Location Policy Center legi | islative priorities | 5 | | | | |
| | Who's Responsi Child and Family | | | | | | | <u>t Date</u> 2021 |

| * Trauma is | defined as an exper | ience or event th | els to recognize a nat is emotionally pai medical trauma, car a | nful or distress | ful that overv | vhelms a perso | on's ability to | cope, including |
|--|--|--|--|------------------|---|--------------------------------|------------------------|-----------------|
| Alignment with Nati | onal Plans | | | | | | | |
| National Strategy to https://eliminatechi | | _ | | NF-final-repo | rt.pdf | | | |
| Preventing Child About http://www.cdc.gov | _ | | | _ | rammatic Ac | tivities | | |
| HHS Strategic Plan: Shttp://www.hhs.gov | _ | | | ell-Being of th | ne American | People | | |
| Alignment with State | e / Other Plans | | | | | | | |
| ACEs 360 Iowa http | ://www.iowaaces | 360.org/ | | | | | | |
| Iowa Child Abuse Pr | evention Program | http://www.p | caiowa.org/progra | ms/icapp/ | | | | |
| Iowa's Comprehensi | ve HIV Plan 2017- | 2021 https://io | dph.iowa.gov/hivst | dhep/hiv | | | | |
| The Washington Sta | te's ACEs Public-P | rivate Initiative | http://www.appi- | -wa.org/abou | t/guiding-pr | <u>inciples</u> | | |
| Iowa Healthiest Stat | e Initiative http:// | /www.iowahea | Ithieststate.com/ | | | | | |
| University of Iowa C | hild Protection Pro | ogram https:// | uichildrens.org/me | edical-services | s/child-prote | ection-progra | <u>ım</u> | |
| Adverse Childhoo | d Experiences (AC | Es)/Trauma Inf | ormed Care | | | | | |
| | OMPLETE: Hire a s are Coordinator. | tatewide Traur | ma Informed Preve | ntion and | Baseline Year | Baseline Value | Target Year | Target Value |
| | | | | | 2016 | 0 | 2017 | 1 |
| Report Date April 10, 2019 | Year 2018 Value | Progress of Met, Met, Met, Met, the position | on Objective trend in right direction trend trend in wrong direction wrong direction wrong direction. To be able to do to do fing from vested possible to the direction wrong direction wrong the direction wr | tion No | ot met, trend ot met, no tr ot met, trend ention and C | d in wrong di Care Coordina | rection ator and no | - |
| Adverse Childhood Experiences (ACEs)/Trauma Informed Care Strategy 2-1.1 COMPLETE: Recruit applicants with a foundational understanding of impact of trauma on development/health outcomes/post-traumatic growth, and experience in | | | | | | | | |
| engaging, managing and supporting state and community-level coalitions. Strategy Source & Location SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach http://store.samhsa.gov/shin/content/SMA14-4884/SMA14-4884.pdf | | | | | | | | |
| | Who's Responsible Iowa Department of Public Health Mar 1, 2017 | | | | | | | |
| _ | Report Date April 10, 2019 | Progress on S Complete | | ☐ Off tr | ack 🗌 | No progress | | |

Adverse Childhood Experiences (ACEs)/Trauma Informed Care

coordinator, efforts have been made in many programs and agencies to screen for trauma-informed principles knowledge. However, this is mostly anecdotal evidence and is not currently being tracked. Adverse Childhood Experiences (ACEs)/Trauma Informed Care Objective 2-2 Develop a strategic plan for a Trauma Informed Work Group at Baseline Baseline **Target Target** the Iowa Department of Public Health that recognizes the impact Year Value Year Value of trauma across the public health continuum. 2016 0 2018-19 1 Data Source | Work Group records. & Location Adverse Childhood Experiences (ACEs)/Trauma Informed Care Strategy 2-2.1 Develop mission and vision statements for the work group. Strategy Type Professional/provider-focused **Strategy Source & Location** SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach http://store.samhsa.gov/shin/content/SMA14-4884/SMA14-4884.pdf Who's Responsible Target Date Iowa Department of Public Health Trauma Informed Work Group Dec 31, 2021 **Progress on Strategy** Report Date April 10, 2019 ✓ Complete On track Off track No progress Progress notes: The vision and mission of the IDPH workgroup was finalized and is as follows: The vision of the IDPH Trauma Leadership Workgroup is Healthy Iowans living in resilient and thriving communities. The mission is for IDPH to be a leader in creating resilient and thriving communities promoting action, based on evidence connecting trauma with health and well-being, utilizing the organizational trauma continuum. Adverse Childhood Experiences (ACEs)/Trauma Informed Care Develop operating and membership procedures to ensure Strategy 2-2.2 Strategy Type effective communication on the impact of trauma to key Policy-focused stakeholders at the Iowa Department of Public Health. Strategy Source & Location SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach http://store.samhsa.gov/shin/content/SMA14-4884/SMA14-4884.pdf Who's Responsible Target Date Dec 31, 2021 Iowa Department of Public Health Trauma Informed Work Group Adverse Childhood Experiences (ACEs)/Trauma Informed Care Develop a communication plan for the Trauma Informed Strategy 2-2.3 Strategy Type Work Group to formalize distribution of information to Professional/provider-focused Iowa Department of Public Health programs. **Strategy Source & Location** SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach http://store.samhsa.gov/shin/content/SMA14-4884/SMA14-4884.pdf Who's Responsible Target Date Iowa Department of Public Health Trauma Informed Work Group Dec 31, 2021 Adverse Childhood Experiences (ACEs)/Trauma Informed Care Objective 2-3 Increase the number of Divisions within the Iowa Department of Baseline Baseline **Target Target** Public Health that universally integrate principles of trauma-Year Value Year Value informed care across programs. 2016 0 2021 5 divisions

Progress notes: Though there is not a state-wide trauma-informed prevention and care

Data Source | To be developed. & Location !

Adverse Childhood Experiences (ACEs)/Trauma Informed Care

Strategy 2-3.1 Conduct an assessment to determine which programs at

the Iowa Department of Public Health are utilizing principles of trauma-informed care in their funding and technical assistance decisions.

Strategy Type Professional/provider-focused

Strategy Source & Location

SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach

http://store.samhsa.gov/shin/content/SMA14-4884/SMA14-4884.pdf

Who's Responsible

Iowa Department of Public Health

Target Date

Dec 31, 2021

Adverse Childhood Experiences (ACEs)/Trauma Informed Care

Develop a database to track number of Iowa Department Strategy 2-3.2 of Public Health programs that are informed about the life-

long impact of trauma on physical and behavioral health.

Strategy Type

Professional/provider-focused

Strategy Source & Location

SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach

http://store.samhsa.gov/shin/content/SMA14-4884/SMA14-4884.pdf

Who's Responsible

Iowa Department of Public Health

Target Date

Dec 31, 2021

Adverse Childhood Experiences (ACEs)/Trauma Informed Care

Objective 2-4 Develop an inventory of trauma-informed resources available on

risk and protective factors for adverse experiences.

Baseline Baseline **Target Target** Year Value Year Value 2016 O 2019 1

& Location

Data Source | To be developed.

Adverse Childhood Experiences (ACEs)/Trauma Informed Care

Strategy 2-4.1 Gather resources on trauma-informed principles, procedures, interventions and available data, and compile

into an inventory available for public consumption.

Strategy Type

Individual/interpersonal-focused

Strategy Source & Location

SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach

http://store.samhsa.gov/shin/content/SMA14-4884/SMA14-4884.pdf

Who's Responsible

Iowa Department of Public Health

Target Date

Dec 31, 2021

Adverse Childhood Experiences (ACEs)/Trauma Informed Care

Objective 2-5 Develop a statewide trauma-informed care planning group to formalize cross-sector collaboration to address the impact of

trauma on Iowans and promote social well-being.

Baseline **Target** Value Year O

2018

Target Value 1

Data Source | To be developed.

& Location

Adverse Childhood Experiences (ACEs)/Trauma Informed Care

Strategy 2-5.1 Identify external agencies, including those addressing the issue of human trafficking, that are involved in trauma-

informed care and establish relationships in order to increase cross-sector collaboration efforts to address trauma across the lifespan of lowans.

Strategy Type

Baseline

Year

2016

Community-focused

Strategy Source & Location

SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach

http://store.samhsa.gov/shin/ content/SMA14-4884/SMA14-4884.pdf

The Washington State's ACEs Public-Private Initiative http://www.appi-wa.org/about/guiding-principles

Who's Responsible

Target Date

Iowa Department of Public Health, Prevent Child Abuse Iowa

Dec 31, 2021

Adverse Childhood Experiences (ACEs)/Trauma Informed Care

Strategy 2-5.2 Establish a procedure for collaboration and coordination between the Iowa Department of Public Health and other

agencies developing and utilizing trauma-informed care practices.

Strategy Type
Community-focused

Strategy Source & Location

SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach

http://store.samhsa.gov/shin/ content/SMA14-4884/SMA14-4884.pdf

The Washington State's ACEs Public-Private Initiative http://www.appi-wa.org/about/guiding-principles

Who's Responsible

Target Date

Iowa Department of Public Health

Dec 31, 2021

Adverse Childhood Experiences (ACEs)/Trauma Informed Care

Goal #3 Assure children and their caretakers that are affected by adverse childhood experiences receive relevant services.

Alignment with National Plans

Healthy People 2020, Injury and Violence Prevention (IVP) IVP-38 & 42

https://www.healthypeople.gov/2020/topics-objectives/topic/injury-and-violence-prevention

Alignment with State / Other Plans

N/A

Adverse Childhood Experiences (ACEs)/Trauma Informed Care

| Objective 3-1 | Identify children and their caretakers affected by adverse |
|---------------|--|
| | childhood experiences (ACEs). |

| Baseline | Baseline | Target | Target |
|----------|----------|--------|--------|
| Year | Value | Year | Value |
| 2016 | 0 | 2021 | TBD |

Data Source | University of Iowa Children's Hospital Child Protection Clinic clientele, University of Iowa Children's Hospital Child & Location | Protection Clinic records

Adverse Childhood Experiences (ACEs)/Trauma Informed Care

Strategy 3-1.1 Conduct trauma, resiliency, and needs surveys on every child and their immediate caregivers assessed in a child

protection clinic. The same should be conducted in select children (i.e. with developmental, behavioral, and mental health problems) and their caretakers in primary care clinics, hospital inpatient units, pediatric specialty clinics.

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

Strategy Source & Location

University of Iowa Children's Hospital Child Protection Clinic patients and family members University of Iowa Children's Hospital Child Protection Inpatient Unit

Who's Responsible

Target Date

University of Iowa Children's Hospital Child Protection Inpatient Unit

Dec 31, 2021

Adverse Childhood Experiences (ACEs)/Trauma Informed Care

Objective 3-2 Refer families to relevant needed services.

Baseline
YearBaseline
ValueTarget
YearTarget
Value201602021TBD

Data Source University of Iowa Children's Hospital Child Protection Program Inpatient and Outpatient clientele.

& Location

Adverse Childhood Experiences (ACEs)/Trauma Informed Care

Strategy 3-2.1 Conduct face-to-face interviews with family members following the trauma, resiliency, and needs surveys.

Strategy Type
Individual/interpersonal-focused

Strategy Source & Location

University of Iowa Children's Hospital Child Protection Inpatient Unit

Who's Responsible
University of Iowa Children's Hospital Child Protection Inpatient Unit

Target Date
Dec 31, 2021

Iowa Health Issue: Occupational & Farm Safety

Iowa Counties with Local Strategies

N/A

Goals, Objectives & Strategies

Occupational & Farm Safety

Goal #1 By 2020, reduce deaths from work-related injuries.

Alignment with National Plans

Healthy People 2020, Occupational Safety & Health

https://www.healthypeople.gov/2020/topics-objectives/topic/occupational-safety-and-health/objectives

Alignment with State / Other Plans

Iowa Department of Public Health, Occupational Health and Safety Surveillance Program (OHSSP) July 2015-June 2020 work plan (unpublished)

Occupational & Farm Safety

| Objective 1-1 | Reduce the 5-year rolling average rate of fatal occupational | Baseline | Ва |
|---------------|--|----------|----|
| | injuries in Iowa from 5.8 per 100,000 full-time workers to no more | Year | ١ |
| | than the national rate of 3.4 by 2020. | 2010-14 | |

| Baseline | Baseline | Target | Target |
|----------|----------|--------|--------|
| Year | Value | Year | Value |
| 2010-14 | 5.8 | 2020 | 3.4 |

Data Source | Iowa Burden of Occupational Injury

& Location https://idph.iowa.gov/lpp/occupational-health

Occupational & Farm Safety

Strategy 1-1.1 Conduct data collection and analysis annually to track and

trend occupational health indicators, including those for fatalities in high-risk industries and occupations, older worker fatalities, and self-employed or small business worker fatalities.

Strategy Type
Policy-focused

Strategy Source & Location

IDPH Occupational Health & Safety Surveillance Program 2015-2020 work plan

Who's Responsible lowa Department of Public Health, OHSSP

Target Date
Jul 28, 2019

Occupational & Farm Safety

Strategy 1-1.2 Disseminate findings to workers, employers, safety and health professionals, policy makers, and the public.

Strategy Type
Community-focused

Strategy Source & Location

IDPH Occupational Health & Safety Surveillance Program 2015-2020 work plan

Who's Responsible

Iowa Department of Public Health, OHSSP

Target Date
Jul 28, 2019

Occupational & Farm Safety

Strategy 1-1.3 Maintain and coordinate a network of stakeholders that can develop data-driven recommendations, materials, and resources for dissemination to key contacts.

Strategy Type
Community-focused

Strategy Source & Location

IDPH Occupational Health & Safety Surveillance Program 2015-2020 work plan

Who's Responsible lowa Department of Public Health, OHSSP Target Date
Jul 28, 2019