



2005 Annual Report & Budget Summary

Iowa Department of Public Health
Advancing Health Through The Generations

Iowa Department of Public Health – Contact Information

Mary Mincer Hansen, Director
515.281.8474

Janet Zwick, Deputy Director
Division of Behavioral Health & Professional Licensure
515.281.4417

Julie McMahon, Division Director
Division of Health Promotion and Chronic Disease Prevention
515.281.7016

Tom Newton, Division Director
Division of Environmental Health
515.281.7726

Mary Jones, Division Director
Division of Acute Disease Prevention and Emergency Response
515.281.7996

Bonnie Mapes, Division Director
Division of Tobacco Use Prevention and Control
515.281.6225

Lynh Patterson
Legislative Liaison
515.281.5033

Further information, including health statistics, publications, and program information may be obtained at www.idph.state.ia.us

From the Director:

The Iowa Department of Public Health (IDPH) is observing 125 years of organized public health for the state of Iowa this year. The theme is “Advancing Health Through the Generations” and is reflective of public health efforts in the past, the present, and the future.

During the past year, IDPH has partnered with local public health departments, policymakers, health care providers, business, and many others as we have worked to protect and promote the health of all Iowans. Highlights of the challenges we have faced include: influenza, teaching Iowans how to prepare for public health emergencies, promoting healthy eating and fitness, improving tobacco cessation rates, substance abuse prevention and treatment, and environmental health.



IDPH views health as a critical component of Iowa’s future – healthy kids are ready to learn; healthy adults are ready to work; and healthy communities are ready to grow. The department and its local public health and other health provider partners take pride in Iowa’s national ratings related to its health status. Iowa is ranked as the sixth healthiest state in Morgan Quitno Press’s *Health Care State Rankings 2005*, making the fifth straight year in the top six. In addition, the Annie E. Casey Foundation’s *Kids Count* project ranks Iowa eighth in child well-being.

We have restructured to create an Office of Community Education that is focusing on health literacy and increasing our outreach through business partnerships. The Office for Organizational Excellence was formed to improve our work processes so that we can provide even better results for Iowa.

I’m excited to tell you about the “Redesigning Public Health in Iowa” process. For the past year, a core work group of local and state public health professionals has been developing a framework for redesigning public health in the state. In the current phase of the process, more than 100 local and state public health professionals are serving on committees to develop standards for local public health. Standards for state public health will follow.

Overall, we met or exceeded the targets for 73% of measures in our FY2005 department performance plan. Major accomplishments include improving rates of children fully-immunized, improving oral health, improving substance abuse prevention, reducing youth smoking, and improving lead-poisoning prevention. More details about these successes are included in the section of this report entitled, *Success Stories*.

You will find in the pages ahead an in-depth description of the department's programs that affect the health and well-being of all Iowans. We are pleased to present this annual report and budget summary to you and welcome your questions or comments.

Mary Mincer Hansen, RN, PhD
Director

The Iowa Department of Public Health

Vision

Healthy Iowans living in a safe, healthy environment.

Mission

Promoting and protecting the health of Iowans.

Guiding Principles

We must be **LEADERS** in promoting and protecting the health of Iowans.

With a collective sense of **SOCIAL JUSTICE**, our activities will reflect understanding and acceptance of **DIVERSITY** among Iowans. We encourage involvement in our activities by all Iowa **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 of 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 Iowa, individually and collectively, effecting **OUTCOMES** that are clear improvements in their lives.

What the Department of Public Health does:

The Department of Public Health is a catalyst for promoting and protecting the health of Iowans. It strives to improve the quality of life for all Iowans by fulfilling the fundamental obligations of population-based services by:

- Preventing epidemics and the spread of disease
- Protecting against environmental hazards
- Preventing injuries
- Promoting and encouraging healthy behaviors and mental health
- Preparing for and responding to public health emergencies and assisting communities in recovery
- Assuring the quality and accessibility of health services

How the Department of Public Health fulfills these fundamental obligations:

Providing an array of essential services fulfills these obligations. On many occasions, these services are invisible to the public, only becoming obvious when a problem develops. IDPH's **Main Products and Services** include, but are not limited to, funding services, providing research-based knowledge and technical expertise, disease surveillance, regulatory inspections, and policy development. Technical assistance, disease surveillance, and regulatory inspections are delivered directly to local boards of health and local health agencies, the regulated community, and the public. Some services are provided indirectly through funding to local health agencies that provide direct public health services.

Iowa has had a state public health agency since 1880 when the Eighteenth General Assembly formed the State Board of Health to “provide for the collecting of vital statistics and to assign certain duties to local boards of health.” Since then, its duties have greatly expanded. Today's IDPH serves as the state's leader in administering and funding public health, as the department presides over 180 programs and employs more than 430 people.

The department's mission of promoting and protecting the health of Iowans is accomplished by following the framework of the Iowa Accountable Government Act (AGA). IDPH has determined that the services and activities it engages in, as well as the products it provides to its customers, are included in five AGA core functions: child and adult protection; emergency management, domestic security, public health preparedness; health and support services; regulation and compliance; and resource management.

In 1988, the Institute of Medicine (IOM) published The Future of Public Health, which recommended that public health's core functions be assessment, policy development, and assurance. Each national public health core function is further defined by a set of essential services (Table 1).

In response to the IOM report, the IDPH has worked to align its services, products, and activities with the core public health functions and recognizes the national public health core functions as desired outcomes of its work.

Table 1. Public Health Essential Services

- Monitoring health status
- Diagnosing and investigating health problems & health hazards
- Informing, educating, and empowering people 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 & regulations that protect health & ensure safety
- Linking people to needed personal health services
- Assuring a competent public health and personal health-care workforce
- Evaluating effectiveness, accessibility, and quality of personal- and population-based health services
- Conducting research for new insights and innovative solutions to health problems

The IOM report also challenged all U.S. public health agencies to regularly and systematically collect, analyze, and make available information on the health of the community, including statistics on health status, community health needs, and epidemiological and other studies of health problems. In response, IDPH developed the Community Health Needs Assessment and Health Improvement Plan (CHNA-HIP), which is a comprehensive reporting tool that helps communities determine their health needs and plan health initiatives.

Agency staff includes professionals with degrees in education, communications, emergency medical services, engineering, environmental science, epidemiology, law, medicine, nursing, policy development, public health, and social work. Employees skilled in clerical services, data analysis, financial management, information technology, and research provide support services for the department.

IDPH is involved in the health-care system through individual, targeted-population, and population-based services. The department's customers include county and city health agencies, county boards of health, emergency medical service providers and programs, public and private contractors, public and private health care providers, and provider organizations. It also includes health-care payers, other federal, state, and local entities collaborating in health-care delivery, businesses, schools, department employees, and all Iowa citizens.

The IDPH administrative offices are located in the Lucas State Office Building, 321 E. 12th Street, Des Moines. Most IDPH employees are located in the Lucas

Building although community health consultants, disease prevention specialists, emergency medical service personnel, and epidemiologists are located in area offices across the state. Administrative staff for nursing, pharmacy, medical, and dental boards are located in Des Moines, but not within the Capitol complex.

IDPH funding comes from a variety of sources, but funds are received primarily from the federal and state governments, including tobacco settlement funds and private foundations.

The nine-member state Board of Health is IDPH'S legally designated policy-making body. The Board has the power and the duty to adopt, promulgate, amend, and repeal administrative rules and regulations, and advises or makes recommendations to the governor, General Assembly, and the IDPH director, on public health, hygiene, and sanitation. The director, appointed by the governor, works closely with the Board of Health to develop state health policy.

IDPH is divided into six organizational units.

1. Director's Office
2. Division of Acute Disease Prevention and Emergency Response
3. Division of Behavioral Health and Professional Licensure
4. Division of Environmental Health
5. Division of Health Promotion and Chronic Disease Prevention
6. Division of Tobacco Use Prevention and Control

The IDPH also provides administrative support for 23 professional licensure boards that regulate and license various health professions.

Approximately 300 Iowans serve on various boards and commissions. IDPH currently provides staff for several consumer-oriented councils and task forces. These groups provide regular input into the department's policy development and program planning, implementation, and evaluation efforts.

In total, over 540 entities have department contracts to provide health services. IDPH currently contracts with all 99 counties to provide population-based health services and a limited number of personal health services. These contractors include county boards of health and boards of supervisors, community-action programs, public health nursing agencies, maternal and child-health agencies, substance abuse prevention agencies, emergency medical service providers, and HIV/AIDS prevention and care providers.

Further information, including health statistics, publications, and program information may be obtained at www.idph.state.ia.us.

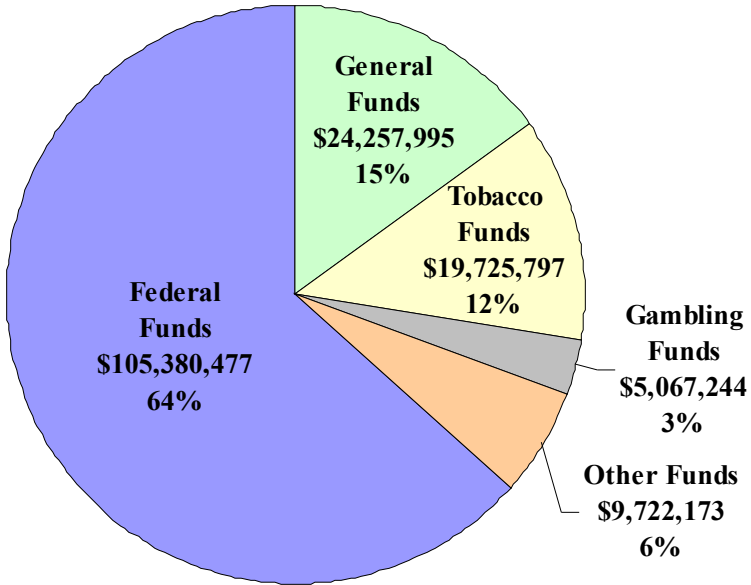
Budget Summary Overview

An overview of each department program is contained within this Annual Report and Budget Summary and includes the program objective, description of services, population served, and fiscal year 2004, 2005, and 2006 expenditure information.

Fiscal Year 2005 Financial Summary Overview

Total expenditures in FY 2005 were \$164,153,686. A summary of the breakdown (by funding source) for those expenditures is shown in the following chart:

IDPH FY 2005 Actual Funding Breakdown



“Other” funds refer to fees collected and retained by individual programs or via memoranda of understanding that have been established with other agencies in state government or grants received from private foundations.

A resource reallocation (i.e., appropriation transfer) occurred in FY 2005 in the amount of \$15,808. Funds were transferred from 7 appropriations to the Resource Management appropriation to allocate the “pro-ratio of health insurance premium savings” budget reduction approved by the 81st General Assembly.

Department Director's Office

Mary Mincer Hansen, Director

515-281-8474

The director of the Department of Public Health is the spokesperson and advocate for public health across the state of Iowa. The director acts as a liaison to local boards of health, local public health administrators, health care providers, and consumers and represents the department in a variety of national organizations. The director provides the department with national exposure and works with policymakers in both Iowa and Washington, D.C.

Included in the office of the director:

- State Board of Health
- Bureau of Finance
- Office of Communication and Public Information
- Office of Community Education
- Office of Policy, Legislation and Constituent Relations
- Office of State Medical Examiner
- Director's Physician Advisory Group
- Health Facilities Council
- Board of Dental Examiners
- Board of Medical Examiners
- Board of Nursing Examiners
- Board of Pharmacy Examiners
- State Medical Director/Epidemiologist

Division of Acute Disease Prevention and Emergency Response

Mary Jones, Director

515-281-7996

The Division of Acute Disease Prevention and Emergency Response provides support, technical assistance, education and consultation to local public health agencies, hospitals, emergency medical service (EMS) programs, local health care providers, and community-based organizations regarding infectious diseases, disease prevention and control, injury prevention and control, and public health and health care emergency preparedness and response. Division programs within these areas also provide regulatory functions. Additionally, the Bureau of Information Management resides within this division providing all information technology support for the department. Included in the division are the following bureaus/centers:

- Center for Acute Disease Epidemiology (CADE)
- Bureau of Disease Prevention and Immunization
- Bureau of Emergency Medical Services (EMS)
- Center for Disaster Operations and Response (CDOR)
- Bureau of Information Management
- State Public Health Veterinarian
- State Emergency Services Medical Director
- Deputy State Epidemiologist

Division of Behavioral Health and Professional Licensure

Janet Zwick, Deputy Director
515-281-4417

The Division of Behavioral Health and Professional Licensure provides a wide variety of programs that focus on the development of a healthy lifestyle. The division consists of the following programs:

- Arthritis
- Brain injury
- Disability prevention
- Gambling prevention and treatment
- Jail based treatment and assessment
- Medical substitute decision making board
- Office for Organizational Excellence
- Personnel
- Rape, Domestic Violence, and Youth Violence Prevention
- Regulation for 19 professional boards
- Regulation for substance abuse treatment
- Substance abuse prevention and treatment

The division also provides administrative support for the Governor's Advisory Council on Brain Injury.

Staff members provide technical assistance to an assortment of public and private entities. The Division of Behavioral Health and Professional Licensure works cooperatively with other divisions within the department, other state agencies and community-based programs that address lifestyle issues.

Division of Environmental Health

Tom Newton, Director

515-281-7726

The Division of Environmental Health contains a wide variety of programs with a primary purpose of ensuring a safe and healthy environment for Iowans. Additionally, responsibilities for the collection and analysis of public health data were added to the division during a department wide reorganization in the spring of 2004. The division consists of the following program areas:

- Bureau of Lead Poisoning Prevention
- Bureau of Environmental Health Services
- Bureau of Radiological Health
- Bureau of Health Statistics
- Office of Local Board of Health Assistance
- State Toxicologist

Division programs within these five areas provide both educational and regulatory functions.

Division of Health Promotion and Chronic Disease Prevention

Julie McMahon, Director

515-281-7016

The Division of Health Promotion and Chronic Disease Prevention promotes and supports development of public health infrastructure and access to health care/services at the local and state level. This includes liaison with local boards of health and providing technical assistance regarding the board's role and responsibilities. Through financial support, education, ongoing technical assistance and monitoring, the division supports the development and delivery of services that promote and protect the health of Iowans and contribute to Iowa being a "healthy community." The division establishes program standards, identifies performance measures and assists the local boards of health and health care providers to develop quality and effective services that are community-driven, culturally competent and responsive to their Community Health Needs Assessment and Health Improvement Plan and consistent with federal or state regulations and/or funding requirements.

Both population-based and personal health services are provided through contracts with city or county governmental units or agencies serving a county or regional area. Health promotion is central to all services.

A wide range of services focus on preventing and/or managing chronic diseases:

- Cancer
- Diabetes
- Asthma
- Cardiovascular disease

Other services include:

- Public health nursing
- Home care aide services
- Oral health care
- Maternal and child health services
- Family planning services
- Adolescent health
- Child health specialty clinics
- Nutrition services including WIC (Women, Infants and Children)
- Outreach and technical assistance regarding health care for minorities, refugees and immigrants
- Increasing access to health care for vulnerable populations

Division of Tobacco Use Prevention and Control

Bonnie Mapes, Director

515-281-6225

The mission of the Division of Tobacco Use Prevention and Control is to reduce tobacco use by promoting partnerships among state government, local communities, and the people of Iowa to foster a social and legal climate in which tobacco use becomes undesirable.

Following Best Practices for Comprehensive Tobacco Control Programs guidelines established by the Centers for Disease Control and Prevention, the Division utilizes evidence-based strategies to address four primary goals:

- Preventing the initiation use of tobacco by youth
- Promoting cessation of tobacco use by adults and youth
- Reducing exposure to environmental tobacco smoke
- Reducing disparities in the impact of tobacco use on priority populations

Major components of the Tobacco Use Prevention and Control program include:

- Just Eliminate Lies, Iowa's youth-led tobacco use prevention campaign
- Quitline Iowa offering free smoking cessation counseling to all Iowans
- Community Partnerships which provide community-based tobacco prevention and cessation services in 94 of Iowa's 99 counties
- Enforcement of state and federal laws prohibiting tobacco sales to minors
- Priority Populations grants to support tobacco prevention activities in diverse and high-risk populations

Success Stories

On the following pages, you will find more details about some of the key services provided by the Iowa Department of Public Health and our national, state, and local partners. This is a brief look at some of our successes in FY 2005.

- Improving childhood immunizations..... xvi
- Improving childhood lead-poisoning prevention..... xvii
- Improving oral health for children..... xviii
- Improving substance abuse prevention..... xix
- Reducing youth tobacco use..... xx

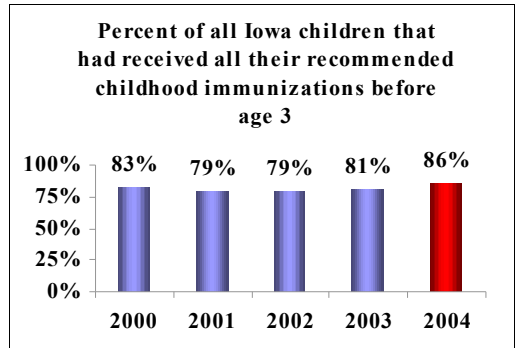
Success Stories – Improving Childhood Immunizations

The Iowa Department of Public Health’s Immunization program works to prevent diseases for which there is a vaccine by working with public and private health care providers across the state. Each year the program conducts immunization assessments of 2-year-olds who have been seen at public clinics to evaluate the state’s progress in achieving and maintaining the national immunization goal of 90%.

In 2005, 116 public sector immunization providers, including county public health departments, WIC/Well Child agencies, community health centers, and public sector agencies were reviewed using records from the state’s Immunization Registry Information System (IRIS).

More than 6,000 records were checked to see if the children had received all their recommended immunizations. It was found that 94% of children served by Iowa’s public health clinics had received 4 DTP/Dtap, 3 polio, 1 MMR, 3 HIB, and 3 Hepatitis B vaccines by the time they were two years old.

This is an increase of 3% from 2004, and a 16% increase since the assessments were first completed in 1995. This improvement in the public sector immunization rates has helped improve the rate for Iowa as a whole from 81% in 2003 to 86% in 2004, and is higher than the national rate of 81%.



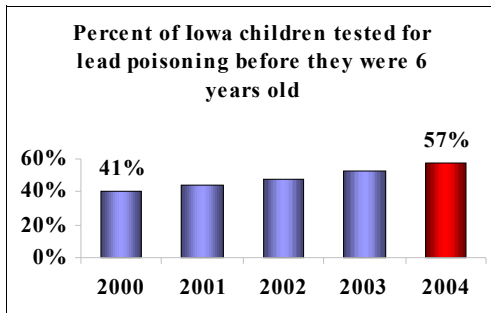
Roma Taylor, RN, Clinical Services coordinator and supervisor of the Scott County Public Health immunization program, stressed the importance of childhood vaccines. “Immunizations prevent the spread of diseases and the long-term health care issues that impact children. If you look at history with diseases such as polio and chicken pox that were killing children, we no longer have to worry about these diseases. As we continue to learn and develop new vaccines we are able to prevent many deaths.”

Success Stories – Improving Childhood Lead-Poisoning Prevention

Lead has adverse effects on nearly every part of the body. It is especially harmful to the developing brain and nervous system of children under the age of 6 years. This damage can be stopped if a child's exposure to lead is reduced. However, the damage cannot be reversed.

Iowa's children are at high risk for lead poisoning because nearly 40% of Iowa's housing was built before 1950, when the use of lead-based paint was common. Young children living in these homes are lead-poisoned when they put paint chips in their mouths or when they get house dust or exterior soil on their hands and put their hands in their mouths.

“It is important to test all Iowa children under the age of 6 years for lead poisoning because most lead-poisoned children do not have obvious symptoms,” said Rita Gergely, chief of the IDPH Bureau of Lead Poisoning Prevention.



The percent of children tested for lead poisoning has steadily increased from 32% of children born in 1992 to 57% of children born in 1998. The percent of children tested continues to increase – 63% of the children born in 2000 had already been tested by the end of 2004 (data for this birth cohort will not be complete until the end of 2006). Of the

children born in 1998 and tested before the age of 6 years, 7.5% were identified as lead-poisoned – nearly five times the national average of 1.6%. IDPH estimates childhood lead poisoning costs Iowa more than \$25 million per birth cohort in increased special education costs, increased medical costs, and decreased lifetime earnings for the children.

IDPH and its local partners work with parents and property owners to reduce exposure to lead for children who are lead-poisoned so their blood lead levels drop to less than 20 micrograms per deciliter ($\mu\text{g}/\text{dL}$) as quickly as possible, which limits the amount of damage to the child's development.

In FY2005, these activities helped to reduce the blood lead levels of 73% of the lead-poisoned children within 20 weeks. For a nominal investment, Iowa leverages federal funds to conduct childhood lead poisoning prevention activities, ensuring that Iowa's children have the opportunity to achieve educational and economic success as adults.

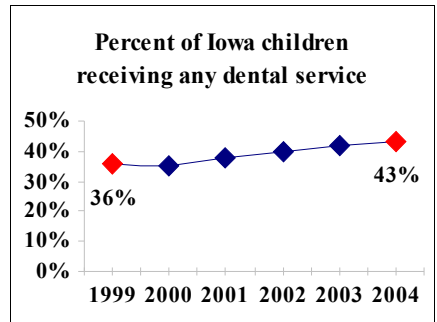
Success Stories – Improving Oral Health For Children

Good oral care is critical for children. The first comprehensive study on the nation’s oral health released recently by the Office of the U.S. Surgeon General calls dental and oral diseases a “silent epidemic,” even in children. The report states that more than 51 million school hours are lost annually to dental-related illness.

“This is important because oral problems can impact self-esteem for children and lead to problems eating, speaking and learning,” said Tracy Rodgers, IDPH Public Health dental hygienist.

The Iowa Access to Baby and Child Dentistry (ABCD) program and School-Based Dental Sealant Program help address these needs for Iowa’s children. The ABCD program was established to increase the capacity of communities to provide preventive oral health services; increase access to oral health services; and improve the oral health status of low-income children.

The program targets children from birth to age 21 who are enrolled in the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Care for Kids program, Iowa’s Medicaid program for children. Children under the age of five are a priority. Statewide, the percentage of children receiving dental service has increased from 36% in FY99 to 43% in FY04.



During FY05, the Oral Health Bureau’s School-Based Dental Sealant Program contractors served nearly 300 more children than in FY04. An additional 1,326 sealants were placed from the previous year for a total of 19,528 sealants.

The number of children with untreated tooth decay decreased by 3% and the number of Medicaid-enrolled children with untreated decay decreased by 6%. This indicates that preventive programs such as this one are reducing the amount of dental disease experienced by children, particularly those highest at risk.

“We see many benefits with this program,” said Rodgers. “It provides a preventive service before teeth decay. Kids are examined in school where it is determined if they need treatment or further assistance to use programs such as Hawk-i. It has also improved the local infrastructure and made people more aware of the needs and community-based services.”

Success Stories – Improving Substance Abuse Prevention

Substance abuse, crime, violence, and their related problems cost an estimated \$1,000 each year for every Iowan. A key to preventing these costly health and financial problems is community involvement.

The Office of Substance Abuse Prevention collaborates with many state agencies and organizations to put statewide prevention initiatives into action. Efforts target youth who are at higher risk for substance abuse or violence and include community coalition building, youth mentoring, workplace programming, volunteer-based prevention efforts, and school-based programs. The focus is on implementing science-based and model programs, such as the Iowa SAFE Community Network and Reconnecting Youth.

The Iowa SAFE Community Network encourages individuals, groups, and organizations to collaborate on projects and activities that build strengths and reduce risks in their communities. In Iowa, 13% of communities have substance abuse prevention SAFE certified coalitions. This is 3% higher than the target of 10%. Twelve Iowa counties have established countywide SAFE coalitions.

Counties with countywide SAFE coalitions

| | | | |
|------------|-----------|-----------|------------|
| Allamakee | Dallas | Linn | Van Buren |
| Benton | Dickinson | Palo Alto | Washington |
| Black Hawk | Henry | Scott | Winneshiek |

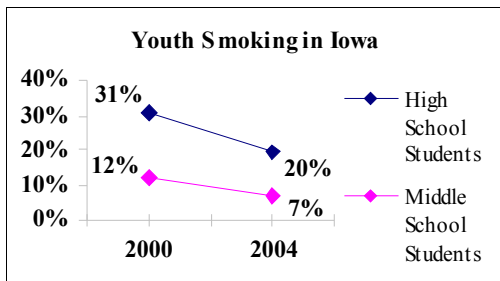
Reconnecting Youth (RY) is a school-based prevention program for youth in grades 9-12 at risk for school dropout. RY uses a partnership model involving peers, school personnel, and parents to deliver interventions.

Gayle Olson, a former Henry County SIG coordinator now with the Great River AEA shared this news from an RY teacher. “Because of an RY class, a student who was thinking of ending their life was able to get the help they needed. I want people to know the Reconnecting Youth program works and has saved a life.”

Success Stories – Reducing Youth Tobacco Use

The Tobacco Use Prevention and Control Division has been successful in substantially reducing tobacco use among Iowa’s youth. According to the 2004 Iowa Youth Tobacco Survey, smoking among Iowa high school youth has fallen to 19.5%, down from 31% in 2000. This is a decrease of more than one-third in only 5 years, and remains below the national average of 22% for high school smoking.

Smoking among middle school youth is now at 7%, down from 12% in 2000—cutting the number of middle school smokers by nearly one-half in 5 years. This is below the national average of 8% for middle school smokers.



One critical component in this success is the JEL (Just Eliminate Lies) program, Iowa’s youth-led tobacco use prevention campaign. Among high school students, more than 85% are aware of the JEL campaign and believe JEL is doing a good job of getting the anti-tobacco use message across to youth (2004 Iowa Youth Tobacco Survey). This is a phenomenal level of awareness and effectiveness for a public education campaign.

JEL has consistently been recognized as one of the most effective youth tobacco prevention campaigns in the nation. Last year, JEL President Kassie Hobbs, a senior from Bettendorf, was chosen as Youth Advocate of the Year by the Campaign for Tobacco Free Kids.

The JEL media campaign also received four awards for excellence in health communications from the National Public Health Information Coalition and a PRIME award from the Public Relations Society of America. Overall, the JEL media campaign has received 81 awards of excellence and recognition at the national, state, and local levels.

“The value and benefits of the IDPH Tobacco Division are many and have a synergistic effect,” said Sharon Wellendorf, chair of the Iowa Tobacco Commission. “Today, fewer Iowans smoke than ever before. Most teens know what JEL is, and more importantly, what it means.”

Wellendorf also noted that 94 of Iowa’s 99 counties have a community partnership that brings tobacco prevention, education, and cessation to a local level. “These activities impact all Iowans today and will continue to impact their future,” she said.

FY 2005 Performance Plan Report

Each year the Iowa Department of Public Health and local partners respond to the numerous challenges of infectious diseases, public health emergency preparedness, health promotion, disease prevention, chronic disease management, substance abuse prevention and treatment, tobacco use prevention and control, and environmental health. Our annual performance plan identifies our core functions and key services, products, and activities that help us achieve our mission to promote and protect the health of Iowans.

The following report provides a snapshot of what we do and what we accomplished this past year. We will use this data to identify opportunities for improvement and strategies to achieve the best results possible for Iowans.

Core Function: Child & Adult Protection

Programs provide prevention, protection, & support services to families & communities in Iowa to ensure strong families & safe communities.

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|---|---------------|---------------|--|
| Infant mortality rate per 1000 live births. | 5.7 | 5.1 | Iowa's infant mortality rate has decreased from 7.4 deaths per 1000 live births in 1994 to 5.1 in 2004. <i>Source: Vital Statistics of Iowa, 2004</i> |
| Child death rate per 100,000 children age 1-14 years. | 21.6 | 20.1 | Aggressive health & safety messages targeted at youth & their families are having a positive impact in reducing child deaths. <i>Source: Vital Statistics of Iowa & Iowa Child Death Review Team Database, 2004</i> |

Services/Products/Activities: **Investigate Deaths**

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|---|---------------|---------------|--|
| Percent of prior calendar year child deaths (age 0-17 years) investigated & documented. | 80% | 85% | Investigations of child deaths & the documentation of the cause of death are being completed more quickly. <i>Source: Iowa Child Death Review Team Database, 2004</i> |
| Percent of prior calendar year adult domestic abuse homicides & suicides investigated & documented. | 80% | 93% | This rate will fluctuate year-to-year based on the number of cases that are eligible for review (those with initial criminal justice dispositions). The 5-year average is 76%. <i>Source: Domestic Abuse Death Review Team Database, 2004</i> |
| Percent of autopsy reports completed within 90 days from date of death. | 95% | 93% | Out of 453 autopsies performed in FY2005, 421 reports were completed within 90 days of the autopsy (93%). <i>Source: State Medical Examiner's Office Case Log Files, SFY2005</i> |

Services/Products/Activities: **Prevent Violent Behavior**

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|---|---------------|---------------|--|
| Adult domestic violence death rate per 100,000 as reported through the Domestic Abuse Death Review Team. | 0.5 | 0.57 | The adult death rate due to domestic violence was 0.57 per 100,000 Iowans in 2004. The rate has averaged 0.55 since 2000. <i>Source: Domestic Abuse Death Review Team Database, 2004</i> |
| Percent of youth reporting they have not been involved in sexually related behavior that they wish would not have happened. | 85% | 84% | A new Iowa Youth Survey is being conducted in 2005. This question, however, was removed from the survey. A new performance measure will be reported for SFY06: "Rate of Iowans presenting to Iowa's emergency departments for treatment of sexual violence." <i>Source: Iowa Youth Survey, 2002</i> |

Services/Products/Activities: **Prevent Injuries & Disabilities**

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|--|---------------|---------------|--|
| Percent of deaths to children affected by non-use or inappropriate use of child restraints & seat belts. | 10% | 40% | Four of the ten children (40%) killed in 2003 & 2004 were not restrained in the vehicle. Iowa's child restraint use was 71% in 2004, down from 84% in 2003. <i>Source: Iowa Governor's Traffic Safety Bureau, 2003-2004</i> |
| Pre/post increase when rating health by participants in Living Well with a Disability classes. | 5 | 5.8 | Before & after completing the program, participants rated their overall health on a 0-100 scale. After completing the program, ratings improved an average of 5.8 from a baseline of 65.8. <i>Source: University of Iowa Center for Disabilities & Development pre- & post-class survey of participants in Living Well with a Disability (LWD) classes, SFY2005</i> |

Core Function: **Emergency Management, Domestic Security,
& Public Health Preparedness**

Programs develop & implement a system of public health & health care services to respond to public health emergencies & provide emergency medical & trauma services to Iowans.

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|---|---------------|---------------|---|
| Percent of response plans completed for statewide response to incidents of terrorism or catastrophic infectious disease. | 80% | 100% | All 99 counties have completed plans for statewide response to incidents of terrorism or catastrophic infectious disease. <i>Source: LPHA Progress Reports, 2004</i> |
| Percent of patients meeting the criteria of the Iowa trauma protocol transported to a trauma care facility in 30 minutes or less. | 90% | 79% | In FY2005, 79% of trauma patients were transported to a trauma care facility in 30 minutes or less. Average transport time was 22 minutes. <i>Source: EMS Patient Registry, FY2005</i> |

Services/Products/Activities: **Prepare for & Respond to Emergencies**

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|---|---------------|---------------|---|
| Percent of local public health agencies maintaining redundant communication systems through 800 MHz radio contracts. | 100% | 100% | All local public health agencies use redundant communication systems to ensure rapid distribution of public health advisories & 24/7 flow of critical health information during a disaster. <i>Source: Racom, SFY2005</i> |
| Percent of regions that have at least 2 public health & health care representatives trained to serve on Regional Public Information Officer Response Teams. | 66% | 100% | Every region had at least 2 public health & health care representatives trained to serve on Regional Public Information Officer Response Teams. <i>Source: IDPH Center for Disaster Operations & Response, SFY2005</i> |

Service/Product/Activity: **Prepare for & Respond to Emergencies**

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|---|---------------|---------------|--|
| Percent of state funds used in the training of EMS providers. | 75% | 99% | Nearly 100% of state funding was used to train Iowa’s EMS providers. <i>Source: IDPH Bureau of EMS, SFY2005</i> |

Core Function: **Health & Support Services**

Programs assure individual, community- & facility-based prevention, intervention, treatment, & support services are available to all Iowans.

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|---|---------------|---------------|---|
| Percent of infectious disease epidemiological follow-up contacts identified within 48 business hours of CADE's receipt of the report. | 97% | 98.1% | 935 of the 3019 disease reports received in 2004 required investigation referrals. Of these 935, follow-up contacts were identified within 48 hours for 917 cases (98%). It is essential to quickly investigate disease reports & distribute the findings to prevent other Iowans from getting sick. <i>Source: NETSS, 2004—National Electronic Telecommunications System for Surveillance</i> |
| Percent of Iowans rating their own health at good to excellent. | 88% | 88% | The vast majority of Iowans (88%) rate their health as good, very good, or excellent. This measure has remained constant over the last decade. <i>Source: IDPH Behavioral Risk Factor Surveillance System (BRFSS), 2004</i> |
| Death rate due to motor vehicle crashes (seat belt issue) per 100,000 population. | 15.3 | 13.9 | The death rate due to motor vehicle crashes declined from 15.5 per 100,000 Iowans in 2003 to 13.9 in 2004. <i>Source: Vital Statistics of Iowa, 2004</i> |
| Percent of Iowa high school students who are current smokers. | 31% | 19.5% | The percent of high school students who are current smokers has greatly decreased — from 31% in 2000 to 19.5% in 2004. <i>Source: Iowa Youth Tobacco Survey, 2004</i> |
| Percent of Iowa adults who are current smokers. | 21% | 20.3% | The percent of adult smokers decreased from 24% in 2002 to 20% in 2004. <i>Source: Iowa Adult Tobacco Survey, 2004</i> |

Services/Products/Activities: **Prevent & Treat Infectious Diseases**

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|--|---------------|---------------|---|
| Percent of children aged 19-35 months fully immunized. | 77.5% | 86.1% | Iowa's rate of 86% is a 5% increase from 2003 (81%) & better than the national average (81%). <i>Source: CDC National Immunization Survey (NIS), 2004</i> |
| Number of consultations provided to clinicians, local public health officials, hospital infection control staff, & the general public. | 8000 | 17,315 | The IDPH Center for Acute Disease Epidemiology continues to provide a large number of consultations to clinicians, local public health officials, hospital infection control staff, & the general public. <i>Source: IDPH Center for Acute Disease Epidemiology—Epi phone & e-mail logs, SFY2005</i> |
| Percent of cases with an early diagnosis (HIV cases that did not convert to AIDS within 12 months.) | 65% | 48% | More than half of all Iowans diagnosed with HIV in 2004 were subsequently diagnosed with AIDS within a year. This reflects a need for more testing, especially for those at highest risk. <i>Source: HIV/AIDS Reporting System, 2004</i> |
| Reported cases of chlamydia infection per 100,000. | 150 | 236 | Chlamydia is the most common sexually transmitted disease in the U.S. Iowa's rate has steadily increased from 189 cases per 100,000 in 1999 to 236 per 100,000 in 2004. This is still lower than the national rate of 304.3 per 100,000. <i>Source: STD Management Information System, 2004</i> |
| Percent of tuberculosis (TB) patients who complete a course of curative TB treatment within 12 months of initiation of treatment. | 98 | 97 | Nearly all TB patients completed a course of treatment within 1 year — up from 89.5% in 2000. <i>Source: IDPH TB Control Program, 2004</i> |

Services/Products/Activities: **Improve Child & Family Health**

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|--|---------------|---------------|--|
| Percent of children 0-5 enrolled in Healthy Opportunities for Parents to Experience Success-Healthy Families Iowa (HOPES-HFI) with health care coverage. | 95% | 99.7% | <p>Nearly all children enrolled in HOPES-HFI have health care coverage. Access to private providers for preventive & acute health care services has been increased through health care coverage for well-child care, oral health, immunizations, etc.</p> <p><i>Source: HOPES-HFI grantee family records, SFY2005</i></p> |
| Percent of women enrolled in Title V programs who receive prenatal care in the first trimester. | 90% | 83.4% | <p>In FFY 2004, 83% of the women enrolled in Title V received prenatal care in the first trimester. This positive trend is on pace to meet the Healthy People 2010 goal of 90%.</p> <p><i>Source: WHIS — Women's Health Information System, FFY2004</i></p> |
| Percent of children served by Title V who report a medical home, excluding children with special health care needs. | 60% | 61.1% | <p>Children served by Title V who have a medical home increased from 15% in 1997 to 61% in 2004. Medical homes assure medical care is coordinated with other health, social, or family support services. Coordinated care reduces hospitalizations & emergency room use, increases family & provider satisfaction, & improves the continuity of health care services.</p> <p><i>Source: CARES—Child & Adolescent Reporting System, SFY2004</i></p> |
| Percent of Medicaid-enrolled children, ages 1-20 years that receive any dental service. | 43% | 43.04% | <p>The percent of Medicaid-enrolled children, ages 1-20 years that have had any dental service in the last year has increased from 35% in 2000 to 43% in 2004.</p> <p><i>Source: Annual EPSDT report (Form CMS-416), Centers for Medicare & Medicaid Services, FFY2004</i></p> |

Services/Products/Activities: **Improve Child & Family Health**

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|--|---------------|---------------|---|
| Percent of all Iowa children ages 0-3 receiving early intervention services. | 2% | 2.1% | Between 1998 & 2004, the percentage of children being served has more than doubled (0.89% in 1998, 2.1% in 2004). <i>Source: Dept of Education IMS system, 2004</i> |
| Percent of children who receive newborn metabolic screening. | 99.7% | 99.2% | Iowa law requires all newborns & infants born in Iowa to be screened for certain treatable metabolic & inherited disorders. However, parents can choose not to have their children screened. A small number of Iowa parents chose not to have their children screened in 2004. <i>Source: University of Iowa Hygienic Laboratory, 2004</i> |

Services/Products/Activities: **Assure Iowa's Environmental Health**

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|---|---------------|---------------|---|
| Number of direct consultations provided to local boards of health or environmental health practitioners annually. | 450 | 1,583 | Our target was exceeded by 350%. IDPH continues to respond to the environmental health needs of local health departments & boards of health. <i>Source: IDPH phone & email logs maintained by Division of Environmental Health staff, SFY2005</i> |
| Percent of Iowa children who receive a blood lead test by the age of 6 years. | 65% | 57.1% | The percent of children tested for lead poisoning by age 6 is steadily increasing — from 26% in 1998 to 57% in 2004. However, there is still a need to educate providers & parents of the need to test children for lead poisoning. <i>Source: IDPH Childhood blood lead surveillance database, 2004 (for 1998 birth cohort)</i> |

Services/Products/Activities: Assure Iowa's Environmental Health

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|--|-----------------------------|-------------|--|
| Percent of lead-poisoned children under the age of 3 years whose blood lead levels drop to less than 20 micrograms per deciliter in 20 weeks. | 70% | 73% | <p>Nearly 3 out of 4 lead-poisoned children have their blood lead levels significantly decreased, limiting the amount of damage to their development, due to the testing, medical & environmental case management, & education about childhood lead poisoning provided by IDPH & local partners.</p> <p><i>Source: IDPH Childhood blood lead surveillance database, 2004</i></p> |
| Number of abandoned wells closed & private water wells renovated, eliminating potential pathways for contaminants to ground water. | Baseline set in FY05 | 2331 | <p>In SFY2005, over 7000 private water wells were tested for contaminants. 25% contained total coliform bacteria (an indicator that other disease-causing bacteria may also be in drinking water) & 11% had elevated Nitrate levels. Over 2000 abandoned wells were closed & private water wells renovated in SFY2005 to help assure safe drinking water in Iowa.</p> <p><i>Source: Dept. of Natural Resources Private Well Tracking System, SFY2005</i></p> |
| Percent of first responders (police, fire, medical, EMS) along the Interstate or rail corridor receiving hazardous materials transport training. | 5% | 13% | <p>13% of first responders (police, fire, medical, EMS) were trained in hazardous materials transport in SFY2005.</p> <p><i>Source: IDPH Training Registrations Database, 2004</i></p> |

Services/Products/Activities: **Prevent & Reduce Addictive Behaviors**

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|---|---------------|---------------|---|
| Percent of patients/clients substance free six months following discharge from treatment. | 42% | 51.4% | <p>In both 2003 & 2004, there was a greater than 50% decline in substance use 6 months after treatment. This period is especially important because up to 80% of relapses occur within 6 months after treatment.</p> <p><i>Source: IDPH Substance Abuse Reporting System, SFY2005</i></p> |
| Percent of Iowa incorporated communities with substance abuse prevention SAFE certified coalitions. | 10% | 13% | <p>Eleven counties have established countywide SAFE coalitions. Overall, 13% of all Iowa communities have a certified SAFE coalition.</p> <p><i>Source: Iowa SAFE Community Network SAFE Communities List (IDPH), SFY2005</i></p> |
| Percent of successfully discharged clients reporting no wagering in last 30 days. | 70% | 83% | <p>A large majority of clients (83%) indicate no wagering at the time of discharge from treatment.</p> <p><i>Source: IDPH Gambling Treatment Reporting System Discharge form Item 57, 2004</i></p> |

Services/Products/Activities: **Improve Access to Health Services**

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|---|------------------------------|---------------|--|
| Number of health care facilities that enhance or expand health care services to the underserved by increasing the health workforce & bureau-sponsored programs. | Baseline set in FY05. | 472 | Nearly 500 health care facilities were able to enhance or expand health services to the underserved in SFY2005 because of Bureau of Health Care Access programs. <i>Source: IDPH Bureau of Health Care Access contract records, SFY2005</i> |
| Number of times Health Care Access reports & data are accessed on the Web. | Baseline set in FY05. | 1890 | Health Care Access reports & data were frequently accessed from the IDPH Web site. <i>Source: IDPH Web Site Reports, SFY2005</i> |

Services/Products/Activities: **Promote Health & Manage Chronic Diseases**

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|---|---------------|---------------|--|
| Number of counties with at least 1 nutrition & physical activity program designed to influence positive behaviors to reduce the prevalence of obesity & overweight. | 11 | 13 | 13 counties have nutrition & physical activity programs that promote healthy behaviors. <i>Source: IDPH Cardiovascular Risk Reduction Program, SFY 2005</i> |
| Number of facilities certified to provide diabetes education to Medicaid clients. | 82 | 84 | 84 certified facilities in over 60 counties make diabetes education available to Iowans in all 99 counties. <i>Source: IDPH Bureau of Chronic Disease Prevention & Management, 2005</i> |

Services/Products/Activities: **Promote Health & Manage Chronic Diseases**

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|---|---------------|---------------|---|
| Percent of eligible women screened for breast cancers & cervical cancers. | 25% | 34.8% | Over 4000 Iowa women age 50-64 were screened for breast or cervical cancer in SFY2005 (34.8% of those eligible). <i>Source: IDPH Iowa Breast & Cervical Cancer Early Detection Program (BCCEDP), SFY2005</i> |
| Percent of Iowans who consume at least 5 servings of fruits & vegetables per day. | 22% | 17% | This question is asked every 2 years & will be asked in the 2005 survey (with results in early 2006). Target was set based on the 17% eating at least 5 servings of fruits or vegetables a day in 2003. Only 2 states had a lower percentage than Iowa in 2003. <i>Source: IDPH Behavioral Risk Factor Surveillance System (BRFSS), 2003</i> |
| Percent of home care aide clients where access to care has delayed, reduced, or prevented institutionalization. | 92% | 98% | Public Health Nursing & Home Care Aide funds used for home & community-based services for disabled & elderly who have no other source of funding almost always can delay, reduce, or prevent inappropriate institutionalization. <i>Source: Monthly utilization reports submitted to IDPH by local public health contractors, SFY2005</i> |

Core Function: **Regulation & Compliance**

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|---|---------------|---------------|--|
| Percent of complaints about health professionals resolved according to due process. | 90% | 100% | All formal discipline by the 23 IDPH licensing boards was preceded by due process. <i>Source: Licensing boards records, SFY2005</i> |

Services/Products/Activities: **Ensure Quality Health Professionals**

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|---|---------------|---------------|--|
| Percent of completed license renewals processed in 2 weeks. | 80% | 99.8% | Nearly all license renewals were processed within 2 weeks by the 23 IDPH licensing boards in FY2005. <i>Source: Licensing boards databases, SFY2005</i> |

Core Function: **Resource Management**

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|--|---------------|---------------|--|
| Percent of customers who are positively satisfied overall. | 90% | 98.9% | Target was exceeded. More recent customer surveys are necessary to assess continued customer satisfaction. <i>Source: IDPH Customer Satisfaction Survey, 2001</i> |

Services/Products/Activities: **Improve Organizational Performance**

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|--|---------------|---------------|---|
| Percent of Health Statistics data requests completed by mutually agreed upon deadline. | 95% | 99% | In SFY2005, 99% of requests were completed by the agreed deadline—an improvement from 86% in SFY2004. <i>Source: IDPH Health Statistics request database & Helpdesk, SFY2005</i> |

Services/Products/Activities: **Improve Organizational Performance**

| Performance Measure | Target | Actual | Performance Comments & Analysis |
|--|---------------|---------------|---|
| Percent of contracts requiring a corrective amendment. | 1% | 2.5% | There were 45 corrective amendments for 1,781 contracts in SFY2005 (2.5%). One amendment affected 36 contracts for the same program. Less than 1% of other contracts needed amendments. <i>Source: IDPH Bureau of Finance, SFY2005.</i> |
| Percent of information management (IM) projects completed as scheduled. | 75% | 81% | Over 80% of projects were completed on or before their target date. <i>Source: Information Management Status reports tracked with MS Project, SFY2005</i> |
| Percent of network-wide unscheduled downtime for the local area network. | 0.1% | 0% | There was no unscheduled downtime in SFY2005. This result far exceeds our target of 0.1% set as a minimum for reliable services. No other IM service is more vital to day-to-day operations. <i>Source: IDPH Big Brother monitoring system, SFY2005</i> |
| Average monthly number of media contacts. | 25 | 45 | Department visibility & credibility is enhanced through regular media contact & publication. The average number of contacts each month has increased from 32 in 2004 to 45 in 2005. <i>Source: Internal IDPH E-mail media contact notification form, SFY2005</i> |
| Percent of employee evaluations completed within 1 month of due date. | 75% | 70% | Timeliness of employee evaluations still needs to improve. The Department is 5% below target of 75%. <i>Source: Human Resources Information System (HRIS) Employee Records, SFY2005</i> |
| Percent of employees attending 3 trainings per year. | 60% | 69% | 2005 target was exceeded & a negative trend reversed. 38% of employees had attended 3 trainings in 2004, down from 54% in 2003. <i>Source: Employee Access Records, SFY2005</i> |

Program Details

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Abandoned Wells Project
Division of Environmental Health

Program Objective: To do well water testing, abandoned well closure, and rehabilitation of non-public water wells.

Program Services: An estimated 20% of the population in Iowa is served by private water wells. Approximately 20% of these wells are contaminated with total coliform bacteria. It is also estimated that 60,000 abandoned private water wells exist, presenting a risk to groundwater quality. The program ensures that local public health agencies have the available funds for testing wells, rehabilitating non-public wells, and closing wells no longer in service.

Population Served: Private well owners in Iowa. Indirectly, testing private wells, closing abandoned wells, and rehabilitating dilapidated wells ensures the safety of drinking water statewide.

Funding Source: Intra State Receipts (Department of Natural Resources Groundwater Protection Fund)

K13-1404

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|--------------------|--------------------|--------------------|
| State Funds | 0 | 0 | \$1,325 |
| Other Funds | \$1,008,247 | \$1,151,298 | \$1,330,000 |
| Total Funds | \$1,008,247 | \$1,151,298 | \$1,331,325 |
| FTEs | 0.35 | 0.35 | 0.35 |

Abstinence Education
Division of Health Promotion and Chronic Disease Prevention

Program Objective: To develop a system to facilitate coordination and collaboration within communities to support innovative, creative, community-based abstinence only education programs. Goals are to:

- Lower the pregnancy rate among teenagers.
- Reduce the proportion of adolescents who engage in sexual intercourse.
- Reduce the incidence of youths 15-19 years old who have contracted selected STDs.
- Increase the number of communities that focus on abstinence through abstinence-only education.
- Identify effective interventions through evaluation processes.
- Increase the state level of collaboration related to abstinence.

Program Services: Provide support to public and private entities for the development and implementation of abstinence education programs as defined by Section 510 of Title V of the Social Security Act.

Population Served: Adolescents (age 12 through 18) in communities across Iowa.

Funding Sources: Federal Grants

0153-0606/0610

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$616,099 | \$556,436 | \$870,011 |
| FTEs | 2.78 | 2.58 | 2.15 |

Abuse Education Review Panel
Division of Behavioral Health and Professional Licensure

Program Objective: Provides an objective method by which curricula for child and dependent adult abuse mandatory reporter training are reviewed and approved.

Program Services:

- Establishes standards by which curricula are approved.
- Uses standards to review curricula and communicates recommendations to applicants.
- Maintains a Web site containing training resources, list of approved curricula, code changes, and approval/renewal processes.
- Communicates with mandatory reporter trainers regarding necessary changes in curricula based on changes to Iowa Code or administrative rules.

Population Served: Employers of mandatory reporters, mandatory reporters, professional associations, regulatory boards, human resource and training professionals, and advocates for dependent adult abuse and/or child abuse prevention.

Funding Sources: Unfunded mandate

**Academic Health Department
Director's Office**

Program Objective: Create collaborative opportunities between the department and the University of Iowa's College of Public Health (UI CPH), including, but not limited to, practice-based internships and research projects on current public health issues. The practice-based internships provide experience to students, who will be relied on heavily in years to come to replace Iowa's aging public health workforce.

Program Services: Department staff provides practice-based internship opportunities for UI CPH's masters of public health (MPH) students and conducts joint research projects of current public health issues with UI CPH faculty.

Population Served: UI CPH students benefit from the practice-based internships. The department and local public health providers will rely heavily on these students to replace Iowa's aging public health workforce. The joint research projects benefit those individuals impacted by a current public health issue.

Funding Source: Grant from the University of Iowa.

0153-2228

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$1,921 | \$6,246 | \$12,000 |
| FTEs | 0.03 | 0.11 | 0.00 |

Acute Disease Prevention and Emergency Response Division Director
Division of Acute Disease Prevention and Emergency Response

Program Objective: Supervision of the Bureau of Disease Prevention and Immunization, Center for Acute Disease Epidemiology, Center for Disaster Operations and Response, Bureau of Emergency Medical Services, and the Bureau of Information Management.

Identify and monitor complex policy issues in diverse program areas for program and administrative consequences. Responsible for legislative direction, administrative rules, and additional fiscal/policy information for the division. Responsible for providing input on department-wide policy, fiscal and program issues. Serves as a member of the department's executive team and regularly attends senior staff meetings. Responsible for implementing the department's personnel policies and procedures within the division. Responsible for final selection of personnel and discipline within the division.

Represents IDPH at private sector, state, and national meetings. Serves on agency and inter-agency committees and makes final decisions that have impact on operation of all division programs.

Program Services: Provides the functional and supervisory oversight for infectious and communicable disease programs, immunization, emergency medical services, Iowa's public health and hospital bioterrorism programs, and the information management program for the department.

Population Served: The division director provides functional and supervisory oversight for the Center for Acute Disease Epidemiology (CADE), the Bureau of Emergency Medical Services (EMS), the Center for Disaster Operations and Response (CDOR), the Bureau of Disease Prevention and Immunization, and the Bureau of Information Management. The division works closely with multiple local, state, and federal partners as well as with other department programs.

Funding Source: Federal Indirect Funds

0153-2154

| Fiscal Year | 04 Actual * | 05 Actual | 06 Estimate |
|--------------------|--------------------|------------------|--------------------|
| Federal Funds | \$98,462 | \$129,840 | \$141,500 |
| FTEs | 0.12 | 1.00 | 1.00 |

* Additional expenditures were included in other program areas.

**Administrative Division Director
Department Director's Office**

Program Objective: The Administrative Division Director was responsible for the internal operations that fulfilled the department's mission of promoting and protecting the health of Iowans.

This division director position was eliminated during FY 2004 due to general fund budget cuts. Responsibilities of that position were reassigned to the other division directors. Ongoing expenses in this area are due to the mandated early retirement payouts of the previous division director.

Funding Source: General Fund Appropriation and Federal Indirect Funds

K21-2151; 0153-2152

| Fiscal Year | 04 Actual | 05 Actual | 06Estimate |
|--------------------|------------------|------------------|-------------------|
| State Funds | \$107,874 | \$25,200 | \$25,200 |
| Federal Funds | \$25,725 | \$0 | \$0 |
| Total Funds | \$133,599 | \$25,200 | \$25,200 |
| FTEs | 1.06 | 0.00 | 0.00 |

Adult Lead
Division of Environmental Health

Program Objective: To establish a surveillance system to identify adults with elevated blood lead levels, to investigate related occupational hazards, and to implement preventive education for employers and their employees.

Program Services:

- Identifying elevated blood lead levels in adults
- Providing education to workers and employers on lead exposure
- Maintaining a statewide surveillance database

Population Served: All adults in Iowa who are exposed to lead or are potentially exposed to lead through employment activities.

Funding Source: Federal Grant

0153-0402

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$27,218 | \$20,889 | \$21,440 |
| FTEs | 0.00 | 0.00 | 0.00 |

AIDS Prevention and Surveillance Project
Division of Acute Disease Prevention and Emergency Response

Program Objectives: To implement a comprehensive HIV/AIDS prevention and intervention program aimed at providing education, prevention, case detection, partner counseling and referral services, and statistical data collection.

Program Services:

- Provide testing for the presence of HIV and educate targeted populations on behaviors that place people at high risk for exposure to HIV infection.
- Provide education and counseling support at the county health department level for individuals who have tested positive for HIV.
- Provide case finding, follow-up investigations of cases of special epidemiological significance, evaluation of the performance of the surveillance system, and presentation of HIV/AIDS data for prevention and health services, planning and evaluation.
- Support the activities of a community-planning group that determines priority target populations and the most appropriate prevention intervention activities for those populations.
- Provide training to those who counsel persons requesting HIV testing.
- Assess risk behaviors of those tested for HIV with information from the testing sites and from HIV/AIDS case reports to determine future prevention, community planning, and health services needs.
- Convene a forum for stakeholders to discuss “A Comprehensive Approach to Preventing Blood-borne Infections Among Injection Drug Users.”

Population Served: Funds are contracted to local public health and community-based agencies providing HIV testing and health education/risk reduction services. All Iowans are eligible for the services.

Funding Sources: Federal Grant, Intra State Receipt (Department of Education Grant) and Private Grant (FY 06)

0153-1568/1572/1570/1574

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|--------------------|--------------------|--------------------|
| Federal Funds | \$2,057,764 | \$1,673,841 | \$1,839,790 |
| Other Funds | \$36,600 | \$28,600 | \$80,665 |
| Total Funds | \$2,094,364 | \$1,702,441 | \$1,920,455 |
| FTEs | 9.21 | 7.87 | 8.65 |

Arthritis Program

Division of Behavioral Health and Professional Licensure

Program Objective: To reduce the impact of arthritis and improve the quality of life of Iowans affected by arthritis.

Program Services:

- Increasing awareness of arthritis, early diagnosis, and management strategies through health communications materials, presentations, displays, and personal contact.
- Providing education and resources to health care practitioners and others by conducting Arthritis Foundation Self-Help Program leader training statewide and promoting other education, training opportunities, and resources.
- Providing technical assistance to local public health, other agencies, and individuals conducting programming for people with arthritis.
- Expanding access for people with arthritis to evidence-based self-help programs, land-based exercise programs, and water-based exercise programs by working with the Arthritis Foundation (Iowa Chapter) and other partners.
- Collecting and analyzing data and reporting the impact of arthritis in Iowa.
- Facilitating the Iowa Arthritis Task Force, which guides program activity and participates in the *Iowa Arthritis Action Plan* and program interventions.

Population Served: The targeted audience is the estimated 585,000 Iowans who have been diagnosed with arthritis, the additional 384,000 Iowans with possible arthritis (chronic joint symptoms), and their support systems.

Funding Source: Federal Grant

0153-0414

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|---------------|-----------|-----------|-------------|
| Federal Funds | \$116,201 | \$159,255 | \$113,001 |
| FTEs | 1.02 | 1.30 | 1.20 |

**Assuring Better Child Health and Development (ABCD II)
Division of Health Promotion and Chronic Disease Prevention**

Program Objective:

- To identify and implement policy and system changes to support the provision of preventive care by Medicaid providers to children ages 0 through 3. Design a system that encompasses three levels of service.
 - Level 1 Services – Preventive developmental services for all Medicaid eligible children to include developmental/mental health surveillance, standardized developmental/mental health assessment, family risk screening and assessment, anticipatory guidance, and care coordination.
 - Level 2 Services – Developmental services for children receiving Medicaid who are considered to be at risk for developmental or social/emotional problems.
 - Level 3 Services – Developmental/mental health evaluation and intensive intervention services currently provided through Iowa Early ACCESS and Medicaid’s Mental Health Managed Care program.

Program Services:

- Build the capacity of Iowa primary health care providers to provide Level 1 services.
- Establish desired minimum standards for a Level 1 system. Identify and promote the use of appropriate surveillance, screening and assessment tools, anticipatory guidance, and select effective health promotion materials.
- Create Medicaid policies and guidelines to promote the adoption of the minimum standards for surveillance, family risk assessment, anticipatory guidance, developmental screening, and care coordination.
- Establish two demonstration projects to test the Level 1 system standards and tools and link existing Level 2 services into the Early, Periodic, Screening, Diagnosis and Treatment (EPSDT) healthy mental development services system.
- Build the capacity of Iowa’s public and private health systems to promote healthy mental development through the enhancement of the delivery of Level 2 services and improved linkages with service providers.
- Identify effective models of public-private partnership for the delivery of healthy mental development services.
- Define Level 2 services and identify current public and private Level 2 service providers in the state.
- Assess gaps and barriers in providing Level 2 services in the demonstration projects and develop recommendations for the further development of Level 2 services in Iowa.

Population Served: Children 0 through 3 years who are on Medicaid.

Funding Source: Intra State Receipt (Department of Human Services)

0153-0692

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$4,627 | \$86,126 | \$69,738 |
| FTEs | 0.22 | 1.25 | 0.15 |

Asthma Control Program
Division of Health Promotion and Chronic Disease Prevention

Program Objective: To help reduce the burden of asthma in Iowa by planning and operating an Asthma Control Program based on scientific/sound evidence, health behavior models, and effective management and education strategies.

Program Services:

- Defining the impact and burden of asthma.
- Monitoring asthma risk factors.
- Implementing the goals and action steps of the state plan on asthma, *Asthma in Iowa: The Iowa Plan for Improving the Health of Iowans with Asthma*.
- Providing education and resources to community organizations to enable them to focus on providing resources and education about asthma and its triggers to their communities.
- Ensuring that Iowans who have asthma and their families are empowered, knowledgeable, and capable of taking responsibility for their own health outcomes.
- Supporting public policy at all levels for a healthy citizenry and a reduction in the incidence and severity of asthma in Iowa.

Population Served: All Iowans with asthma. Based on the *Asthma in Iowa Surveillance Report 1995 to 2000*, approximately 200,000 Iowans have asthma.

Funding Source: Federal Grant

0153-0702

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$199,171 | \$228,562 | \$298,464 |
| FTEs | 2.12 | 2.24 | 2.25 |

Automated External Defibrillators (AED) Capitol Complex Public Access Defibrillation (PAD) Emergency Response Program
Division of Acute Disease Prevention and Emergency Response

Program Objective: To provide overall guidance and direction for the Automated External Defibrillator (AED) / Public Access Defibrillation (PAD) / program for the AED Matching Grant Program, the AED Rural Grant Program, and on the Capitol Complex to ensure that PAD response is included in each building’s current emergency plan and to administer the statewide AED grant.

Program Services: This program is to enhance early defibrillation in the Capitol Complex’s 13 buildings by strategically placing automatic external defibrillators (AEDs) to achieve a rapid response time from collapse to EMS on scene. Additionally, the FTE for this program will manage the state’s AED matching grant program.

Population Served: Iowans of all ages and visitors to communities throughout the state and on the Capitol Complex, in need of early defibrillation.

Funding Sources: Tobacco Fund Appropriation

K83-8502

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Tobacco Funds | \$0 | \$0 | \$100,000 |
| FTEs | 0.00 | 0.00 | 1.00 |

Automated External Defibrillators (AED) Matching Grant Program
Division of Acute Disease Prevention and Emergency Response

Program Objective: To provide matching funds to eligible organizations that are seeking to implement an early defibrillation program. The objective of this program is to enhance the emergency response system in rural areas of the state where access to health care providers is often limited, by providing increased access to automated defibrillators.

Program Services: This program provides matching funds to local boards of health, community organizations, or cities in rural Iowa to establish and implement an automated external defibrillation program. The leading cause of death in people over 44 years is cardiac arrest and studies have demonstrated that having an early defibrillation program available at the time of a cardiac arrest more than doubles the chances of survivability of the patient.

Population Served: Iowans of all ages and visitors in rural areas, in need of early defibrillation.

Funding Sources: Tobacco Fund Appropriation

K83-8302

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Tobacco Funds | \$0 | \$232,558 | \$250,000 |
| FTEs | 0.00 | 0.00 | 0.00 |

Automatic External Defibrillators (AED) Rural Grant Program
Division of Acute Disease Prevention and Emergency Response

Program Objective: To develop and implement a program to provide priority access to upgraded automated external defibrillators that are non-age specific for placement in rural emergency medical service (EMS) programs, law enforcement agencies, schools, and community centers.

Program Services: This program provides the opportunity for rural EMS services to upgrade their current AED and in turn donate their AED to a local law enforcement agency, school, or community group. In FY 2005, 186 new defibrillators were delivered. This program is unique in that when a new defibrillator is purchased, the used defibrillator is donated at the local level. So, for each new defibrillator purchased and delivered, two may actually be put into service.

Population Served: Rural Iowans in need of emergency medical services and external defibrillation.

Funding Source: Federal Grant

0153-1726

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$267,431 | \$270,873 | \$188,661 |
| FTEs | 0.00 | 0.00 | 0.00 |

Barn Raising Conference
Division of Behavioral Health and Professional Licensure

Program Objective: Promote and support the core public health functions of assessment, assurance, and policy development for the enhancement of quality health services for all populations in the state.

Program Services:

- Educational presentations with a target audience of health care providers, public health agency officials, health advocacy groups and others interested in improving public health.
- Coordination and support of the IDPH empowerment state team members and local boards of health.
- Planning and organization of technical assistance to local communities in areas of community health, integration of health care systems, disease prevention, and health promotion.
- Collaboration with other state agencies in organization of a unified approach to meeting local community needs.
- Established communications within the department regarding local community programs and coordination of services.
- A resource to the department on current trends in community health and the local health care environment.

Population Served: The biennial conference is designed for more than 700 health care providers, public health agency officials, health advocacy groups, and others interested in advancing public health.

Funding Sources: Private Donations and Registration Fees

0153-0954

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$57,178 | \$10,622 | \$82,000 |
| FTEs | 0.00 | 0.00 | 0.00 |

Behavioral Health and Professional Licensure Division Director
Division of Behavioral Health and Professional Licensure

Program Objective: To provide the organizational oversight and maintain operational responsibility for the complete scope of public health services provided by the division.

Program Services:

- Promulgating administrative rules
- Providing inter- and intra-agency state and federal collaboration and coordination
- Monitoring personnel functions
- Identifying legislative issues
- Monitoring performance measures
- Ensuring that federal regulations are met
- Increasing revenues for services through the writing of federal grants
- Monitoring secretarial support

Population Served: All Iowans benefit from information and services provided by the division related to the prevention and treatment of chronic disease and regulation of 23 licensing boards.

Funding Source: Federal Indirect Funds

0153-2156

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$137,582 | \$128,377 | \$131,500 |
| FTEs | 1.79 | 1.00 | 1.00 |

Behavioral Health Data

Division of Behavioral Health and Professional Licensure

Program Objective: To integrate performance measures into a Web-based data system.

Program Services:

- Training programs in the use of an integrated data system
- Linking existing databases containing criminal justice data to substance abuse treatment data
- Providing data to the federal government that can be used in secondary analysis

Population Served: The following populations are served:

- Substance abuse treatment programs
- Other state agencies
- Federal government

Funding Source: Federal Grant

0153-0212

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$33,991 | \$121,488 | \$100,000 |
| FTEs | 0.52 | 0.50 | 0.10 |

Behavioral Risk Factor Surveillance System (BRFSS)

Division of Environmental Health

Program Objective: To improve and maintain health and wellness for all the citizens of Iowa.

Program Services: The purpose and function of the program is to collect prevalence data of self-reported health-risk behaviors of residents over 18 years through an ongoing statewide random telephone survey. The survey monitors the prevalence of these health risk behaviors over time.

- The information gathered assists policymakers and public health officials in planning and implementing timely intervention strategies by identifying health-risk behaviors to design and plan effective intervention strategies.
- Some of the risk factors discussed are: general health status; health care coverage; cigarette smoking; alcohol consumption; body weight; hypertension; cholesterol awareness; cancer screening; oral health and HIV/AIDS awareness.

Population Served: Telephone surveys are conducted statewide. The results reflect the health behavior status of all Iowans and help the department in providing programs and services that meet the public health needs of the entire population.

Funding Sources: Federal Grant

0153-0456

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$182,526 | \$224,341 | \$301,304 |
| FTEs | 0.62 | 1.00 | 1.00 |

Bioterrorism Hospital and Emergency Medical Services (EMS) Preparedness and Response

Division of Acute Disease Prevention and Emergency Response

Program Objective: Provides for the upgrading of Iowa’s hospitals, EMS systems, and collaborating health care entities to respond to health care emergencies, disasters, and bioterrorism.

Program Services: Six priority-planning areas require development and implementation of preparedness and response activities, which include the following:

- Administration: Governance, administration, and program direction for strategic plan development, assessment, and evaluation of program effectiveness.
- Surge Capacity: Development and implementation of hospital surge capacity, equipment and supply resource capacity, foster implementation of mutual aid agreements and addressing decontamination, personal protection, isolation, and quarantine.
- EMS: Integration of bioterrorism and disaster preparedness into Iowa’s EMS system development program.
- Linkage with Public Health Departments: Integration of hospital laboratories into the bioterrorism preparedness program under the leadership of the University Hygienic Laboratory.
- Education and Preparedness Training: Assurance of the delivery of multiple education and training sessions to key infectious disease specialists, emergency-department personnel, and other health care providers.
- Terrorism Preparedness Exercises: Development and delivery of terrorism exercises to ensure participation by hospitals, EMS, and other health care agencies.

Population Served: All licensed hospitals, EMS service programs, and associated health care agencies.

Funding Source: Federal Grant

0153-1934

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$3,392,445 | \$5,259,152 | \$4,864,677 |
| FTEs | 4.56 | 4.41 | 4.50 |

Bioterrorism Public Health Preparedness and Response
Division of Acute Disease Prevention and Emergency Response

Program Objective: To upgrade state and local public health preparedness for and response to bioterrorism, outbreaks of infectious disease, and other public health threats and emergencies.

Program Services: Focus areas require development and implementation of preparedness and response activities, which include the following:

- Preparedness Planning and Readiness Assessment: Build infrastructure support for strategic leadership, direction, inter-agency collaboration, and coordination of the public health community to ensure state and local preparedness and readiness.
- Epidemiology and Surveillance: Rapidly detect a terrorist incident through a 24/7 reportable disease surveillance system to be used by health care providers, laboratories, and public health agencies.
- Laboratory Capacity: Biological and Chemical Agents: Develop and implement a jurisdiction-wide program of rapid and effective laboratory services for biological and chemical agents to support response to bioterrorism or other public health threats and emergencies.
- Communication and Information Technology: Provide for effective communication (Health Alert Network) to public health departments, health care organizations, and law enforcement through high speed Internet, use of email, paging system, blast fax and 800 MHz radios.
- Risk Communication and Public Information: Support the development of risk-communication plans and processes to disseminate and educate the public on exposure risks and protection.
- Education and Training: Ensure the delivery of multiple education and training sessions to key public health, infectious disease specialists, emergency department personnel, and other health care providers.

Population Served: Plans are developed to protect the health and lives of Iowans through cooperative planning and participation with multiple agencies and emergency response partners in all 99 counties.

Funding Sources: Federal Grant and Intra State Receipt (Department of Public Defense Grant)

0153-1924 (FY 04 only)/1932

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|---------------------|---------------------|---------------------|
| Federal Funds | \$10,108,937 | \$10,677,095 | \$10,676,593 |
| Other Funds | \$0 | \$0 | \$30,000 |
| Total Funds | \$10,108,937 | \$10,677,095 | \$10,706,593 |
| FTEs | 22.88 | 21.69 | 22.50 |

**Board of Dental Examiners
 Department Director’s Office**

Program Objective: To administer and enforce statutes and administrative rules for the practice of dentistry, dental hygiene, and dental assisting.

Program Services:

- Establishes the standards for initial licensure through examination and consideration of applications and initial issuance of licenses.
- Sets the standards for renewal of licenses as well as monitoring of license/registration renewal requirements. This includes review of education requirements, course review for relevancy, and applicability and sponsoring approval of continuing education.
- Sets the standards for issuance of permits to allow for the administration of general anesthesia, conscious sedation, and utilization of nitrous oxide in dental facilities.
- Investigation of complaints of violations of the Dental Practice Act and Iowa Administrative Code, which may result in conducting disciplinary hearings and monitoring compliance of licensees with board orders.
- Oversight of the Iowa Practitioner Review Committee program. The committee monitors impaired licensees and registrants who self-report or are under order of the board.
- Establish policy affecting the practice of dentistry through promulgating administrative rules in accordance with legislative mandates.

Population Served: Services, which benefit the health of all Iowans, are provided to dentists, dental hygienists, and dental assistants.

Funding Sources: General Fund Appropriation and Retained Fees

K19-2061/2062/2063

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$362,460 | \$369,369 | \$379,008 |
| Other Funds | \$196,902 | \$201,775 | \$374,962 |
| Total Funds | \$559,362 | \$571,144 | \$753,970 |
| FTEs | 7.06 | 7.03 | 7.00 |

**Board of Medical Examiners
Department Director's Office**

Program Objective: To ensure that medical doctors (MD) and doctors of osteopathy (DO) and non-physician acupuncturists meet minimum qualifications for licensure in Iowa and that they practice with reasonable skill and safety consistent with the prevailing standard of care.

Program Services:

- Processing licensure applications and, if necessary, investigating applicants, issuing and renewing resident, special, temporary, and permanent licenses, and collecting associated fees.
- Establishing policy that affects the practice of medicine.
- Auditing licensee's continuing education and mandatory training.
- Investigating complaints and malpractice cases, preparing investigative reports, coordinating peer-review of competency cases, issuing charges, negotiating settlements, holding hearings, and policing compliance with the board's disciplinary orders.
- Operating the Iowa Physician Health Program, which monitors enrolled physicians and acupuncturists with substance abuse or physical or mental impairments.

Population Served: Services, which benefit the health of all Iowans, are provided to MDs, DOs and acupuncturists who seek licensure to practice in Iowa or any of these professionals who are already licensed in Iowa.

Funding Sources: General Fund Appropriation and Retained Fees

K19-2071/2072/2075/2078

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|--------------------|--------------------|--------------------|
| State Funds | \$1,397,706 | \$1,418,423 | \$1,487,061 |
| Other Funds | \$181,222 | \$180,910 | \$450,095 |
| Total Funds | \$1,578,928 | \$1,599,333 | \$1,937,156 |
| FTEs | 19.33 | 18.86 | 21.15 |

**Board of Nursing Examiners
Department Director's Office**

Program Objective: To protect the public health, safety and welfare by ensuring that nursing is practiced by at least minimally competent licensed individuals who practice within their authorized scope of practice. The board derives its legal authority for regulating and enforcing regulations for nursing education, nursing practice, and continuing education for nurses under the provisions of Iowa Code chapters 17A, 147, 152 and 272C.

Program Services:

- Issuing original licenses. Endorsing, renewing, reactivating, and reinstating nurses' licenses. Verifying licensure records to other states or employers.
- Investigating more than 400 complaints per year and ordering approximately 135 of those cases to hearing. Monitoring sanctioned licensees to ensure compliance with board-ordered requirements.
- Auditing facilities to ensure that only licensed nurses are employed and ongoing planning to assure an adequate supply of nurses.
- Promulgating administrative rules that are critical to the effective administration and management of the agency and the policies established by the board.
- Staffing ad hoc committees that address nursing practice.
- Registering advanced nurse practitioners, and renewal of their licenses.
- Drafting declaratory rulings and responding to practice questions from the public, employers, and nurses.
- Surveying nursing-education programs, supporting continuing education as a requirement for re-licensure, overseeing the continuing-education provider system, and overseeing licensure examinations.

Population Served: Services, which benefit the health of all Iowans, are provided to anyone seeking a nursing license in Iowa.

Funding Sources: General Fund Appropriation and Retained Fees

K19-2081/2082/2083/2085/2087/2088

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|--------------------|--------------------|--------------------|
| State Funds | \$956,007 | \$998,265 | \$1,044,811 |
| Other Funds | \$399,413 | \$372,297 | \$427,954 |
| Total Funds | \$1,355,419 | \$1,370,562 | \$1,472,765 |
| FTEs | 16.21 | 17.51 | 19.00 |

**Board of Pharmacy Examiners
Department Director's Office**

Program Objective: The board is responsible for the administration and enforcement of laws affecting persons and businesses engaged in the practice of pharmacy and distribution of prescription medications and controlled substances in Iowa. Included is the protection of the health and welfare of Iowa consumers through maintenance of minimum practice standards.

Program Services:

- Administration of standardized examinations to qualified applicants and determination and verification of applicant qualifications for initial licensure.
- Processing of initial and renewal applications for registration of qualified applicants under the Iowa Uniform Controlled Substances Act, for the registration of pharmacy technicians and pharmacist interns, and for the licensure of pharmacists, pharmacies, and drug wholesalers.
- Monitoring of Iowa pharmacist continuing education requirements.
- Investigation of complaints alleging incompetence of pharmacy professionals and support personnel or alleging violations of pharmacy law by individuals or businesses under the regulatory control of the board and monitoring compliance with the terms of probation or other discipline imposed by the board. Preparation of complaints, orders, settlement agreements, and other documents and notices in disciplinary cases.
- The adoption of rules and procedures in accordance with legislative mandates to reflect evolving standards of pharmacy practice and to better control the legal distribution of controlled substances.
- Conducting contested case hearings and imposing appropriate disciplinary sanctions against offenders of the laws and regulations governing board regulated activities and professions.

Population Served: Services, which benefit the health of all Iowans, are provided to pharmacists, pharmacies, drug wholesalers, pharmacy technicians, pharmacist interns, and any person or business involved in the distribution of controlled substances in Iowa.

Funding Sources: General Fund Appropriation, Retained Fees, and Federal Grant

K19-2091/2092/2093/2095/2096

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|--------------------|--------------------|
| State Funds | \$730,868 | \$769,706 | \$780,642 |
| Federal Funds | \$0 | \$0 | \$50,000 |
| Other Funds | \$75,979 | \$740,165 | \$798,271 |
| Total Funds | \$806,847 | \$1,509,871 | \$1,628,913 |
| FTEs | 8.89 | 13.30 | 15.00 |

Brain Injury Advisory Council
Division of Behavioral Health and Professional Licensure

Program Objective: To support the activities of the Advisory Council on Brain Injuries by:

- Studying the needs of individuals with brain injury and their families.
- Making recommendations regarding the planning, development, and administration of a comprehensive statewide service delivery system.
- Promoting and implementing injury prevention strategies.
- Seeking funds from the federal government and private organizations.

Program Services:

- Coordination of council meetings and activities.
- Attending workgroups and coalitions to improve service delivery for all persons with disabilities, while representing persons with brain injury.
- Providing increased brain injury information, awareness, and educational opportunities for professionals, service providers, and families experiencing brain injury.
- Provide public awareness and/or training forums.

Population Served: Iowans with a brain injury, their family members, and the service providers. Approximately 50,000 Iowans are living with long-term disability from brain injury. Each year, approximately 2000 to 2500 Iowans sustain a traumatic brain injury severe enough to require hospitalization.

Funding Source: General Fund Appropriation

K17-1801

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$63,519 | \$65,577 | \$63,169 |
| FTEs | 1.01 | 0.43 | 1.00 |

Breast and Cervical Cancer Early Detection (BCCEDP)
Division of Health Promotion and Chronic Disease Prevention

Program Objective: To increase the number of underserved women age 50-64 years who are screened for breast and cervical cancer.

Program Services: Through contracts with local boards of health, local health care providers perform screening and diagnostic breast and cervical cancer health services for enrolled women. Additional services include:

- Outreach
- Enrollment
- Case management
- Data collection
- Referral services

Population Served: Under-insured and uninsured women with household income of no more than 250% of the federal poverty guideline. The target population for service is 50-64 years. Women of younger ages may also receive limited services through the program.

Funding Source: Federal Grant

0153-0408

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$2,580,993 | \$2,923,863 | \$2,947,071 |
| FTEs | 5.66 | 4.78 | 4.82 |

Breast Cancer Awareness License Plates
Division of Health Promotion and Chronic Disease Prevention

Program Objective: To provide funding from the sale of specialized breast cancer awareness license plates for breast-cancer support services through the Susan G. Komen Foundation or other nonprofit entities.

Program Services: The program provides funding for breast cancer support services across the state based on the amount of funds collected by the Department of Transportation from the sale of the license plates.

Population Served: All women in Iowa.

Funding Source: Intra State Receipt (Department of Transportation – License Plate Sales)

K03-0424

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds(DOT) | \$0 | \$32,610 | \$16,000 |
| FTEs | 0.00 | 0.00 | 0.00 |

Brownfields Program
Division of Environmental Health

Program Objective: To provide a pro-active approach to assessing the public health impact of Brownfields sites throughout Iowa. This allows considerations for health impacts in the beginning stages of a Brownfields project during Iowa Department of Natural Resources' (IDNR) Targeted Brownfields Assessments. Health concerns about real or perceived contamination can be addressed from the start of a project to help assure local governments, community members, and investors that projects will be successful. IDPH will work along side IDNR in the communities to assure that health questions are identified and answered sufficiently.

Program Services: The IDPH Hazardous Waste Site Health Assessment Program has entered into a Memorandum of Understanding (MOU) with the Iowa Department of Natural Resources (IDNR) to provide health consultations, site-specific fact sheets, health education, and community outreach activities at numerous Brownfields sites within the state of Iowa. In addition, IDPH will provide technical assistance on health implications during the ongoing redevelopment process to Iowa communities enrolled in the state Brownfields program. Because there is an indication of the future-use of the site, realistic exposure scenarios can be developed and used in the Health Consultation and Health Education process to accurately depict the true health liability of the site.

Population Served: Communities enrolled in the IDNR's Brownfields redevelopment program. At present, 13 communities throughout Iowa have enrolled in the program. However, this number is expected to increase within the coming year. Each of these communities has Environmental Justice and/or Health Disparity issues.

Funding Source: Intra State Receipt (Department of Natural Resources)

0153-1314

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$0 | \$25,615 | \$77,974 |
| FTEs | 0.00 | 0.20 | 0.60 |

**Center for Acute Disease Epidemiology (CADE)
 Division of Acute Disease Prevention and Emergency Response**

Program Objective: To provide acute disease surveillance activities across Iowa. This includes outbreak management and medical consultation during infectious disease and foodborne outbreaks, assessing and developing information and education strategies to prevent and control the spread of disease, and working with local health care providers, public health providers, long-term care facilities, hospitals, and the public to protect the health of Iowans.

Program Services: Surveillance and epidemiological data collection of reportable diseases in Iowa. This data is analyzed regularly to assess the health of Iowans. This includes:

- Assessing infectious disease events/situations that put the health of Iowans at risk.
- Investigation of potential outbreaks.
- Initiate prevention and control measures to decrease risk of exposure.

The center is involved in:

- Developing and implementing a disease surveillance system capable of detecting a terrorism incident including a system to receive and evaluate urgent disease reports on a 24/7 basis.
- Enhancement of the state’s bioemergency plan.
- Education of local public health staff in roles/responsibilities associated with outbreak management and epidemiological analysis.
- Providing effective and ongoing capability to respond to urgent public health threats and emergencies.
- Work jointly with local public health agencies to complete the follow-up of individual cases of specific diseases or investigation of outbreaks.
- Providing day-to-day acute disease assessments.

Population Served: All Iowans benefit from information provided by the center by the identification, prevention, and control of diseases (such as West Nile virus, influenza) and the surveillance, analysis, and response to diseases, which threaten the population.

Funding Source: General Fund Appropriation and Federal Grant

K15-1501; 0153-1502

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$387,582 | \$403,293 | \$425,681 |
| Federal Funds | \$10,684 | \$36,109 | \$64,872 |
| Total Funds | \$398,266 | \$439,402 | \$490,553 |
| FTEs | 3.26 | 3.95 | 4.00 |

Center for Congenital and Inherited Disorders (CCID)
Division of Health Promotion and Chronic Disease Prevention

Program Objective: Provide administrative oversight to the six genetic health care, laboratory and surveillance programs under the Center for Congenital and Inherited Disorders (CCID). Provide the structure through which genetic issues and policies are reviewed and addressed.

Program Services:

- Addresses the issues and genetic services needs identified by individuals, families, and health care and human service providers in the State Genetics Plan for Iowa.
- Facilitates accountability for the metabolic screening of Iowa's newborns.
- Informs parents that their child has been placed on the Iowa Registry for Congenital and Inherited Disorders (IRCID) and about available early intervention and supportive services they may be eligible for through the IRCID.
- Administers a CDC Cooperative Agreement to monitor and track all newborns identified with tandem mass spectrometry detectable disorders in Iowa.
- Administers a CDC cooperative agreement to expand the existing birth defects surveillance program to include fetal deaths.

Population Served: Individuals of all ages with or at risk for a genetic disorder, chromosome abnormality, metabolic disorder, birth defect, fetal death, or condition influenced by genetic factors.

Funding Sources: Federal Grants and Private Foundation Grants

0153-0712 (FY 04 only)/0714/0716

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$313,470 | \$101,066 | \$224,492 |
| Other Funds | \$12,899 | \$4,947 | \$14,216 |
| Total Funds | \$326,369 | \$106,013 | \$238,708 |
| FTEs | 3.45 | 1.12 | 1.15 |

**Certificate of Need
Department Director's Office**

Program Objective: To assure that growth and changes in the health care system occur in an orderly, cost-effective manner and that the system is adequate and efficient. The program also prevents unnecessary expenditures that do not add to the quality of health care in Iowa, thereby helping to contain health care costs.

Program Services: A regulatory review process that requires application to the department for, and receipt of, a certificate of need prior to the offering or development of a new or changed institutional health service. Department staff and the State Health Facilities Council, a five-member body appointed by the Governor and confirmed by the Senate, using the criteria specified in the law, review projects proposed by providers. The process provides opportunity for public notice and comment on health care expenditures and services that will impact Iowa citizens.

Population Served: All health care providers in Iowa.

Funding Sources: General Fund Appropriation

K19-1963

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$94,416 | \$90,053 | \$72,171 |
| FTEs | 0.79 | 0.70 | 0.70 |

Child Death Review Team
Division of Health Promotion and Chronic Disease Prevention

Program Objective: To reduce death of children 17 years and younger in Iowa by reviewing causes and suggesting prevention measures.

Program Services: The Child Death Review Team (14 member interdisciplinary group):

- Reviews medical and investigative information surrounding the death of any child under age 17 who dies from any cause.
- Determines strategies that could reduce the number of future child deaths with similar circumstances.
- Makes recommendations to the Governor, legislature, and state agencies in an annual report on ways to prevent child deaths.
- Incorporates recommendations in agency level program planning and guides state level policy development.

Population Served: In 2001, the criteria was expanded to include children up to 17 years old. Iowa’s child residents who die in state or out of state and child nonresidents who die in Iowa are included in the CDRT case cohort. Health, law enforcement, and social work professionals as well as government officials statewide use the team’s data and analysis of child deaths for planning and educational guidance.

Funding Sources: General Fund Appropriation

K05-0661

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$31,111 | \$32,786 | \$28,348 |
| FTEs | 0.38 | 0.36 | 0.00 |

Child Health

Division of Health Promotion and Chronic Disease Prevention

Program Objective:

- Improve the health of all children by assuring that children, in particular those who come from low-income families, have access to quality health services.
- Reduce the incidence of infant mortality, preventable disease, and disabling conditions.
- Provide family-centered, community-based, coordinated care.

Program Services: Health department personnel provide professional consultation and technical assistance to 26 local providers to:

- Assure children 0-21 years have access to primary and preventive care such as well child care, immunizations, health assessments, health supervision, and referral for diagnostic and treatment services directed toward achieving improved health status for Iowa's children.
- Promote collaboration of various health care providers and services within the local community.
- Promote and maintain cost efficient use of funding and resources to increase access and decrease duplication of efforts.
- Assure adherence to national health protocols.
- Provide technical assistance to community-based public health and private providers serving vulnerable populations.

Population Served: Low-income families, those with diverse racial and ethnic heritage, and those living in rural areas with limited access to care.

Funding Sources: General Fund Appropriation, Federal Funds, Intra State Receipts (Contract with Department of Human Services)

State funds are used for a 75% match for the Title V Block Grant.

K05-0505/0552; 0153-0506/0522/0654

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|--------------------|--------------------|--------------------|
| State Funds | \$542,649 | \$503,454 | \$506,758 |
| Federal Funds | \$2,224,295 | \$2,277,358 | \$2,189,306 |
| Other Funds | \$60,170 | \$126,650 | \$128,505 |
| Total Funds | \$2,827,114 | \$2,907,462 | \$2,824,569 |
| FTEs | 7.96 | 8.30 | 8.00 |

Child Health Specialty Clinics (CHSC)
Division of Health Promotion and Chronic Disease Prevention

Program Objective: Provide regionally based clinical, care coordination, and family support services to Iowa's children and youth with special health care needs in partnership with families, service providers, and communities.

Program Services: Through a contract with the University of Iowa Child Health Specialty Clinics, children with special health care needs and their families have access to specialty care clinics statewide, professional consultation, and case management services.

CHSC also performs core public health functions of assessment, policy development, and assurance as they relate to children with special health care needs.

Population Served: Services are provided to Iowa children with special health needs for whom services are not otherwise locally or regionally available. This includes medically fragile children with cardiac, orthopedic, cystic fibrosis, ENT, and pediatric problems.

Funding Sources: General Fund Appropriation and Federal Grant

K07-0703; 0153-0706

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|--------------------|--------------------|--------------------|
| State Funds | \$177,557 | \$169,065 | \$468,865 |
| Federal Funds | \$2,886,822 | \$2,012,838 | \$2,420,591 |
| Total Funds | \$3,064,379 | \$2,181,903 | \$2,889,456 |
| FTEs | 0.00 | 0.00 | 0.00 |

Child Protection Center Grant Program
Division of Health Promotion and Chronic Disease Prevention

Program Objective: Provide a comprehensive, culturally competent, multidisciplinary team response to allegations of child abuse in a dedicated child friendly setting.

Program Services: Child Protection Centers operate under a research-based model that provides a child friendly environment for comprehensive investigative services to children who are alleged victims of abuse. Services provided by expertly trained staff using a multidisciplinary approach include:

- Physical exam
- Forensic interview
- Family consultation
- Referrals for ongoing services
- Consultation and education to smaller and rural communities regarding appropriate triage of children who are victims alleged abuse.

Population served: Children who have experienced child sexual abuse, child physical abuse, denial of critical care, exposure to illegal drugs or who have witnessed violence.

Funding Sources: Intra State Transfer (Department of Human Services)

K17-1764

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$0 | \$94,011 | \$1,000,000 |
| FTEs | 0.00 | 0.00 | 0.00 |

Child Vision Screening

Division of Health Promotion and Chronic Disease Prevention

Program Objective: To objectively screen vision in infants and young children throughout all of Iowa's 99 counties at no cost to the public. The project seeks to educate the public about the risk of undetected vision loss.

Program Services: The University of Iowa Department of Ophthalmology works with local area Lions Club volunteers to train Lions Club members. The MTI Photo Screener is used to screen young children for possible vision loss. Children with abnormal screening results will be referred to local ophthalmologists or optometrists. The project, known as "Coming to Your Senses," plans to inform local Community Empowerment programs about the service. The initiative was implemented in FY 2004.

Population Served: Children, ages 6-48 months.

Funding Sources: General Fund Appropriation

K05-0931

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$0 | \$97,300 | \$100,000 |
| FTEs | 0.00 | 0.00 | 0.00 |

**Childhood Lead
Division of Environmental Health**

Program Objective: To reduce the prevalence of lead poisoning in Iowa children.

Program Services: Through the Childhood Lead Program, to provide funding to test children for lead poisoning and identify hazards in the homes of lead-poisoned children. Services are provided for medical case management to families with lead-poisoned children to ensure that they reduce their blood lead levels. Iowa has one of the highest rates of childhood lead poisoning in the nation.

The program also provides education to communities about the hazards associated with lead poisoning and strategies for preventing childhood lead poisoning in their communities.

Population Served: All Iowa children under 6 years old who receive a blood lead test. Children are identified for testing through Child Health Specialty Clinics, WIC clinics, and private pediatricians.

Funding Sources: General Fund Appropriation, Federal Grant, and Tobacco Fund Appropriation

K13-1351; K92-9212; 0153-1352

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|--------------------|--------------------|
| State Funds | \$251,470 | \$251,808 | \$351,808 |
| Federal Funds | \$679,689 | \$699,883 | \$658,994 |
| Tobacco Funds | \$58,900 | \$76,388 | \$76,388 |
| Total Funds | \$990,059 | \$1,028,079 | \$1,087,190 |
| FTEs | 2.78 | 2.79 | 4.00 |

Chlamydia Testing

Division of Acute Disease Prevention and Emergency Response

Program Objective: This program focuses on reducing the incidence and spread of chlamydia.

Program Services: Include distributing test kits to approximately 70 sexually transmitted disease (STD) screening sites, which includes local health departments and other test sites throughout Iowa, and laboratory assistance for the detection, diagnosis, treatment, and case management of these diseases.

Population Served: Funding is provided to the University Hygienic Laboratory which provides testing services related to chlamydia.

Funding Sources: Federal Grant

0153-1566

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$52,639 | \$42,114 | \$47,677 |
| FTEs | 0.00 | 0.00 | 0.00 |

**Communication and Public Information
Department Director’s Office**

Program Objective: To carry out the nationally agreed upon essential public health service of “informing, educating and empowering people about health issues.” The public includes all Iowa citizens, public health practitioners, and IDPH employees and partners.

Program Services: Informing, educating, and empowering people about public health through media relations, including daily contact with representatives of Iowa newspapers, TV, and radio; maintaining and improving the quality and usefulness of IDPH publications; publishing electronic newsletters for employees and public health partners throughout the state; presenting displays on public health and health care at conferences, meetings, and other venues; providing Internet content on public health for various audiences; providing speeches, presentation outlines, and audio-visual aids for the IDPH director and other staffers to use before various audiences; helping provide and maintain communications among and between IDPH divisions and partners; providing face-to-face training on risk communications and other kinds of communications for employees and public health partners; working with public relations contractors to bring public health messages to the public; using the ICN, satellite broadcasts, and streaming video to educate IDPH employees and partners; providing customer service to the public and public health partners.

Population Served: The public; public health practitioners across Iowa; IDPH contractors and partners.

Funding Sources: Federal Indirect Funds

0153-2106

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$485,435 | \$248,676 | \$382,000 |
| FTEs | 5.95 | 3.82 | 5.00 |

**Comprehensive Assessment of Rural Health in Iowa (CARHI)
Division of Environmental Health**

Program Objective: To establish a surveillance system for health outcomes and environmental hazards/exposures in Carroll County.

Program Services: Collection of health outcome and environmental hazard/exposure data for the purpose of identifying trends or patterns in a Geographic Information System.

Population Served: The residents of Carroll County, who will benefit from knowing if environmental hazards/exposures are causing negative health outcomes. All Iowans, through replication of this model statewide.

Funding Source: Federal Grant

0153-1312

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$361,080 | \$232,506 | \$461,036 |
| FTEs | 0.32 | 0.49 | 1.75 |

Comprehensive Cancer Control
Division of Health Promotion and Chronic Disease Prevention

Program Objective: To reduce the burden of cancer in Iowa.

Program Services:

- Implementation and revision of the state’s Comprehensive Cancer Control State Plan, “Changing the Face of Cancer in Iowa.” The plan addresses cancer prevention, early detection, treatment, quality of life, research and cross-cutting issues related to advocacy, patient education, financial issues, surveillance, data and evaluation, population disparities, and Web-based information resources. Action plans address barriers to screening, cancer disparities, obesity, patient and family resources, tobacco use, and youth sun exposure.
- Maintenance of a cancer consortium comprised of more than 100 members representing approximately 50 agencies statewide.
- Two colorectal cancer-specific projects, including a survey of screening services and a study of the usefulness of a colorectal cancer awareness campaign. Analysis of Iowa-specific colorectal cancer data with a monograph under development to show the status of colorectal cancer in the state.
- Two cancer-specific projects including a survey of provider prostate cancer screening practices and a consensus conference to develop recommendations for treatment of prostate cancer in men 75 years and older.

Population Served: This program will serve all Iowans.

Funding Source: Federal Grant

0153-0416

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$228,619 | \$562,711 | \$655,304 |
| FTEs | 0.56 | 0.79 | 1.50 |

Congenital and Inherited Disorders
Division of Health Promotion and Chronic Disease Prevention

Funding for the following programs are combined in appropriations and grants and are reflected in the funding amounts below:

- Iowa Neonatal Metabolic Screening Program, including the Metabolic Foods Program
- Registry for Congenital and Inherited Disorders
- Expanded Maternal Serum Alpha-Fetoprotein Screening Program
- Regional Genetics Consultation Service
- Iowa Stillborn Surveillance Project

Funding Sources: General Fund Appropriation and Retained Fees

State funds are used for a 75% match for the Title V MCH Block Grant.

K07-0709

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$511,048 | \$516,446 | \$530,976 |
| Other Funds | \$48,853 | \$48,248 | \$54,453 |
| Total Funds | \$559,901 | \$564,694 | \$585,429 |
| FTEs | 0.77 | 0.67 | 0.85 |

Covering Kids/ *hawk-i* Outreach
Division of Health Promotion and Chronic Disease Prevention

Program Objective: Reduce the number of uninsured children 0-18 years old, with a focus on minority and hard-to-reach vulnerable populations. Increase enrollment of eligible children in publicly funded insurance programs.

Program Services:

- Assess service capacity by county, including school and faith-based activities, and health provider resources.
- Convene stakeholders in developing community-based outreach and enrollment plans that build on existing capacity and resources and avoids duplication of effort.
- Coordinate community-based strategies with state level outreach activities.
- Conduct local activities that increase public awareness and implement targeted outreach activities.
- Provide statewide leadership for coordinated outreach strategies, resources, tools, and evaluation.
- Investigate, test, and recommend strategies that simplify and coordinate enrollment and renewal processes for publicly funded health insurance programs.

Population Served: Low-income children 0-18 and families eligible for Medicaid and the *hawk-i* program.

Funding Sources: Intra State Receipts (DHS Contract) and Private Foundation Grants

0153-0670/0686 (FY 04 only)/0688

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$524,648 | \$524,738 | \$537,342 |
| FTEs | 2.15 | 1.73 | 1.75 |

**Crash Outcome Data Evaluation (CODES)
Division of Environmental Health**

Program Objective: Link Iowa Department of Transportation (DOT) motor vehicle crash records with ambulance, hospital discharge, and trauma registry data maintained within the department through electronic probabilistic linkage.

Program Services: Linking crash records to medical records provide more complete information to identify specific populations at risk, and the causes, nature, and severity of injuries resulting from a motor vehicle crash.

Population Served: The analysis of data improves the understanding of the factors surrounding motor vehicle accidents and the population impacted, allowing the department to better focus injury prevention efforts.

Funding Source: Federal Grant

0153-1724

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$70,781 | \$47,554 | \$47,633 |
| FTEs | 1.01 | 0.62 | 0.50 |

**Critical Access Hospital Program
 Medicare Rural Hospital Flexibility Program (FLEX)
 Division of Health Promotion and Chronic Disease Prevention**

Program Objective: The FLEX program improves access to health care by enabling full-service hospitals in rural areas to make the transition to Critical Access Hospital designation. This assures a more comprehensive rural health infrastructure and access to quality health care services in rural Iowa.

Program Services: A critical access hospital receives reasonable, cost-based reimbursement for inpatient and outpatient services.

This is achieved by:

- Assessing and stabilizing the effectiveness, accessibility, and quality of the small, rural economically vulnerable hospitals and providing federal grant funds for feasibility studies in becoming certified as a Critical Access Hospital (CAH).
- Helping communities to evaluate whether the CAH designation will benefit a local health care facility.
- Providing a mechanism to hold educational workshops covering emerging hospital issues, and fostering community partnerships that include an emergency medical services component.

Population Served:

- All Iowans in rural areas
- All rural hospitals, network hospitals, and EMS providers
- Other rural health providers with the local networks

Funding Source: Federal Grant

0153-0914

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$441,736 | \$482,170 | \$461,263 |
| FTEs | 2.06 | 1.95 | 2.00 |

**Department Wide Activities
Director's Office**

Program Objective: To provide services that benefit the entire department and cannot be attributable to individual programs.

Program Services: Services include billings paid to the Department of Administrative Services (association fees, worker's compensation charges), Attorney General's Office (legal counsel), and Auditor of State's Office (auditing services).

Population Served: All Iowans who receive services from the department.

Funding Sources: General Fund Appropriation, Federal Indirect Funds, and Indirect from Private Grants

K21-2221/2226; 0153-2220/2224

| Fiscal Year | 04 Actual * | 05 Actual | 06 Estimate |
|--------------------|--------------------|------------------|--------------------|
| State Funds | \$0 | \$554,073 | \$663,662 |
| Federal Funds | \$0 | \$0 | \$99,000 |
| Other Funds | \$0 | \$223,359 | \$79,000 |
| Total Funds | \$0 | \$777,432 | \$841,662 |
| FTEs | 0.00 | 1.08 | 0.00 |

*Additional expenses included in other program areas

Diabetes

Division of Health Promotion and Chronic Disease Prevention

Program Objective: To reduce the impact of diabetes on Iowans.

Program Services:

- Working with health care providers to provide educational programs on diabetes and related topics.
- Collecting, analyzing, and distributing diabetes related data.
- Coordinating the statewide diabetes network of more than 50 members.
- Collaborating with community programs such as the National Collaborative, Diabetes Today, Healthy Iowans 2010, Adult Immunization coalition, Lighten Up Iowa, and the American Diabetes Association
- Certifying state outpatient diabetes education programs.
- Advocating for quality care and services for a diversified population with emphasis on minority and under-served audiences.

Population Served: All Iowans benefit from information provided by the program related to the prevention of diabetes.

Funding Source: Federal Grant

0153-1966

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$171,311 | \$207,122 | \$323,421 |
| Other Funds | \$0 | \$5,383 | \$8,620 |
| Total Funds | \$171,311 | \$212,505 | \$332,041 |
| FTEs | 2.07 | 2.05 | 2.75 |

Director’s Office
Department Director’s Office

Program Objective: The director of public health administers all the programs and activities of the department in accordance with state and federal laws related to public health.

Program Services: The director provides oversight to division directors who provide services to all Iowans. This includes development of public health policy, support and promotion of department programs, constituent outreach, and development of both a leadership and legislative agenda. In addition, the director serves as chairperson of the Health Enterprise Management Team, which develops strategies to support the Governor’s Leadership agenda. The director is responsible for the overall department mission of promoting and protecting the health of Iowans.

Population Served: The director provides oversight of the department at the will of the Governor and serves all Iowans.

Funding Sources: General Fund Appropriation and Federal Indirect Funds

K21-2101; 0153-2102

| Fiscal Year | 04 Actual * | 05 Actual | 06 Estimate |
|--------------------|--------------------|------------------|--------------------|
| State Funds | \$479,012 | \$222,394 | \$229,000 |
| Federal Funds | \$35,500 | \$72,773 | \$36,000 |
| Other Funds | \$434,383 | \$0 | \$0 |
| Total Funds | \$948,895 | \$295,167 | \$265,000 |
| FTEs | 6.07 | 2.89 | 2.00 |

* Other program activities were funded in this area in FY04 (i.e., department wide activities such as Attorney General and Auditor of State billings and planning and policy activities).

Disability Program
Division of Behavioral Health and Professional Licensure

Program Objective: To prevent other physical or psychological conditions related to disability among disabled Iowans.

Program Services:

- Providing “Living Well With a Disability” (adult and adolescent version) curriculum to audiences statewide.
- Providing emergency preparedness presentations for persons with disabilities statewide, assisting with building accessibility surveys, and providing technical assistance.
- Monitoring progress on Healthy Iowans 2010 disability related goals and action steps.

Population Served: Disabled population statewide.

Funding Source: Federal Grant

0153-1706

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$365,490 | \$335,137 | \$402,031 |
| FTEs | 2.44 | 1.89 | 2.80 |

Disease Prevention and Immunization Administration
Division of Acute Disease Prevention and Emergency Response

Program Objective: Coordination and collaboration of infectious disease programs to increase efficient use of funds.

Program Services: The program provides supervision of state funded sexually transmitted diseases program, chlamydia screening program, tuberculosis (TB) program, prescription services, and immunization program.

This program area also provides oversight of the federally funded sexually transmitted diseases grant, TB grant, chlamydia grant, Hepatitis C, HIV/AIDS prevention/education grant, immunization grant, AIDS Surveillance Grant, and Ryan White Title II Care grant.

In addition, the program provides coordination of efforts for individuals receiving multiple services from the Bureau of Disease Prevention and Immunization, which require collaboration. Such a person may require testing and treatment for sexually transmitted diseases and may also need testing for both HIV and TB infection.

Population Served: Iowans seeking services for the prevention or treatment of a transmittable disease.

Funding Sources: Unfunded

Domestic Abuse Death Review Team
Division of Behavioral Health and Professional Licensure

Program Objective: To reduce domestic abuse-related deaths in Iowa.

Program Services:

- Provide administrative support to the Iowa Domestic Abuse Death Review Team
- Review domestic abuse deaths in Iowa annually
- Make recommendations regarding the prevention of future deaths
- Prepare annual report

Population Served: Community professionals who address domestic abuse in Iowa.

Funding Source: Unfunded Mandate

Domestic Violence – The Health Care Response to Domestic Violence and Sexual Assault Project

Division of Behavioral Health and Professional Licensure

Program Objective: To improve the health care response to violence against women by offering training and technical assistance to health care providers and other community professionals.

Program Services:

- Monitor and provide staff assistance for the activities outlined in *Healthy Iowans 2010, Chapter 23*.
- Develop protocols for health care facilities and providers on proper identification, assessment, intervention, documentation, and referral procedures for patients with a history of domestic or sexual abuse.
- Conduct professional training and provide technical assistance to health care providers and other community professionals.
- Conduct public awareness campaigns to increase awareness of domestic violence and resources available to health care providers and the public.
- Collaborate with criminal justice and human service professionals to increase the skill and capacity for community coordinated response teams.
- Coordinate the development of standardized protocol for forensic examination to improve evidence collection and increase potential for prosecution of sexual assault crimes.

Population Served: Health care providers and community professionals statewide.

Funding Source: Intra State Receipt (Iowa Department of Justice Grant)

0153-1756

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds (DOJ) | \$38,514 | \$40,811 | \$44,000 |
| FTEs | 0.47 | 0.50 | 0.50 |

Drug and Violence Prevention
Division of Behavioral Health and Professional Licensure

Program Objective:

- Prevention of violence in and around schools
- Prevention of the illegal use of alcohol, tobacco, and other drugs
- Involvement of parents and communities in the services

Program Services:

- Partnership with law enforcement
- Dissemination of information about alcohol, tobacco, and other drugs and violence prevention
- Evidence-based programs that prevent and reduce violence associated with prejudice and intolerance
- Collaboration with community organizations and coalitions

Population Served:

- Youth who are in junior and senior high
- Youth in alternative programs
- Youth in juvenile detention centers
- Other populations that need special services

Funding Sources: Federal Grant and Intra State Receipt (Department of Education)

0153-0156

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$524,750 | \$502,903 | \$663,456 |
| Other Funds | \$600 | \$0 | \$0 |
| Total Funds | \$525,350 | \$502,903 | \$663,456 |
| FTEs | 0.91 | 0.77 | 0.80 |

Drug Endangered Children
Division of Behavioral Health and Professional Licensure

Program Objective: Multi-discipline initiative designed to break the cycle of neglect and abuse associated with substance abusing caregivers. The approach leverages the resources of the criminal justice system, human services, juvenile court, and the public health system to address the safety and well-being of children, and hold neglectful and abusive parent(s) accountable.

Program Services: Provide substance abuse treatment for the parent/caregivers that are identified through the multi-discipline task force.

Population Served: Iowa children whose parents have been arrested/identified as manufacturing or possessing methamphetamine precursor chemicals.

Funding Source: Intra State Receipt (Office of Drug Control Policy)

0153-0206

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$0 | \$37,882 | \$57,600 |
| FTEs | 0.00 | 0.00 | 0.00 |

Early Access

Division of Health Promotion and Chronic Disease Prevention

Program Objective: To improve the system of service delivery for families with children ages 0-3 who have a high probability of developmental delay. Through partnership with the Department of Education, this program provides support for families and community-based providers to work together in identifying, coordinating, and providing needed services and resources that will help the family assist its infant or toddler to grow and develop.

Program Services: The family and providers work together to identify and address specific family concerns and priorities as they relate to the child's overall growth and development. In addition, broader family needs and concerns can be addressed by locating other supportive resources/services in the local community for the family and/or child. All services to the child are provided in the child's natural environment, including the home and other community settings where children of the same age without disabilities participate.

Population Served: Infants or toddlers under 3 years old (birth to age 3) who:

- Have a known condition that has a high probability of resulting in later delays if early intervention services are not provided, or
- Have a 25% or more delay in one or more areas of growth or development.

Funding Source: Intra State Receipt (Department of Education Contract)

0153-0708

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$190,065 | \$226,936 | \$165,913 |
| FTEs | 1.48 | 2.15 | 1.25 |

Early Childhood Comprehensive System Development
Division of Health Promotion and Chronic Disease Prevention

Program Objective: To build on the early childhood systems planning work started through Community Empowerment to develop a single state plan for advancing Iowa’s Early Care, Health and Education system so that Iowa’s youngest citizens are healthy and successful.

Program Services: Strategies for this two-year system planning initiative address the following goals:

- Continue to develop a single comprehensive state plan for early childhood using Iowa’s early care health and education system planning framework.
- Develop strategies to assure inclusion of the critical components of Iowa’s early childhood systems plan:
 - Access to medical homes
 - Mental health and social-emotional development
 - Early care and education services
 - Parent education and family support services
 - Strengthen leadership to increase support for Iowa’s vision for early care, health, and education, which is, “Every child, beginning at birth, healthy and successful.”

Population Served: Children birth to 5 and their families.

Funding Source: Federal Grant

0153-0676

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$69,505 | \$102,319 | \$127,013 |
| FTEs | 0.58 | 0.52 | 0.20 |

Early Hearing Detection and Intervention
Division of Health Promotion and Chronic Disease Prevention

Program Objective: To ensure that hearing loss is detected early in life and that appropriate follow-up and intervention services are available. During the 2003 session, the Iowa Legislature passed a bill requiring newborn hearing screening for all babies born in Iowa.

Program Services:

- Provides technical assistance to birthing hospitals, area education agencies, and private practice audiologists relative to their newborn hearing screening programs and their responsibilities under the new legislation.
- Establishes a Web-based surveillance system to assure that all newborns are screened for hearing loss.
- Reviews data to determine if children with hearing loss receive appropriate, timely early intervention services.
- Works with Individuals with Disabilities Education Act, Part C to strengthen early intervention services for children who are deaf or hard-of-hearing.

Population Served: Beginning January 1, 2004, Early Hearing Detection and Intervention services is available to every baby born in Iowa.

Funding Source: Federal Grant

0153-0682

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$84,731 | \$68,855 | \$138,764 |
| FTE | 1.32 | 1.00 | 1.00 |

**Early, Periodic, Screening, Diagnosis, and Treatment (EPSDT)
Division of Health Promotion and Chronic Disease Prevention**

Program Objective: To improve the health status of low-income children by assuring availability of preventive services within the context of ongoing provider patient relationships.

Program Services: The following are achieved through a partnership with the Department of Human Services:

- Develop and maintain local capacity for child health screening exams. Services are provided at the local level through Title V Maternal and Child Health contractors selected through a competitive application process.
- Provide technical assistance, guidance, and oversight for program implementation.
- Develop and maintain local capacity for child health preventive health care and care coordination.
- Reduce duplication of services through collaborative interagency activities.
- Enhance local agency capacity for participation in Medicaid administrative claiming by providing a mechanism to access federal funding (matching funds provided by local agencies).

Population Served: Medicaid eligible children 0-21 and their families.

Funding Sources: General Fund Appropriation and Intra State Receipts (Department of Human Services Contract)

K05-0554

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$194,051 | \$234,743 | \$255,081 |
| Other Funds (DHS) | \$267,387 | \$307,000 | \$335,750 |
| Total Funds | \$461,439 | \$541,743 | \$590,831 |
| FTEs | 5.82 | 5.89 | 6.30 |

Emergency Medical Services (EMS)
Division of Acute Disease Prevention and Emergency Response

Program Objective: Set standards for out-of-hospital patient care, scope of practice for EMS providers, ambulance service program authorization, EMS system development and education and training for EMS providers. Iowa’s trauma system’s goal is to match the injured patient’s needs to existing resources so optimal, cost-effective care is achieved. This EMS system approach will reduce costs, disability, and death from illness and injury.

Program Services: Administration of the statewide EMS program pursuant to Iowa Code Chapter 147A “Emergency Medical Services” and 147A.20 “Iowa Trauma Care System Development Act.” The bureau coordinates the training, certification, and recertification programs for over 14,500 emergency medical care providers. It is also responsible for the inspection and authorization of ambulance and non-transport of 927 EMS service programs providing emergency medical care in the out-of-hospital setting. Eighty-two percent of these authorized service programs are volunteers.

The bureau is responsible for the development, implementation, and evaluation of Iowa’s trauma system including categorization and verification of all licensed hospitals as trauma care facilities, the collection of statewide data for the trauma registry, and analysis and evaluation of system effectiveness. Additionally, the bureau coordinates the emergency medical services for children (EMSC) program, leading to a statewide care system for pediatrics.

Population Served: Iowans in need of emergency medical services for illness and injury.

Funding Sources: General Fund Appropriation and Federal Grant

General funds are used for maintenance of effort match for the PHHS Block Grant.

K19-1941; 0153-1942

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$205,390 | \$231,754 | \$191,267 |
| Federal Funds | \$519,971 | \$477,519 | \$520,200 |
| Total Funds | \$725,361 | \$709,273 | \$711,467 |
| FTEs | 9.69 | 9.93 | 9.45 |

**Emergency Medical Services for Children (EMSC)
 Division of Acute Disease Prevention and Emergency Response**

Program Objective: Historically, emergency medical services (EMS) has based its system on the treatment of the adult patient. The “one size fits all” form of medicine has resulted in the loss of our nation’s most valuable of resources - children. This program improves and enhances the ability of current EMS systems to meet the unique needs of the pediatric patient (0-18 years old) in Iowa.

Program Services: Through a partnership with Iowa/Nebraska Kiwanis Foundation, Iowa’s EMSC program provides pediatric specific equipment to basic EMS provider services and training. To date, 229 EMS programs have received more than \$159,000 in pediatric equipment with over 3500 EMS providers trained. Additionally, the EMSC program assists with providing injury prevention programs such as bike helmet safety rodeos, child passenger safety seat training, booster seat training, and child identification programs. These programs are designed and carried out to unite currently existing diverse injury prevention programs in a movement that promotes understanding and prevention of unintentional injuries and deaths to Iowa children.

Population Served: Children requiring emergency medical services.

Funding Sources: Federal Grant and University of Iowa Grant

0153-1714

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$66,588 | \$65,789 | \$85,827 |
| Other Funds | \$17,289 | \$12,319 | \$0 |
| Total Funds | \$83,877 | \$78,108 | \$85,827 |
| FTEs | 1.08 | 1.08 | 0.90 |

Emergency Medical Services (EMS) Injury Prevention
Division of Acute Disease Prevention and Emergency Response

Program Objective: To reduce the incidence of preventable motor vehicle and bicycle related injuries and fatalities.

Program Services: IDPH has partnered with the Governor’s Traffic Safety Bureau to develop and implement the occupant protection and bicycle safety program. It is meant to reduce the incidence of preventable motor vehicle related injuries and fatalities and meet the goals established in the Presidential Initiative to Increase Seat Belt Use Nationwide. Through the initiatives of this program, Iowa now has the highest child passenger seat and seatbelt usage in the central region (87%), which ranks Iowa in the top five states in the nation in both categories.

This program coordinates statewide child passenger safety and bicycle safety activities. These activities include but are not limited to:

- Conducting car seat inspections and educational trainings on proper usage of child restraints. Over 700 passenger safety seat technicians have been trained in Iowa, with the highest renewal rate in the nation.
- Over 825 child passenger seats distributed in FY2005.
- Conducting a variety of programs with local bicycle clubs and other grassroots safety advocacy groups, including safety videos, bicycle rodeos, and safety helmet distribution.

Information is designed and distributed to the public and local safety advocacy groups relating to the correct use of child restraints and bicycle safety activities to reduce morbidity and mortality.

Population Served: The public with an emphasis on parents, child caregivers, and local safety advocacy groups. All 99 counties have a certified technician and there are 62 fit stations in Iowa.

Funding Source: Intra State Receipt (Governor’s Traffic Safety Bureau Grant)

0153-1722

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$95,879 | \$139,567 | \$217,950 |
| FTEs | 0.80 | 0.89 | 0.80 |

**Emergency Medical Services (EMS) Leadership
 Division of Acute Disease Prevention and Emergency Response**

Program Objective: Bring the leadership of Iowa’s EMS service programs together to address EMS system development.

Program Services: The Bureau of EMS is responsible for the administration of the statewide EMS program pursuant to Iowa Code Chapter 147A “Emergency Medical Services” and 147A.20 “Iowa Trauma Care Development Act.” This includes functioning as the lead agency for the development, implementation, and maintenance of Iowa’s EMS system. To fulfill this responsibility, EMS creates a forum in which leaders of Iowa’s EMS system share best practices and address developmental issues relating to the implementation of Iowa’s EMS agenda for the future.

Population Served: All emergency medical service programs are invited to participate.

Funding Source: Private Donations and Registration Fees

0153-1716

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$0 | \$1,924 | \$2,300 |
| FTEs | 0.00 | 0.00 | 0.00 |

Emergency Medical Services (EMS) Love Our Kids
Division of Acute Disease Prevention and Emergency Response

Program Objective: Injury is the leading cause of death for people 45 years and younger; it is also a source of financial burden on most health care systems. The objective of this program is to assist in the reduction of the statewide morbidity and mortality rates associated with pediatric injuries through local injury prevention programs.

Program Services: Dollars generated from the sale of special license plates and commemorative birth and marriage certificates are distributed statewide via a grant program to local organizations and community injury prevention programs, EMS services, and associations to meet specific needs as defined by the community. Funds are used to purchase bike safety helmets, passenger safety seats, and child identification kits and to develop and sponsor injury prevention programs.

Population Served: Local safety advocacy groups, daycares, EMS services and EMS associations.

Funding Source: Intra State Receipt (Department of Transportation - License Plate Sales)

K17-1718

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$0 | \$0 | \$113,900 |
| FTEs | 0.00 | 0.00 | 0.00 |

**Emergency Medical Services (EMS) Statewide Trauma System
Division of Acute Disease Prevention and Emergency Response**

Program Objective: To develop, implement and evaluate a statewide EMS delivery system based on objectives in Healthy Iowans 2010 and goals and objectives outlined in Iowa’s EMS Agenda for the Future.

Program Services: Systems of care need to be built on collaborative partnerships among existing EMS service programs and are essential for the survival of EMS, especially in rural areas of Iowa. Several models of excellence already exist in Iowa and typically involve utilization of shared resources.

Primary services provided by this program include:

- Grant money awarded to county EMS associations through an RFP process for development and implementation of centralized administration, record keeping, data collection, and development of quality improvement programs.
- Purchase of equipment and supplies for EMS agencies.
- Funding for primary and continuing education.
- Maintenance of the state EMS and Trauma Registry for data collection, submission, analysis, and reporting.

Population Served: All 99 county EMS associations are eligible to apply for funding, hospitals submitting data to the trauma registry and all Iowans seeking medical and or trauma care through the EMS and/or Trauma System are also eligible.

Funding Source: Tobacco Fund Appropriation

K92-9204

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Tobacco Funds | \$382,781 | \$385,005 | \$387,320 |
| FTEs | 1.09 | 1.10 | 1.00 |

Emergency Medical Services (EMS) System Development
Division of Acute Disease Prevention and Emergency Response

Program Objective: Eighty-two percent of EMS service programs in Iowa are volunteer based. The Bureau of EMS provides grant funding to maintain a viable volunteer EMS system.

Program Services: This program provides a funding source for training, equipment, and system development. Funds are distributed to county EMS associations and/or EMS regions via an RFP process. Since funding priorities vary from county to county the RFP process promotes strategic planning, allows for funding needs to be determined at the local level, which makes for efficient utilization of resources and greater accountability. System development dollars enhance leadership to reduce the burden on the volunteer EMS provider by coordinating administrative, quality assurance, and education activities.

Population Served: All 99 county EMS associations are eligible to apply for funding. In FY 2005, 96 counties received funds from this program.

Funding Source: General Fund Appropriation

General funds are used for maintenance of effort match for the Preventive Health and Health Services (PHHS) Block Grant.

K17-1711

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$643,500 | \$643,500 | \$620,172 |
| FTEs | 0.00 | 0.00 | 0.00 |

**Emergency Medical Services (EMS) Trauma Care Facility Verification
Division of Acute Disease Prevention and Emergency Response**

Program Objective: This program is responsible for upholding two portions of the Iowa Code:

- Administration of the statewide trauma system according to Code of Iowa, Chapter 40, Statewide Trauma Care Systems Act.
- Review, verification and certification of Iowa’s Trauma Care Facilities according to the Code of Iowa, Chapter 134, Trauma Care Facility Categorization and Verification.

Program Services: To reduce suffering, disability, death, and costs associated with traumatic injury. The goal is to match the injured patient’s needs to existing resources so optimal and cost-effective care is achieved. The focus of the HRSA Trauma Supplement Grant is to provide resources for providing review of trauma care facility verification applications and conducting on-site verification surveys for Iowa’s hospitals, all of which are currently verified and participating in Iowa’s trauma care system.

Population Served: All licensed hospitals. Iowans seeking care at any of Iowa’s licensed hospitals benefit from this program.

Funding Source: Federal Grant

0153-1944

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$38,232 | \$35,834 | \$40,000 |
| FTEs | 0.00 | 0.00 | 0.00 |

Environmental Epidemiology
Division of Environmental Health

Program Objective: To provide epidemiological consultations to all local boards of health, county environmental health specialists, acute care hospitals, and long-term care facilities using environmental, occupational, and agricultural surveillance systems as well as chronic disease and injury surveillance.

Program Services: Collection of surveillance data on 52 reportable infectious diseases. Surveillance data helps the department to address many of Iowa’s health concerns, including asthma, atypical pneumonia, ear infection, exposure to toxic spills, pesticide poisoning, and occupationally related conditions such as silicosis and asbestosis. This surveillance system allows for targeting of prevention strategies and assessment of program effectiveness in addressing environmentally associated health conditions.

Population Served: Surveillance activities and outbreak investigations provide the necessary information to protect the public from illness and injury. All Iowans benefit from the prevention and control of communicable and environmentally related diseases.

Funding Source: Tobacco Fund Appropriation

K92-9252

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Tobacco Funds | \$263,221 | \$284,376 | \$288,770 |
| FTEs | 2.54 | 2.28 | 3.00 |

Environmental Health
Division of Environmental Health

Program Objective: To provide a safe and healthy environment for Iowans through disease prevention strategies and reduction of environmental hazards.

Program Services: Environmental health activities include a mosquito surveillance contract with Iowa State University and the state public health veterinarian. Mosquito surveillance activities provide an early warning system for West Nile virus and other causes of encephalitis through blood draws from sentinel chicken flocks and mosquito trapping. The state public health veterinarian provides consultation on numerous vector borne diseases such as rabies and monkey pox.

Population Served: All local public health agencies in Iowa benefit from the technical assistance provided through this program on environmental health issues. All Iowans benefit from mosquito surveillance and subsequent control activities.

Funding Source: General Fund Appropriation

K19-1901

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$81,830 | \$101,408 | \$85,273 |
| FTEs | 0.27 | 0.33 | 0.25 |

Environmental Health Capacity Building
Division of Environmental Health

Program Objective: Increase the capacity of the state and local departments of public health for delivering environmental health services by using the framework of core functions and essential services of public health and the core competencies to practice environmental health.

Program Services: They include but are not limited to: providing mini-grants to local health departments to address environmental health issues, creation of “model environmental health programs” based upon the essential services of public health, training local and state professionals on the core competencies to deliver environmental health programs, and developing a registry for environmental health professionals in Iowa.

Population Served: All 99 county boards of health and county health departments as well as two city boards of health and their respective health departments.

Funding Source: Federal Grant

0153-0960

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$220,119 | \$178,556 | \$162,472 |
| FTEs | 0.97 | 1.00 | 1.00 |

Environmental Health Division Director
Division of Environmental Health

Program Objective: To provide leadership and management to the Division of Environmental Health, which has the primary purpose of ensuring a safe and healthy environment for Iowans.

Program Services: The division director serves on the department's executive team, and coordinates statewide public health initiatives with other state and local agencies providing environmental health services. The incumbent is also responsible for interacting closely with federal funding agencies (i.e., CDC, EPA, and ATSDR).

Population Served: All Iowans benefit from a safe and healthy environment.

Funding Source: Federal Indirect Funds

0153-2160

| Fiscal Year | 04 Actual * | 05 Actual | 06 Estimate |
|--------------------|--------------------|------------------|--------------------|
| Federal Funds | \$0 | \$48,822 | \$54,000 |
| FTEs | 0.02 | 0.50 | 0.50 |

* Additional expenditures were included in other program areas.

**Environmental Health Specialists Network (EHS-Net)
Division of Environmental Health**

Program Objective: To identify environmental antecedents to illness and disease outbreaks associated with food through increased collaboration of epidemiology, laboratory, and environmental health staff.

Program Services: Collection of data on reported foodborne illnesses in a fifteen county region of central Iowa. An environmental sampling study to determine baseline levels of environmental contamination including *Salmonella*, coliform, and *E.coli* to help the department address potential risks for illness and disease within food service establishments will be completed. IDPH will participate in national studies regarding different aspects of food safety in collaboration with the Centers for Disease Control and Prevention and other EHS-Net sites to further promote the role of environmental health in food safety.

Population Served: Collection of data and participation in studies will be of benefit to all Iowans, as findings will lead to increased knowledge about prevention of foodborne illness and disease. Study data will also be of use to the food service industry and the Iowa Department of Inspections and Appeals in order to improve upon current practice.

Funding Source: Federal Grant

0153-1972

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$0 | \$0 | \$86,094 |
| FTEs | 0.00 | 0.00 | 1.00 |

Epidemiology and Lab Capacity (ELC)
Division of Acute Disease Prevention and Emergency Response

Program Objective: Analyze, enhance, and improve acute infectious disease surveillance in Iowa. This grant assists with activities that develop and manage a surveillance system of reportable disease in Iowa. The surveillance system includes participation by health care providers, public health agencies, hospitals, and laboratories. The program also includes small surveillance projects of acute respiratory and enteric disease, antimicrobial-resistant pathogens, West Nile virus, influenza, and hepatitis C prevention. Data collected allows the department to predict what disease is present and what prevention and control measures/quick responses are needed. In addition, this program supports activities that serve to inform and educate multiple audiences on acute disease and public health issues.

Program Services: The department works with multiple sectors of the health care industry to survey for acute reportable diseases. This program also informs and educates the general public of disease issues. ELC funds four staff in the Center for Acute Disease Epidemiology (CADE) who lead the ELC program areas including West Nile virus and influenza. These staff also assist the Center in other activities on an as needed basis, including disease outbreak investigations, surveillance, consultation, and data analysis. The ELC program also funds the hepatitis C program coordinator in the Bureau of Disease Prevention and Immunization.

Population Served: All Iowans receive health protection from the result of improved disease surveillance and response as well as resulting public information provided.

Funding Sources: Federal Grant and Private Donations

0153-1506

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|--------------------|--------------------|--------------------|
| Federal Funds | \$1,191,966 | \$1,028,300 | \$1,039,794 |
| Other Funds | \$1,051 | \$0 | \$7,956 |
| Total Funds | \$1,193,018 | \$1,028,300 | \$1,047,750 |
| FTEs | 4.29 | 3.89 | 4.60 |

Expanded Maternal Serum Alpha-Fetoprotein Screening Program

Division of Health Promotion and Chronic Disease Prevention

Program Objective: To provide comprehensive second trimester maternal screening services for the state. It is required that all pregnant women in the state of Iowa are offered the Iowa expanded maternal serum alpha-fetoprotein (MSAFP)/Quad Screen. If the screening is chosen, the specimen shall be submitted to the University Hygienic Laboratory for testing.

Program Services:

- Risk assessment for open neural tube defects, ventral wall defects, Down syndrome, Trisomy 18, and Smith-Lemli-Opitz.
- Comprehensive follow-up program for patients, families, and their physicians. Activities include test result interpretation, consultation, case management, education, and quality assurance.
- Professional and public education about maternal serum screening, specimen collection, birth defects, and chromosome abnormalities.

Population Served: All pregnant women in the state of Iowa choosing the maternal serum screening.

Funding Source: Fee-for-service program. The University Hygienic Laboratory is the fiscal agent. One dollar of each Iowa MSAFP/Quad Screen fee is sent to the Iowa Department of Public Health to pay the State Coordinator for Genetic Services position (see Congenital and Inherited Disorders for complete funding summary).

Family Planning
Division of Health Promotion and Chronic Disease Prevention

Program Objective: To promote the health of persons of reproductive age and families by providing access to family planning and reproductive health clinical services, including contraceptives.

Low-income women very often do not have access to affordable, community-based family planning services without the services available through these grants. Accessible family planning services can prevent unwanted pregnancies, sexually transmitted diseases, and other disease conditions.

Program Services: Clinics provide preventive health services that promote the health and well-being of women and men of reproductive age. Local agencies provide clinical services, client education and counseling, and community outreach and education. The agencies provide reproductive health services, including health screening and referral, family planning methods, pregnancy testing and referral, and screening and treatment of sexually transmitted diseases.

Population Served: Services are made available to women and men with an emphasis on low-income women in their reproductive years in the 45-county Iowa Department of Public Health family planning service areas.

Funding Source: Federal Grant

0153-0302

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$992,066 | \$1,010,277 | \$1,068,678 |
| FTEs | 1.01 | 1.00 | 1.00 |

Family Violence Teams
Division of Behavioral Health and Professional Licensure

Program Objective: To coordinate and improve local responses to domestic abuse and child maltreatment cases by offering training and technical assistance to targeted communities.

Program Services:

- Serve as a member of the statewide Family Violence Response Team and primary site liaison for two of the targeted communities.
- Conduct training for health care professionals working in targeted communities.
- Assist in the development of a domestic violence protocol for health care providers.

Population Served: Iowa counties selected by the Iowa Department of Justice.

Funding Source: Intra State Receipt (Iowa Department of Justice Grant)

0153-1762

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds (DOJ) | \$25,531 | \$14,087 | \$0 |
| FTEs | 0.36 | 0.21 | 0.00 |

Fatality Assessment and Control

Division of Acute Disease Prevention and Emergency Response

Program Objective: To conduct comprehensive, state-level surveillance and investigations of traumatic occupational fatalities with an emphasis on work zone and machinery-related fatalities.

Program Services: The program is responsible for investigating traumatic occupational fatalities, collecting surveillance data and designing and implementing prevention programs. Additionally, the program develops and disseminates news releases, newsletters, and trade specific publications relating to occupational fatalities and prevention.

Population Served: Workplace employers, employees, and farmers in environments in the industrial and agricultural sectors that place workers at a high risk for fatal injury.

Funding Source: Federal Grant

0153-1702

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$38,196 | \$235,629 | \$134,238 |
| FTEs | 0.10 | 0.10 | 0.10 |

Finance
Department Director's Office

Program Objective: The Bureau of Finance assists all departmental programs with management and coordination of various support services and functions, including accounts payable, accounts receivable, budgeting, and contractual management.

Program Services:

- Fiscal management of state, federal and other revenues and expenditures in order to achieve the department's goals and objectives in a cost effective and timely manner.
- Administration assistance and oversight for over 1,600 contracts.
- Coordination of departmental purchasing of office supplies and major expenditure items in accordance with state policies, and other departmental support services, including state vehicles, mail, printing, and inventory control.
- Compliance with the requirements related to the competitive selection process of over 1600 contracts.
- Accounts payable and accounts receivable functions for the department.
- Budget development, review, and management.
- Federal, state, and internal financial reporting for state funded programs and over 100 federal private grants.

Population Served: A direct service to IDPH employees, contractors, and grantors assures cost effective use of all taxpayer monies.

Funding Sources: General Fund Appropriation, Federal Indirect Funds, and Indirect Funds from Private Grants

K21-2201; 0153-2202

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|--------------------|--------------------|
| State Funds | \$71,085 | \$92,230 | \$76,000 |
| Federal Funds | \$922,462 | \$898,533 | \$806,693 |
| Other Funds | \$0 | \$80,034 | \$306,307 |
| Total Funds | \$993,547 | \$1,070,797 | \$1,189,000 |
| FTEs | 16.38 | 16.44 | 17.20 |

Flu Vaccine Iowa Farm Bureau Funds
Division of Acute Disease Prevention and Emergency Response

Program Objective: To provide grant support to local county boards of health to provide influenza prevention activities for the county populations. Funds were also used to develop educational materials at the state level. These education materials were then available to the local health departments to reproduce and to use for their influenza educational campaign.

Program Services: Contractors provided influenza prevention activities within their county including education, redistribution of influenza vaccine, and provision of educational materials.

Population Served: Funding served individuals who have high-risk conditions of complications with influenza disease. Funding was available to all counties.

Funding Sources: Private Grant from Farm Bureau

0153-1604

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$0 | \$75,368 | \$24,632 |
| FTEs | 0.00 | 0.00 | 0.00 |

Food Stamp Nutrition Education
Division of Health Promotion and Chronic Disease Prevention

Program Objective: This program provides educational programs that increase the likelihood of food-stamp recipients making healthy food choices consistent with the most recent dietary advice as reflected in the Dietary Guidelines for Americans and the Food Guide Pyramid.

Program Services: Addresses the risk factors of inadequate nutrition, inadequate consumption of fruits and vegetables, and physical inactivity that lead to obesity and chronic health diseases.

- The Iowa Nutrition Network state coalition, administered by the Food Stamp Nutrition Education staff, is a partnership of public agencies, private organizations, and communities dedicated to promoting healthy lifestyles among all Iowans, particularly among low-income individuals and families.
- Iowa Nutrition Network staff provides technical assistance and support to 20 community coalitions who deliver the food stamp nutrition education. Community partners include public schools, public health agencies, area agencies on aging, community action agencies, city parks and recreation programs, grocery stores, the YMCA, food pantries, community colleges, Iowa State University Extension, University of Northern Iowa, and the University of Iowa College of Public Health.
- State staff work with the governor’s food policy council on food security issues and provide *Pick a better snack™* social marketing campaign and nutrition education resources to community coalitions and other organizations.

Population Served: Food stamp eligible populations or those that are under 185% of the federal poverty level. Waivers are granted to work with audiences that have at least 50% eligible populations.

Funding Source: Intra State Receipt (Department of Human Services Grant)

0153-1108

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$1,309,009 | \$974,300 | \$1,031,044 |
| FTEs | 5.00 | 4.23 | 4.75 |

Gambling Treatment

Division of Behavioral Health and Professional Licensure

Program Objective: To provide education, referral, and counseling for persons affected directly or indirectly by problem gambling behavior.

Program Services:

- Help line 1-800-BETS OFF (1-800-238-7633)
- Outpatient therapy
- Transitional housing services
- Public awareness and prevention
- Counselor training
- Web site: www.1800betsoff.org

Population Served:

- Gamblers
- Families
- Concerned persons
- Counselors
- Clergy
- Human resource personnel
- Schools
- Interested groups

Funding Source: Gambling Fund Appropriation

K01-0222 (FY 04 and 05); K96-9602 (FY 06)

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Gambling Fund | \$1,970,428 | \$3,377,244 | \$4,210,000 |
| FTEs | 1.29 | 1.73 | 1.95 |

Gambling Treatment Licensure
Division of Behavioral Health and Professional Licensure

Program Objective: License all gambling treatment programs.

Program Services:

- Licensing gambling treatment programs
- Conduct complaint investigations
- Technical assistance
- Evaluation and treatment services referral coordination

Population Served:

- Gambling treatment programs in the state
- Clients who receive gambling abuse or addiction treatment services
- Concerned family members or significant others
- All Iowans

Funding Source: Gambling Fund Appropriation

K96-9604

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Gambling Fund | \$0 | \$0 | \$100,000 |
| FTEs | 0.00 | 0.00 | 1.00 |

**Grade “A” Milk Certification
Division of Environmental Health**

Program Objective: Given the perishable nature of milk and other dairy products, the economic magnitude of the dairy industry (measured in the millions of dollars), and number of dairy consumers, it is necessary to maintain dairy product safety and the integrity of all aspects of the dairy industry.

Program Services:

- Conducting field surveys of grade “A” milk supplies, dairy farms, processing plants, and transfer and receiving stations.
- Surveying and certifying the work performed by field inspectors working for the Iowa Department of Agriculture and Land Stewardship.
- Maintaining Iowa’s drug residue in milk database program.
- Training milk haulers in proper pick-up and sampling procedures.

These activities are performed to satisfy state, National Conference of Interstate Milk Shipper, and FDA requirements. Similar programs are conducted by other states to protect the public health and to assure an uninterrupted flow of safe milk within and between states.

Population Served: All consumers of dairy products in Iowa.

Funding Source: General Fund Appropriation

K19-1907

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$153,464 | \$155,126 | \$169,259 |
| FTEs | 2.02 | 2.01 | 2.00 |

**Groundwater
Division of Environmental Health**

Program Objective: To analyze available water testing data from private drinking water wells in Iowa for the purposes of identifying possible trends in common health related contaminants and cross referencing with disease outbreak reports.

Program Services: Water testing data analysis and consultations on the possible health effects of certain contaminants. The program works closely with the Department of Natural Resources (DNR) Geological Survey Bureau and Water Supply Section and the Iowa Department of Ag and Land Stewardship.

Population Served: All Iowans using private drinking water wells benefit from the analysis of water testing data for trends associated with common health related contaminants.

Funding Source: Intra State Receipt (Department of Natural Resources Groundwater Protection Fund)

K13-1402

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$20,000 | \$20,000 | \$20,000 |
| FTEs | 0.15 | 0.15 | 0.15 |

Harkin Wellness Grant - Building Healthy Communities in Iowa
Division of Health Promotion and Chronic Disease Prevention

Program Objective: To encourage healthier lifestyles; promote wellness and prevent the health and financial consequences of chronic diseases; and encourage innovative designs and practices to promote health and wellness.

Program Services: Oversee competitive grants/awards to facilitate community coalitions, establish sustainable wellness models, and promote programs that prevent and reduce chronic disease associated with lifestyles.

Population Served: Individual Iowans and communities addressing problems of inadequate fitness and unhealthy nutrition, tobacco use, and depression.

Funding Source: Federal Grant

0153-0934

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$0 | \$0 | \$2,898,825 |
| FTEs | 0.00 | 0.00 | 2.50 |

Hazardous Substance Emergencies
Division of Environmental Health

Program Objective: To investigate hazardous material releases and related exposures. The Hazardous Substances Emergency Events Surveillance System is an ongoing activity that provides useful data on a statewide basis regarding chemical spills/releases and their adverse impact on human health.

Program Services: Collection of public health information about the impact on employees, emergency responders, and the general public regarding releases of hazardous substances. A quarterly newsletter is published and distributed to hazardous material response teams, hospital emergency rooms, fire departments, EMS providers, police departments, and local emergency planning committees to provide assistance in planning for and responding to chemical release emergencies.

Population Served: First responders and all Iowans in the event of an emergency.

Funding Source: Federal Grant

0153-1308

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$81,408 | \$87,892 | \$93,356 |
| FTEs | 1.01 | 1.00 | 1.00 |

**Health Assessment and Education
Division of Environmental Health**

Program Objective: Public health assessments, site reviews, and updates as well as health consultations to investigate actual or potential health risks to workers and community members living or working near hazardous waste sites in Iowa.

Program Services: Physician, nurse, and community education programs designed and developed for communities where actual or potential exposures to hazardous substances exist. Health assessments and health education activities are designed to protect the public’s health and ensure the well-being of adults and children in affected communities. The program also provides supporting educational materials and fact sheets.

Population Served: All Iowans living in communities with actual or potential exposure to hazardous substances. Within the state, there are 12 superfund sites on the EPA’s National Priorities List and 56 sites, which are on the state’s hazardous waste registry.

Funding Sources: Federal Grant and Federal Indirect Funds

0153-1304/1306

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$154,701 | \$206,351 | \$195,443 |
| FTEs | 1.76 | 2.50 | 2.25 |

Health Care Safety Net
Division of Health Promotion and Chronic Disease Prevention

Program Objective: To create a formal network of safety net providers to preserve and expand the health care safety net for vulnerable Iowans.

Program Services:

- Develop an incubation program that will select eligible applicants to receive funding to establish themselves as a Federally Qualified Health Center Look Alike program to serve the underserved better.
- Select an entity to develop and administer the Iowa Collaborative Safety Net Provider Network pursuant to the conditions set forth in House File 825 of the 2005 legislative session through a request for proposal process.
- Assure the network enrolls as a member of and meets the data and information requirements set forth by the task force on indigent care created pursuant to Section 249J.14A, as enacted by 2005 Iowa Acts, Section 16.
- Establish an Iowa Safety Net Provider Advisory group.
- In collaboration with network members, develop a comprehensive database of the vulnerable population served, provider capacity and assess the resources and needs of safety net providers.
- Develop additional network initiatives to improve quality, improve efficiency, reduce errors, and provide clinical communication between providers.
- Conduct evaluation of the Iowa Collaborative Safety Net Provider Network.

Population Served: Vulnerable populations including urban and rural underserved, elderly, racial/ethnic minorities, safety net health providers, and communities seeking to address the needs of uninsured and underinsured populations.

Funding Source: Intra State Receipt (Department of Human Services)

0153-0918

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$0 | \$0 | \$1,100,000 |
| FTEs | 0.00 | 0.00 | 0.00 |

Health Care Workforce Planning
Division of Health Promotion and Chronic Disease Prevention

Program Objective: Address the current and future shortage of nurses, nursing assistive personnel and, as funds permit, the entire health care workforce in Iowa.

Program Services:

- Conduct and analyze research to assess the status of health care workforce shortages.
- Identify barriers to recruitment and retention of health care workers.
- Develop testing strategies at the local level to reduce vacancies and turnover in acute care settings (hospitals), long-term care facilities and home/community-based agencies.
- Develop strategies to promote the advancement of nurses and nursing assistive personnel through continuing education and training.
- Engage in activities that promote and ensure a viable health care workforce in Iowa.

Population Served: Populations identified as suffering from a shortage of health workforce personnel.

Funding Source: Federal Grant

0153-0932

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$1,102,630 | \$745,952 | \$1,378,680 |
| FTEs | 2.39 | 2.79 | 3.00 |

Health Promotion and Chronic Disease Prevention Division Director
Division of Health Promotion and Chronic Disease Prevention

Program Objective: The division director is responsible for the development, implementation and evaluation of community-based programs and services that are consistent with the department’s mission of promoting and protecting the health of Iowans, and within the context of *Healthy Iowans 2010*.

Program Services: The division director serves in a leadership capacity within the department and provides organizational oversight and operational responsibility for multiple programs and services. Responsibilities include collaborative leadership, organizational planning and development, fiscal management, supervision, and liaison with federal, state, and local entities.

Population Served: The division director provides functional and supervisory oversight for the Office of Multicultural Health and six bureaus; i.e., chronic disease prevention and management, family health, health care access, local public health services, nutrition and health promotion, and oral health. The division works closely with multiple local partners including but not limited to local boards of health, local public health agencies, hospitals, and private health care providers. All Iowans benefit from the health promotion and chronic disease prevention services provided at both the state and local levels.

Funding Sources: Federal Indirect Funds

0153-2158

| Fiscal Year | 04 Actual* | 05 Actual | 06 Estimate |
|--------------------|-------------------|------------------|--------------------|
| Federal Funds | \$47,311 | \$64,359 | \$135,000 |
| FTEs | 0.09 | 0.50 | 1.00 |

*Additional expenses included in other program areas

Health Statistics
Division of Environmental Health

Program Objective: The Center for Health Statistics provides health data and information to the public, other state agencies, the federal government, and other department programs through research, analysis, and publication. The evaluation of data helps provide assessment for programs that improve the quality of life and health of Iowans.

Program Services: The center provides data analysis, which includes but is not limited to:

- Vital events (births, deaths, marriages and dissolutions)
- Hospital discharge
- Cancer registry
- Behavior Risk Factor Surveillance System (BRFSS)
- Breast and cervical cancer
- Wise woman
- Trauma registry
- Asthma surveillance plan
- Diabetes surveillance
- Brain injury
- Osteoporosis
- Medicaid claims

Population Served: The data analyzed by the center is provided by statewide resources and benefits all Iowans.

Funding Sources: General Fund Appropriation, Federal Indirect Funds, and Intra-State Receipts

K21-2203; 0153-2204 (FY 04 only)

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$3,800 | \$1,671 | \$2,000 |
| Federal Funds | \$30,770 | \$0 | \$0 |
| Other Funds | \$43,526 | \$0 | \$0 |
| Total Funds | \$78,096 | \$1,671 | \$2,000 |
| FTEs | 0.81 | 0.44 | 0.00 |

Healthy Child Care
Division of Health Promotion and Chronic Disease Prevention

Program Objective: Reduce the morbidity and mortality of children enrolled in child care and early education programs through injury and communicable disease prevention and control.

Program Services: Services are designed to support and sustain healthy and safe child care options within each child care resource and referral service delivery area.

- Provide on-site consultation, training, and technical assistance to child care providers regarding health and safety in child care.
- Work with community public and private health providers to secure health services and products for children and families.
- Collaborate with DHS and their five Child Care Resource and Referral lead agencies and selected child health contractors.

The program also develops, implements, and evaluates public awareness plans for regional and community level activities.

Population Served: Child care and early education providers. Families and children directly benefit when high quality, safe, and healthy environments and services are available to the child care and early education providers.

Funding Sources: Federal Funds and Intra State Receipt (Department of Human Services Grant)

0153-0662/0666

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$33,674 | \$29,710 | \$16,000 |
| Other Funds | \$183,092 | \$148,252 | \$237,995 |
| Total Funds | \$216,766 | \$177,962 | \$253,995 |
| FTEs | 2.02 | 2.49 | 2.00 |

Healthy Iowans 2010

Division of Behavioral Health and Professional Licensure

Program Objective: To develop a comprehensive set of goals and action steps that assure advances in health status for all Iowans.

Program Services: To compete for federal funds and advance the public's health, Iowa must have the capacity to establish a road map and assess progress toward meeting Healthy People 2010 and Healthy Iowans 2010 goals.

The plan is the product of many stakeholder groups that have assumed responsibility for taking action. Each year, the action steps are tracked to assess process toward reaching agreed upon goals. The plan involves needs assessment, assurance of services, and policy development.

Program assessment is measured in terms of outcomes. To measure this type of assessment requires hard data. This program obtains that by:

- Identifying Iowa's capacity to generate that data.
- Identifying any weaknesses that would impede the generation of that data.
- Proposing activities to meet identified weaknesses.

Population Served: The plan allows the department and stakeholder groups to continue to provide programs and services that meet the public health needs of all Iowans.

Funding Sources Federal Grant

0153-0458

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|---------------|-----------|-----------|-------------|
| Federal Funds | \$15,129 | \$920 | \$0 |
| FTEs | 0.07 | 0.00 | 0.00 |

Healthy Opportunities for Parents to Experience Success (HOPES)
Division of Health Promotion and Chronic Disease Prevention

Program Objective: Strengthens high-risk families to be safe, self-sufficient and healthy, thus reducing child abuse and neglect.

Program Services: Program activities are subcontracted to local entities in nine counties to provide community-based family support to high-risk families through home visiting. Activities within the community include identification of high-risk families prenatal or at birth, outreach and case management with families, advocacy, access into local health systems, education, and human services, and enhancement of parenting skills. Activities are targeted toward the following goals:

- Promote optimal child health and development.
- Improve family coping skills and functioning.
- Promote positive parenting and family interaction.
- Prevent child abuse and neglect and infant mortality and morbidity.

Population Served: High-risk families in nine counties: Black Hawk, Buchanan, Clinton, Hamilton, Lee, Muscatine, Polk, Scott, and Woodbury

Funding Sources: General Fund Appropriation and Intra State Receipt (Department of Human Services Grant)

State funds are used for a 75% match for the Title V Block Grant.

K17-1753

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$674,929 | \$670,181 | \$645,917 |
| Other Funds | \$198,453 | \$200,000 | \$200,000 |
| Total Funds | \$873,382 | \$870,181 | \$845,917 |
| FTEs | 0.71 | 1.00 | 0.80 |

Heart Disease and Stroke - Cardiovascular Risk Reduction Program

Division of Health Promotion and Chronic Disease Prevention

Program Objective: To reduce coronary heart disease deaths and reduce the proportion of adults who are obese.

Program Services:

- Monitor adult cardiovascular risk behavior trends.
- Provide funding for seven community-based initiatives to reduce the prevalence of overweight/obesity among Iowans through changes in community health policies and environment and individual lifestyle behaviors.
- Partner with the Iowa Games Annual Sports Festival and Iowa State University Extension to promote Lighten Up Iowa, a statewide campaign to promote physical activity and good nutrition and the “Go the Distance” youth initiative.

Population Served: All Iowans benefit from information provided by the program on issues related to obesity, cardiovascular risk, and the promotion of physical activity and good nutrition.

Funding Source: Federal Grant

0153-0406

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$325,941 | \$316,308 | \$229,881 |
| FTEs | 2.51 | 2.51 | 2.50 |

Hepatitis Prevention and Surveillance Project
Division of Acute Disease Prevention and Emergency Response

Program Objective: To implement a statewide hepatitis C plan aimed at education and prevention.

Program Services:

- Increase Awareness of HCV risk among Iowa veterans.
- Provide hepatitis C virus (HCV) counseling and testing for at-risk populations.
- Increase capacity of referral services for persons testing positive for HCV.
- Provide training to those who counsel persons requesting HCV testing.
- Provide laboratory support for HCV testing.
- Provide education to the public about the risks of hepatitis C infection.

Population Served: Funds are used to implement a statewide hepatitis plan and provide services to Iowans at risk of hepatitis C infection.

Funding Source: General Fund Appropriation (FY 06) and Private Grant

K07-0763; 0153-1576

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$0 | \$0 | \$20,000 |
| Other Funds | \$3,787 | \$6,661 | \$6,271 |
| Total Funds | \$3,787 | \$6,661 | \$26,271 |
| FTEs | 0.04 | 0.22 | 0.50 |

Home Care Aide
Division of Health Promotion and Chronic Disease Prevention

Program Objective: Provide personal care and supportive services that allow individuals to remain safely in their homes and communities, which reduces the cost of medical expenses associated with long-term care.

Program Services: Personal care and supportive services include home care aide, protective services, respite care and chore services. These services assist frail elderly and disabled persons to maintain good personal hygiene, maintain activities of daily living, and maintain a safe, clean environment within their home. Protective services stabilize a family’s home environment to prevent abuse or neglect.

Population Served: All Iowans are eligible for services with priority given to low-income, elderly, disabled persons, and those at risk of abuse or neglect.

Funding Sources: General Fund Appropriation

K11-1105

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$6,924,744 | \$6,894,963 | \$6,907,004 |
| FTEs | 0.00 | 0.00 | 0.00 |

Influenza Vaccination Study
Division of Acute Disease Prevention and Emergency Response

Program Objective: Decrease incidence of influenza in infants aged 6-23 months through an influenza vaccination program. Children attending out of home care settings with more than six children, are at increased risk for many communicable diseases, and thus derive greater benefit from interventions from diseases.

Program Services: Participating centers were identified and teams of personnel from counties were coordinated and trained. This included conducting educational outreach efforts, targeting day care personnel and parents. After enrollment and immunization occurred, as the influenza season progressed, samples were collected, telephone surveys were conducted, active surveillance occurred, and testing was performed at the University of Iowa Hygienic Laboratory.

Population Served: This pilot project served daycare centers, infants, parents, and staff in Black Hawk, Cerro Gordo, Polk and Woodbury counties.

Funding Sources: Private Foundation Grant

0153-1508

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$11,069 | \$36,936 | \$0 |
| FTEs | 0.41 | 0.36 | 0.00 |

Information Management

Division of Acute Disease Prevention and Emergency Response

Program Objective: The Bureau of Information Management serves the department, the statewide public health community and the general public by implementing, maintaining and supporting technology services.

Program Services:

Services for customers inside the department include:

- Designing, developing, and supporting the department's network and other infrastructure. The bureau maintains and supports personal computers, hardware and software for all employees, including communications links to email, the Internet, the ITE mainframe, data servers and applications.
- Web site and software application development and support.
- Help desk and technical consultation services in support of department programs and grant writing processes.
- Data security, including data backups, up-to-date virus protection, email filters, and other data integrity and business continuity services.

Services for customers outside the department include:

- Designing, developing, and supporting computer software for external public health partners, including public health agencies and private providers.
- Secure data transfers.
- Develop and support information technology infrastructure for emergency preparedness for public health agencies and private health providers.
- Public access to public health information.

Population Served: The information management bureau provides support services to the department as well as local public health partners and private health providers.

Funding Sources: General Fund Appropriation, Federal Indirect Funds and Intra State Receipts (Department of Human Services Grant)

K21-2207; 0153-2208

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$41,771 | \$94,135 | \$97,500 |
| Federal Funds | \$803,053 | \$819,861 | \$1,510,000 |
| Other Funds | \$46,513 | \$50,198 | \$45,000 |
| Total Funds | \$891,337 | \$964,194 | \$1,652,500 |
| FTEs | 10.67 | 11.64 | 18.95 |

**Integrated Public Health Information Immunization Registry
Division of Acute Disease Prevention and Emergency Response**

Program Objectives:

- Ensures that children are age-appropriately immunized by the collection of immunization histories on children via the Iowa Immunization Registry Information System (IRIS).
- Verifies that IRIS is cost-effective, improves clinic efficiency, and increases immunization rates.

Program Services:

- The system allows public and private providers to exchange information regarding the immunization status of their patients and ensures that children are age-appropriately vaccinated.
- This one-time grant is a time and motion study performed to verify that the IRIS is cost-effective, improves clinic efficiency, and increases immunization rates as compared to standard clinical record keeping. This is being done through a contract with Iowa Health System.

Population Served: Public and private entities, which provide immunizations to children in Iowa.

Funding Source: Private Foundation Grant

0153-1528

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$1,282 | \$7,341 | \$0 |
| FTEs | 0.00 | 0.00 | 0.00 |

Iowa Neonatal Metabolic Screening Program

Division of Health Promotion and Chronic Disease Prevention

Program Objective: To provide comprehensive newborn screening services for hereditary and congenital disorders for the state. It is required that all newborns and infants born in the state of Iowa are screened for medium chain acyl Co-A dehydrogenase deficiency, phenylketonuria, and other amino acid, organic acid, and fatty oxidation disorders detectable by tandem mass spectrometry, hypothyroidism, galactosemia, hemoglobinopathies, congenital adrenal hyperplasia, and biotinidase deficiency. Cystic fibrosis screening will be added to the panel in 2006.

Program Services:

- Early identification of specific hereditary and congenital disorders.
- Comprehensive follow-up program for patients, families, and their physicians. Activities include consultation, treatment when indicated, case management, education and quality assurance.
- Professional and public education about newborn metabolic screening and specimen collection.
- Special medical formula program.

Population Served: All newborns and infants born in Iowa are screened unless the parent/legal guardian signs a waiver refusing testing.

Funding Sources: Fee-for-service program. The University Hygienic Laboratory is the fiscal agent. One dollar of each newborn screening fee is sent to the Iowa Department of Public Health to pay the state coordinator for Genetic Services position (see Congenital and Inherited Disorders for complete funding summary).

Iowa Registry for Congenital and Inherited Disorders (IRCID)

Division of Health Promotion and Chronic Disease Prevention

Program Objective: To monitor birth defects and fetal deaths in the state of Iowa.

Program Services:

- Active surveillance (data collection and assessment) in all 99 counties.
- Evaluation of changes in the occurrence of birth defects and fetal deaths.
- Research to determine possible causes and improved treatment for children with birth defects and for the prevention of stillbirths.
- Professional and public education for the prevention of birth defects.
- Data to assist in the planning and implementation of health care and human services programs for children.
- Iowa Registry Parent Notification.

Population Served: Infants who have a congenital or inherited disorder diagnosed at birth or within the first year of life; pregnancies that may be affected by a birth defect in Iowa on or after January 1, 1983, whose mother was an Iowa resident; or fetal deaths occurring in Iowa after September 30, 2005.

Funding Source: Funding for this activity is located in the University of Iowa's budget. Legislation was passed in FY 03 to help fund birth defects surveillance. A birth certificate registration fee increase of \$5.00 in FY04 and FY05 and \$10.00 in FY06 was approved. This fee increase went into effect July 1, 2003. The birth registration fees are deposited into the general fund, and then portions of the total funds are distributed to the IRCID. A cooperative agreement with the federal Centers for Disease Control and Prevention (CDC) expands the existing registry to include all fetal deaths in Iowa.

Iowa Review of Family Assets (IRFA)
Division of Health Promotion and Chronic Disease Prevention

Program Objective: Development of an enhanced obstetric discharge planning service for women delivering in Iowa hospitals to ensure that new mothers and children receive essential individualized information and services after discharge.

Program Services:

- Development and testing of a standardized hospital based screening instrument to assess the new mother's potential need for community-based resources.
- Training of hospital personnel in the use of this tool as a routine part of discharge planning.
- Development of a statewide inventory of existing community-based resources and services, which address the needs of mothers and children.
- Evaluation of the effectiveness of the system.
- Referrals to community-based resources that will promote or maintain the health status of the new mothers and their children.

Population Served: The IRFA is currently available to any parent of a baby delivered in a pilot hospital. The goal of the project is to make the IRFA available to parents across the state.

Funding Source: Intra State Receipts (Department of Human Services Grant)

0153-0668

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$40,365 | \$128 | \$195,854 |
| FTEs | 0.63 | 0.00 | 0.00 |

Jail Based Assessment of Treatment
Division of Behavioral Health and Professional Licensure

Program Objective: To provide assessment and substance abuse treatment services in the Polk, Scott and Woodbury county jails and continuing care after release.

Program Services:

- Assessment
- In-jail intensive treatment
- Outpatient treatment
- Outcome follow up

Population Served: Polk, Scott and Woodbury county jail inmates

Funding Source: Federal Grant

0153-0116

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$703,005 | \$888,769 | \$1,167,354 |
| FTEs | 0.85 | 1.00 | 1.00 |

**Lead Certification and Enforcement
Division of Environmental Health**

Program Objective: Enforcement of the federal rules requiring certification of lead inspectors and lead abatement contractors as well as oversight of the required notifications regarding lead-based paint prior to renovation or repainting.

Program Services: Congress passed legislation in 1992 requiring lead inspectors and lead abatement contractors to be certified and requiring notification regarding lead-based paint prior to renovation, remodeling and repainting. States are given the option to develop EPA-authorized programs statewide to carry out these activities or allow the EPA to enforce these federal rules.

Population Served: Certification and enforcement activities are carried out statewide.

Funding Sources: Federal Grant and Retained Fees

K19-1928; 0153-1912/1914 (FY 04 only)

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$249,143 | \$326,436 | \$396,721 |
| Other Funds | \$23,400 | \$28,114 | \$25,000 |
| Total Funds | \$272,543 | \$354,550 | \$421,721 |
| FTEs | 4.72 | 6.61 | 7.00 |

**Local Board of Health Environmental Liaison
Division of Environmental Health**

Program Objective: To assist local boards of health and county health departments in establishing effective programs in multiple environmental health disciplines (i.e., wastewater treatment, private water wells, nuisance complaints, indoor air, pools and spas, tanning facilities, tattoo facilities, funeral homes, and others.)

Program Services: The primary function is to provide direct technical assistance to boards of health on environmental health issues, and to assist them in building the local capacity to hire, train, and maintain qualified personnel to deliver quality services. It is estimated that only one-third of the state’s counties have adequate staff/resources in place to operate a basic environmental health program.

Population Served: All 99 county boards of health, county health departments, and boards of supervisors as well as two city boards of health and city health departments.

Funding Source: General Fund Appropriation

K19-1909

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$55,613 | \$75,428 | \$64,579 |
| FTEs | 0.65 | 0.65 | 0.65 |

Local Boards of Health
Division of Health Promotion and Chronic Disease Prevention

Program Objective: Provides partial support to local boards of health as they fulfill their statutory responsibility through implementation of the core public health functions and essential public health services in all 99 counties.

Program Services: Monitoring health status, identifying health problem priorities, informing and educating people about health issues, mobilizing community partnerships to address local health issues, policy development that supports individual as well as community health efforts, ensuring health and safety through enforcement of health regulations and laws, linking people with and/or providing personal health care services, and evaluating the effectiveness, quality and accessibility of personal and population based health services.

The funding compliments and supports the efforts of local boards of health in addressing specific health priorities in each county. Collaboration with multiple community partners enhances efforts to better meet the needs of their local communities. Local boards of health, in partnering with community empowerment boards and other health care providers, have an opportunity to use public health funding more efficiently and effectively, and reduce duplication and fragmentation in local service provision.

Population Served: All Iowans are impacted through the work of the local boards of health in all 99 counties.

Funding Source: General Fund Appropriation

K09-0959

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$250,726 | \$246,355 | \$247,480 |
| FTEs | 0.00 | 0.00 | 0.00 |

Local Public Health Liaison
Division of Health Promotion and Chronic Disease Prevention

Program Objective: Work collaboratively with local boards of health and community public health partners to strengthen local public health infrastructure, facilitate local delivery of core public health functions and assure the provision of the essential public health services.

Program Services: The consultants develop partnerships and provide leadership to local boards of health, local public health departments, boards of supervisors, and other public health partners responsible for providing orientation and education, developing policy, enhancing system development, and fostering healthy communities. Assistance is given to local boards of health in carrying out the Community Health Needs Assessment and linking their Health Improvement Plan to *Healthy Iowans* 2010. This is accomplished through consultation/technical assistance and financial funding for the provision of essential public health services in each of Iowa’s 99 counties.

In addition, the consultants assure compliance with contract conditions and rules of funded programs through contract management oversight activities throughout the year.

Population Served: Support services to local health department assure quality public health services are provided to all Iowans.

Funding Sources: General Fund Appropriation, Federal Grant, and Intra State Receipt (Department of Elder Affairs Grant) (FY 04 only)

State funds are used for maintenance of effort match for the PHHS Block Grant

K09-0957; 0153-0958

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$423,429 | \$427,590 | \$487,217 |
| Federal Funds | \$187,122 | \$169,878 | \$310,206 |
| Other Funds | \$45,654 | \$0 | \$0 |
| Total Funds | \$656,205 | \$597,468 | \$797,423 |
| FTEs | 7.63 | 7.23 | 9.00 |

Local Public Health Services
Division of Health Promotion and Chronic Disease Prevention

Program Objective: Provides partial support to local boards of health as the boards fulfill their statutory responsibility in assuring the core public health functions and delivery of essential public health services.

Program Services: Assist local boards of health in providing services that address health problem priorities identified in each county’s health improvement plan and advance the goals of Healthy Iowans 2010. Funding is also being used to provide financial support for targeted areas of service relating to Iowa’s elderly and disabled populations; i.e., home and community-based services (skilled nursing and health maintenance visits in the home/office, home care aide, homemaker, respite and chore).

Population Served: All Iowans are impacted through the work of the local boards of health in all 99 counties.

Funding Source: Tobacco Fund Appropriation

K92-9202

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Tobacco Funds | \$1,157,465 | \$1,156,637 | \$1,157,482 |
| FTEs | 0.00 | 0.00 | 0.00 |

Mammography
Division of Environmental Health

Program Objective: Enforcement of federal and state legislation and rules for maintenance, inspection and operation of mammography equipment as well as inspection and providing permits to operators.

Program Services: Properly maintained, inspected, and operated mammography units provide early cancer detection without unnecessarily exposing patients to excess radiation. The Bureau of Radiological Health has the responsibility for the regulation, inspection and enforcement that assures women that the personnel and mammography equipment are operating safely.

Population Served: All Iowa women who receive mammography services benefit from these regulatory and enforcement practices.

Funding Source: Retained Fees

K19-1918

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$180,615 | \$189,940 | \$215,000 |
| FTEs | 2.02 | 2.01 | 2.00 |

Maternal Health

Division of Health Promotion and Chronic Disease Prevention

Program Objective: To assure quality health services for pregnant women, which in turn, improves birth outcomes. Infant mortality and morbidity and the incidence of preventable diseases and disabling conditions are reduced.

Program Services: Department personnel provide professional consultation and technical assistance to local providers to:

- Assure access to prenatal care resources such as medical care, prenatal education, risk reduction and health supervision.
- Promote collaboration among various health care providers and services within the local community to increase access and decrease duplication of efforts.
- Promote and maintain cost efficient use of funding and resources.

All coordinated services are family-centered and community-based.

Population Served: This federal-state partnership funds 26 locally contracted maternal health agencies to provide direct and/or enhanced health services and referral for pregnant women and families with low-income or limited availability to health care.

Funding Sources: General Fund Appropriation and Federal Grant

State funds are used for a 75% match for the Title V Block Grant.

K03-0303; 0153-0304 (Partial)/0454

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|--------------------|--------------------|--------------------|
| State Funds | \$304,719 | \$297,867 | \$304,067 |
| Federal Funds | \$1,300,673 | \$1,192,424 | \$1,235,049 |
| Total Funds | \$1,605,392 | \$1,490,291 | \$1,539,116 |
| FTEs | 3.04 | 3.18 | 4.90 |

Medical Director**Division of Behavioral Health and Professional Licensure**

Program Objective: Medical direction and consultation to division staff regarding medical aspects of division programs was provided.

Program Services:

- Provided direction to the State Substitute Medical Decision Making Board
- Provided direction to the Anatomical Gift Public Awareness Advisory Committee
- Provided direction to staff and substance abuse programs regarding methadone and tuberculosis
- Responded to local health practitioners on health related issues

This position was eliminated in FY 2002. The ongoing expenses are due to the mandated early retirement payouts of the medical director.

Population Served:

- Substance abuse programs
- Local health practitioners
- General public

Funding Source: General Fund Appropriation

K01-0201

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$46,211 | \$50,864 | \$63,016 |
| FTEs | 0.00 | 0.00 | 0.00 |

Methamphetamine Awareness
Division of Behavioral Health and Professional Licensure

Program Objective: This program is designed to raise the general awareness of the methamphetamine use and lab problem in Iowa, through outreach to communities, and education for the retail industry and general public.

Program Services:

- Train employees of retail organizations in recognizing products purchased for methamphetamine labs.
- Inform general public through posters, shelf labels, and door decals
- General public Web site for informational purposes
- Toll-free number for employees and the general public to report suspicious transactions

Population Served: Retail industry and the general public.

Funding Source: Federal Grant

0153-0216

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$0 | \$123,533 | \$50,000 |
| FTEs | 0.00 | 0.00 | 0.00 |

**Methamphetamine Extended Treatment
Division of Behavioral Health and Professional Licensure**

Program Objective: To provide a longer length of time in treatment to Iowans who are abusing or addicted to methamphetamine.

Program Services:

- Assessment
- Residential
- Day Treatment
- Halfway House
- Intensive Outpatient
- Outpatient
- Continuing care and aftercare

Population Served: Iowans who are abusing or addicted to methamphetamine. Families or significant others may also receive crisis intervention or treatment services in order to better understand how methamphetamine abuse affects the entire family. Services are available through a sliding fee.

Funding Source: General Fund Appropriation

K01-0103

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$683,390 | \$683,390 | \$683,390 |
| FTEs | 0.00 | 0.00 | 0.00 |

Methamphetamine Prevention
Division of Behavioral Health and Professional Licensure

Program Objective: To provide evidence-based methamphetamine and other substance abuse prevention programming.

Program Services:

- Providing science-based curriculum in schools in five communities
- Providing training for teachers
- Providing technical assistance for teachers implementing the program
- Providing community education

Population Served: The target population in selected communities includes:

- Youth 6 to 19 years
- Parents
- Communities
- Schools

Funding Source: Federal Grant

0153-0170

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$157,969 | \$379,499 | \$394,650 |
| FTEs | 0.11 | 0.30 | 0.30 |

Methamphetamine Treatment – Polk County
Division of Behavioral Health and Professional Licensure

Program Objective: To provide treatment to Polk County residents who abuse or are addicted to methamphetamine as their primary drug of choice.

Program Services:

- Assessment
- Residential
- Day Treatment
- Extended Outpatient
- Intensive Outpatient
- Outpatient
- Continuing Care

Population Served: Polk County residents who abuse or are addicted to methamphetamine.

Funding Source: Federal Grant

0153-0108

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$281,457 | \$506,416 | \$490,855 |
| FTEs | 0.36 | 0.50 | 0.50 |

Office of Multicultural Health
Division of Health Promotion and Chronic Disease Prevention

Program Objective: The health problems of diverse populations in Iowa continue to be disproportionately greater than those of the majority population. The Office of Multicultural Health was established to address this disparity and to build the infrastructure of a health network that addresses the unique health needs of minority, refugee, and immigrant populations.

Program Services: The multicultural health consultant works with local, state, regional and federal entities to address the need to examine, evaluate, discuss and implement strategies, policies and procedures regarding health concerns as they relate to racial and ethnic minority populations. These issues also include factors and indicators such as age, socioeconomic status, health, culture, religion, and awareness/sensitivity needs of each population. Some of the duties of the multicultural consultant are to provide internal and external resources, networks, technical assistance, educational workshops and training, community-based initiatives, awareness training, and data collection initiatives. Additional duties of the office include support of community-based multicultural health coalitions. These coalitions provide grassroots multicultural services. In addition, they foster the development of coordinated, collaborative, and broad-based efforts by public and private entities, and faith-based organizations to identify health education, health promotion and disease prevention needs.

Population Served: Minority, immigrant, and refugee populations throughout Iowa.

Funding Sources: Unfunded

Neuromuscular and Other Related Genetic Disease
Division of Health Promotion and Chronic Disease Prevention

Program Objective: Provides funding for clinical outreach services for patients and families with a wide variety of inherited and life threatening neuromuscular diseases, such as muscular dystrophy.

Program Services:

- Diagnostic evaluations.
- Extensive medical care.
- Case management and collaboration with local care providers.
- Educational services pertaining to neuromuscular disease and care are provided to patients and families, community agencies, schools and others involved in the care of the client.

Services are provided at clinic sites in Des Moines, Dubuque, Mason City, Sioux City, Waterloo, and Iowa City to assure that all Iowans have access to these services.

Population Served: Individuals with Duchene/Becker muscular dystrophy, myotonic dystrophy, peripheral neuropathies, spinal muscular atrophy, hypotonia, weakness, gross motor delay, congenital myopathy, ataxia, limb girdle muscular dystrophy, congenital muscular dystrophy, ion channel disorders, fascioscapulohumeral muscular dystrophy, and other similar diagnoses and their families.

Funding Sources: General Fund Appropriation

State funds are used for a 75% match for the Title V MCH Block Grant.

K07-0705

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$99,799 | \$99,799 | \$99,799 |
| FTEs | 0.00 | 0.00 | 0.00 |

Obesity Prevention
Division of Health Promotion and Chronic Disease Prevention

Program Objective: To write a statewide comprehensive plan to prevent obesity through promoting physical activity and healthy eating.

Program Services:

- Providing qualified professional staff dedicated to obesity prevention and control.
- Developing a comprehensive statewide plan for preventing and controlling obesity including 10-year goals with time-specific objectives for achieving those goals.
- Identifying and recruiting a diverse range of public and private partner agencies and organizations to participate in the process of developing and implementing the Iowans Fit For Life statewide plan.

Population Served: All Iowans will benefit from living in a community/environment that promotes physical activity and healthy eating. Priority will be given to Iowa children 0-18 years.

Funding Sources: General Fund Appropriation and Federal Grant

K07-0751; 0153-0752

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$0 | \$60,031 | \$60,031 |
| Federal Funds | \$0 | \$239,405 | \$377,587 |
| Total Funds | \$0 | \$299,436 | \$437,618 |
| FTEs | 0.00 | 2.06 | 4.00 |

Oral Health

Division of Health Promotion and Chronic Disease Prevention

Program Objective: To improve access to oral health care by building oral health infrastructure at the state and local level and providing limited dental services to children participating in the Title V Child Health program.

Program Services: The program provides direct services to low-income children that include the following:

- Dental examinations and restorative dental services through local child health centers.
- Application of dental sealants in the school based dental sealant programs.
- Participation in school fluoride mouth rinse programs.
- Provide dental treatment through a program in cooperation with the University of Iowa College of Dentistry to children with developmental disabilities not covered by Supplemental Security Income or Title XIX.

The program provides consultation and technical assistance through activities such as community assessment, participation in community health planning, and oral health education and marketing.

Population Served: Services are provided through local child health centers to underserved children 0-21 years old, and to all Iowans through community-based programs.

Funding Sources: General Fund Appropriation and Federal Funds

State funds are used for a 75% match for the Title V MCH Block Grant.

K05-0503; 0153-0502/0520

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$93,209 | \$86,280 | \$69,324 |
| Federal Funds | \$453,888 | \$566,696 | \$560,137 |
| Total Funds | \$547,097 | \$652,976 | \$629,461 |
| FTEs | 2.62 | 2.85 | 3.30 |

Oral Health Iowa’s Senior Smiles Project
Division of Health Promotion and Chronic Disease Prevention

Program Objectives: To collect information on the oral health needs of elderly Iowans participating in the Medicaid Elderly Waiver Program, provide preventive interventions based on analysis of data, and evaluate the outcomes of the assessment and intervention project

Program Services: Assessment of oral health status of Medicaid Elderly Waiver participants over age 65 by public health nurses using a written survey and oral screening tool; analysis of the surveys and screening tools; and provision of oral hygiene interventions to improve oral health based upon results of the surveys and screening tools.

Population Served: Seniors aged 65 and older on the Medicaid Elderly Waiver program in 3 counties.

Funding Source: Private Grant

0153-1110

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$0 | \$9,432 | \$10,000 |
| FTEs | 0.00 | 0.00 | 0.00 |

Office for Organizational Excellence
Division of Behavioral Health and Professional Licensure

Program Objective: To help the department, government leaders, and public health partners achieve and sustain more effective assessment, planning, process improvement, and performance systems.

Program Services:

- Provide consultation to programs throughout the department on planning and performance measures to help in strategic decision-making.
- Revise current department plans and reports to integrate them into a single, department-wide comprehensive plan.
- Develop employee and customer satisfaction surveys to assess responsiveness to customer & employee needs.
- Facilitate and coordinate the planning for “Redesigning Public Health in Iowa.”
- Coordinate Healthy Iowans 2010, Iowa Excellence and other assessment activities, Barn Raising, the Abuse Education Review Panel, and the Substitute Medical Decision-Making Board.

Population Served: Services are provided to department leaders and employees, other state agencies, public policymakers, local public health partners, and consumers of health services.

Funding Source: Federal Indirect Funds

0153-2214

| Fiscal Year | 04 Actual* | 05 Actual | 06 Estimate |
|--------------------|-------------------|------------------|--------------------|
| Federal Funds | \$0 | \$216,928 | \$331,500 |
| FTEs | 0.00 | 3.03 | 4.00 |

* Expenditures were included in other program areas in FY 04.

Patient Safety

Division of Behavioral Health and Professional Licensure

Program Objective: Improve patient safety and health outcomes in Iowa by developing, implementing and evaluating best practices based on system-wide research regarding barriers to safe care and strategies to improve safety.

Program Services: The financial and safety costs of medical errors to the health care system and to the public are significant. Statewide, evidence-based initiatives offer the potential for improved health care as well as substantial cost savings. The result is reduced medical costs and improved quality of life for all Iowans.

Population Served: The impact of this program is improved patient care and reduced costs statewide.

Funding Source: Federal Grant

0153-1964

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$106,189 | \$2,544 | \$0 |
| FTEs | 0.82 | 0.00 | 0.00 |

Perinatal Program
Division of Health Promotion and Chronic Disease Prevention

Program Objective: To improve birth outcomes. Infant mortality and morbidity and the incidence of preventable diseases and handicapping conditions are reduced.

Program Services: Through partnership with the University of Iowa Statewide Perinatal program, specialists in perinatology and neonatology provide on-site consultation to Iowa’s maternity hospitals to promote high quality obstetrical and neonatal care.

Population Served: All Iowa hospitals providing maternity services

Funding Sources: General Fund Appropriation and Federal Funds

State funds are used for a 75% match for the Title V MCH Block Grant.

K05-0651; 0153-0304 (Partial)

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$53,169 | \$53,169 | \$53,169 |
| Federal Funds | \$271,366 | \$299,598 | \$298,716 |
| Total Funds | \$324,535 | \$352,767 | \$351,885 |
| FTEs | 0.00 | 0.00 | 0.00 |

Personnel

Division of Behavioral Health and Professional Licensure

Program Objective: Oversight of the human resource function of the Department of Public Health.

Program Services: Providing information to new and current employees on issues such as:

- Health, dental, and life insurance
- Department and state policies and procedures
- Promotion, demotion, transfers, and reclassification
- Payroll and paid/unpaid leave
- Workers' compensation
- IPERS and deferred compensation
- Dependent care
- Employee assistance program
- Affirmative action
- Hiring practices
- Personal development seminars and trainings
- Guidance to management on collective bargaining

Population Served: IDPH staff

Funding Sources: General Fund Appropriation and Federal Indirect Funds

K21-2211; 0153-2212

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$60,884 | \$2,192 | \$2,500 |
| Federal Funds | \$135,087 | \$139,994 | \$148,000 |
| Total Funds | \$195,971 | \$142,186 | \$150,500 |
| FTEs | 1.95 | 2.00 | 2.00 |

Phenylketonuria (PKU) Assistance
Division of Health Promotion and Chronic Disease Prevention

Program Objective: To provide funds for the purpose of special medical foods for individuals with inborn errors of metabolism.

Program Services:

- Work with participants, families, and health care providers to provide metabolic formula and special medical foods to individuals with a diagnosed inborn error of metabolism, such as phenylketonuria (PKU).
- Work with participants, families, and health care providers to provide dietary and medical management of metabolic disorders.
- Provide consultation services to health care providers regarding the management of inborn errors of metabolism.
- Allocate funds to program participants in an equal distribution to all participants, plus an additional allocation to participants based upon need.
- Order metabolic formula and medical foods from distributors on behalf of program participants.

Population Served: Participants in the Iowa Metabolic Formula and Medical Foods Program at the University of Iowa Department of Pediatrics.

Funding Source: General Fund Appropriation and Tobacco Fund Appropriation

K70-7001; K81-8102

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$0 | \$0 | \$100,000 |
| Tobacco Funds | \$0 | \$0 | \$60,000 |
| Total Funds | \$0 | \$0 | \$160,000 |
| FTEs | 0.00 | 0.00 | 0.00 |

**Poison Control Center
Division of Environmental Health**

Program Objective: To reduce the number of deaths in Iowa caused by poisoning and costs associated with unintentional poisoning by educating the public on prevention and treatment and promoting public safety and prevention. The primary economic impact of the center is derived from the ability to manage nearly 80% of exposure cases entirely by telephone without the need for more costly emergency medical services.

Program Services: Each year, more than two million poisonings are reported to poison centers across the country. More than 90% occur in the home and 53% of poison victims are children under 6 years old.

The Iowa Statewide Poison Control Center (ISPCC) received approximately 26,000 calls for poison control services last fiscal year. It provides immediate access to a cost-effective service where there is a centralization of expertise and reference information. ISPCC also has the ability to serve as an early warning system for unusual health hazards. The center coordinates poison control educational activities statewide.

Population Served: The center is a 24-hour, toll-free telephone emergency poison information resource that can be used by both the public and health care professionals.

Funding Source: Tobacco Fund Appropriation

K92-9210

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Tobacco Funds | \$437,000 | \$437,000 | \$600,000 |
| FTEs | 0.00 | 0.00 | 0.00 |

**Policy, Legislation and Constituent Relations
Director's Office**

Program Objective: To identify, develop, implement, and promote public policy options to achieve public health goals and to be a resource for Iowans and the health community.

Program Services: The legislative liaison assists the director, division directors, and programs in reviewing state legislation and regulations to determine their impact on the department and programs. The liaison also coordinates and implements strategies to meet public health priorities. The liaison serves as the department's representative before the Iowa General Assembly and other policy-related forums.

Population Served: Services are provided to department employees, other state agencies, Local Boards of Health, local, public and private health partners and to the Legislative Branch.

Funding Source: Federal Indirect Funds

0153-2210

| Fiscal Year | 04 Actual* | 05 Actual | 06 Estimate |
|--------------------|-------------------|------------------|--------------------|
| Federal Funds | \$0 | \$161,449 | \$146,000 |
| FTEs | 2.83 | 2.74 | 2.30 |

* Additional expenditures were included in other program areas.

Polychlorinated Biphenyls (PCB)
Division of Environmental Health

Program Objective: To ensure compliance with Environmental Protection Agency regulations concerning proper handling and disposal of Polychlorinated biphenyls (PCBs).

Program Services: Case review compliance and enforcement by staff, coordinated with federal authorities via a contractual relationship. PCBs are known carcinogens that require proper handling and disposal to prevent human exposure.

Population Served: Given its status as a carcinogen, all Iowans are protected by the proper handling and disposal of PCBs.

Funding Sources: General Fund Appropriation and Federal Grant (Ended 06/30/05)

State funds are used for a 25% match for the federal grant.

K19-1908

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$43,487 | \$43,452 | \$0 |
| Federal Funds | \$130,462 | \$130,357 | \$0 |
| Total Funds | \$173,950 | \$173,809 | \$0 |
| FTEs | 2.53 | 2.36 | 0.00 |

Prescription Services

Division of Acute Disease Prevention and Emergency Response

Program Objective: Ensure that Iowans have access to medications for the prevention and treatment of sexually transmitted diseases and tuberculosis.

Program Services: This program contracts with a licensed pharmacy to distribute prescription medications. Distribution of medications to treat sexually transmitted diseases and tuberculosis must be managed by licensed pharmacists.

Population Served: Persons infected with sexually transmitted diseases and tuberculosis.

Funding Source: General Fund Appropriation

K15-1541

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$172,674 | \$182,306 | \$145,515 |
| FTEs | 0.00 | 0.00 | 0.00 |

Primary Care
Division of Health Promotion and Chronic Disease Prevention

Program Objective: To assure access of primary care health services to all Iowans. Iowa experiences geographic areas and populations that have barriers to access of primary health care services. The barriers could be monetary, geographic, linguistic, or a shortage of medical providers. The lack of access to services for the underserved or uninsured populations results in higher health cost over time.

Program Services:

- Determine health professional shortage areas and medically underserved area designations.
- Assist communities by providing recruitment and retention technical assistance.
- Assist in placement of National Health Service Corps scholars and graduates repaying loans by serving in shortage areas.
- Assist in the establishment and expansion of community and migrant health centers.
- Coordinate sponsorship of J-1 Visa waiver physicians in shortage areas.

Population Served: Underserved and uninsured populations throughout Iowa.

Funding Source: Federal Grant

0153-0912

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$193,098 | \$139,208 | \$134,074 |
| FTEs | 1.37 | 1.50 | 1.80 |

**Primary Care Recruitment and Retention Endeavor (PRIMECARRE)
Division of Health Promotion and Chronic Disease Prevention**

Program Objective: To improve access to health care in underserved areas by recruiting and retaining health care professionals.

Program Services:

- Assist communities in recruiting and retaining health care professionals in designated shortage areas.
- Provide loan repayment grants for primary care, mental health and oral health professionals in return for full-time employment in a public or nonprofit health facility for a two-year service commitment.

Population Served: Addresses all underserved areas of the state, with a focused effort to draw practitioners to areas designated as Health Professional Shortage Areas with high proportions of elderly, Hispanic and other minorities, uninsured or underinsured, and families in poverty.

Funding Sources: General Fund Appropriation and Federal Grant

State funds are used for a 1:1 match for the Federal Loan Repayment Grant

K09-0901; 0153-0908

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$150,000 | \$150,000 | \$150,000 |
| Federal Funds | \$150,000 | \$120,000 | \$120,000 |
| Total Funds | \$300,000 | \$270,000 | \$270,000 |
| FTEs | 0.00 | 0.00 | 0.00 |

Professional Licensure

Division of Behavioral Health and Professional Licensure

Program Objective: To protect the public health, safety and welfare by licensing qualified individuals who provide services to consumers and by fair and consistent enforcement of the statutes and regulations of the licensure boards.

Program Services: The professional licensure bureau licenses and regulates approximately 43,000 licensees and 6000 businesses including:

- Processing applications for licensure, renewal, and reactivation.
- Conducting examinations for licensure
- Providing administrative support for 19 boards
- Administering the impaired practitioner program
- Determining eligibility for license participation in the volunteer health care provider program
- Investigating complaints and imposing discipline on licensees.

The licensed and regulated professions to whom the bureau provides direct services:

| | |
|-----------------------------------|-----------------------------------|
| Athletic Trainers | Nursing Home Administrators |
| Barbers | Optometry |
| Behavioral Sciences | Physical and Occupational Therapy |
| Chiropractic | Physician Assistants |
| Cosmetology | Podiatry |
| Dietetic | Psychology |
| Hearing Aid Dispensing | Respiratory Care Practitioners |
| Interpreters for Hearing Impaired | Social Workers |
| Massage Therapy | Speech Pathology and Audiologists |
| Mortuary Sciences | |

Population Served: The direct services provided to the above professions assure the protection of all Iowans.

Funding Source: General Fund Appropriation and Retained Fees

K19-2051/2054; K79-7901 (FY 04 and FY 05 only)

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|--------------------|--------------------|--------------------|
| State Funds | \$1,123,357 | \$1,157,369 | \$1,208,488 |
| Other Funds | \$72,415 | \$82,485 | \$250,000 |
| Total Funds | \$1,195,772 | \$1,239,854 | \$1,458,488 |
| FTEs | 14.99 | 14.98 | 15.00 |

Public Health Nursing
Division of Health Promotion and Chronic Disease Prevention

Program Objective: To prevent or reduce inappropriate institutionalization of low-income and elderly persons, prevent illness, and promote health and wellness in a community.

Program Services: Personal health care and population-based services.

Personal health care services include:

- Skilled nursing home visits in an effort to prevent, reduce, or delay inappropriate institutionalization of target population.
- Visits by health care professionals to support the health and stability of Iowa families.
- Health promotion and preventive clinics.
- Injury prevention services.

Population-based services target identified health care concerns that impact the entire county’s health status with the goal of promoting and protecting the health of those who live in the county.

Population Served: All Iowans with priority given to low-income, elderly, and disabled persons.

Funding Sources: General Fund Appropriation

K11-1103

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$2,332,820 | \$2,322,564 | \$2,326,981 |
| FTEs | 0.00 | 0.00 | 0.00 |

Public Health System and Workforce Development
Division of Environmental Health

Program Objective: The purpose of this funding is to provide technical assistance and support to two grants received by the University of Iowa, College of Public Health. Specifically, the grants were focused on the needs of Iowa’s public health system, including such things as infrastructure, communication, accountability, workforce, and evidence-based decision-making.

Program Services: Staff from the department will serve on committees; review documents, and provide technical guidance to grant efforts by the University of Iowa, College of Public Health.

Population Served: All Iowans benefit from a strong public health system, including a competent public health workforce.

Funding Sources: University of Iowa Grants

0153-2230

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$0 | \$20,000 | \$0 |
| FTEs | 0.00 | 0.26 | 0.00 |

Radioactive Waste Transport
Division of Environmental Health

Program Objective: The bureau is responsible for the tracking of radioactive waste shipments in or across Iowa as well as planning, developing and maintaining a capability for emergency response during shipment of low and high level radioactive waste across the state.

Program Services: There are an estimated 500-1000 shipments of radioactive waste in or across Iowa each year. This program tracks the movement of this waste entering and leaving the state, and provides radiation hazard training to first responders (firefighters, police, EMS) should an incident or accident occur involving these shipments.

Population Served: Local hazardous material responders. Iowans located along the major interstate and rail thoroughfares.

Funding Sources: Private Grant and Retained Fees

K19-1920; 0153-1926

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$69,918 | \$65,411 | \$407,422 |
| FTEs | 1.21 | 1.00 | 1.45 |

Radiological Health

Division of Environmental Health

Program Objective: To oversee public health issues surrounding radiological health including licensing of radioactive materials, regulation of radiation producing machines, providing permits to radiation operators and providing emergency response to radiation hazards. These functions are necessary to minimize radiation exposure to the citizens of the state.

Program Services:

- Licensing and inspection of facilities using radioactive materials
- Registration and inspection of radiation producing machines
- Certification of radiation operators
- Emergency response to radioactive material accidents or nuclear power accidents

Population Served: All Iowans who receive an X-ray or benefit from the use of radioactive sources in medicine, industry, or research.

Funding Sources: General Fund Appropriation, Intra State Receipts (Department of Public Defense) and Retained Fees

K19-1915

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$676,407 | \$679,235 | \$737,529 |
| Other Funds | \$57,700 | \$47,101 | \$56,000 |
| Total Funds | \$734,107 | \$726,336 | \$793,529 |
| FTEs | 9.75 | 9.03 | 9.30 |

Radon Control
Division of Environmental Health

Program Objective: To increase public awareness about radon, radon testing, and the related health issues in order to reduce the instances of exposure and the associated illnesses. Radon has been deemed by the Environmental Protection Agency (EPA) to be the second leading cause of lung cancer in the United States.

Program Services: Certification and credentialing of persons who test and mitigate buildings for the presence of radon. Mitigation to reduce radon levels in buildings can only occur when testing has been conducted. The funding allows the department to collect data on radon testing and mitigation. Iowa has one of the highest radon level incidence rates nationwide.

Population Served: Nearly all Iowans. Based upon available data, it is estimated that 5 out of 7 Iowa homes contain a radon level that exceeds the EPA action level of 4 Pico curies per liter. Consequently, nearly all Iowans benefit from the detection and mitigation of household and workplace radon.

Funding Source: Federal Grant

0153-1922

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$365,383 | \$309,090 | \$348,345 |
| FTEs | 1.12 | 0.85 | 1.00 |

Rape Prevention and Education
Division of Behavioral Health and Professional Licensure

Program Objective: To reduce the incidence of sexual violence in Iowa communities.

Program Services:

- Collect data on sexual assault and conduct rape prevention and professional education activities.
- Manage contract for community grants for rape prevention and education activities

Population Served: All Iowans and community rape prevention education programs.

Funding Source: Federal Grant

0153-1752

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$410,076 | \$397,689 | \$409,169 |
| FTEs | 0.53 | 0.50 | 0.50 |

Refugee Health

Division of Health Promotion and Chronic Disease Prevention

Program Objective: The Refugee Health Program is responsible for assuring that all newly arriving refugees receive a health assessment.

Program Services: Refugees are screened for potential health risks and those with any identified health or medical problems are referred for medical attention. Assessments are important for the refugees, the sponsoring families, and all Iowans to prevent the spread of communicable or infectious diseases that may have been undetectable prior to the refugee entering the United States.

In addition, the program provides consultation to agencies wishing to provide culturally specific services as well as prevention education programs to refugees and their families.

Population Served: Direct services are provided for refugees entering Iowa, but all Iowans benefit as a result of health assessments.

Funding Source: Federal Grant

0153-0404

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$72,754 | \$70,387 | \$77,592 |
| FTEs | 1.06 | 1.09 | 1.00 |

Regional Genetics Consultation Service

Division of Health Promotion and Chronic Disease Prevention

Program Objective: Provides funding for comprehensive genetic health care services through a statewide outreach clinic system via a contract with the University of Iowa, Department of Pediatrics. This assures every Iowan has accessibility to genetic services, including those with disabilities or of limited means to travel great distances.

Program Services:

- Genetic diagnostic evaluations and testing.
- Medical management and case management.
- Genetic counseling.
- Referrals to local providers for continuing medical care, education, and social services to ensure ongoing support to the individual and family and improve follow-up.
- Educational services to health care professionals, local support groups, educators and others to increase understanding of genetics, genetic disorders, and preventive activities.

Clinic sites are held in Des Moines, Dubuque, Mason City, Sioux City, Waterloo, Cedar Rapids, Davenport, Creston, Carroll, Fort Dodge, Ottumwa, Ames, Burlington and Spencer.

Population Served: Individuals of all ages with, or at risk for, a genetic disorder, chromosome abnormality, metabolic disorder, birth defect, or condition influenced by genetic factors.

Funding Source: General Fund Appropriation and Newborn Screening Fees

See Congenital and Inherited Disorders for complete funding summary.

**Residential Water Treatment
Division of Environmental Health**

Program Objective: To license all residential water treatment devices sold in Iowa that make health claims relative to contaminant reduction, and verify through third party testing that each device can meet any stated health claims.

Program Services: Residential water treatment devices are licensed and recorded. An environmental engineer on staff evaluates third-party testing data. Lists of licensed products are provided to members of the public who wish to purchase a water treatment device for their home or business. The program is regulatory in function.

Population Served: Anyone purchasing a residential water treatment device in Iowa can be assured that the product will meet any stated health related claims.

Funding Source: Retained Fees

The retained fees are used for a one to one match for the radon program’s federal grant.

K19-1903

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$92,225 | \$57,157 | \$55,000 |
| FTEs | 0.59 | 0.66 | 0.50 |

Rural Health
Division of Health Promotion and Chronic Disease Prevention

Program Objective: Improve access to quality health care for rural and underserved populations.

Program Services:

- Collect and disseminate information on rural health issues and coordinate resources.
- Increase access to health services for immigrants, refugees, migrants and minorities and underserved populations by developing resources for cultural competency and networking of bilingual health professionals.
- Provide technical assistance to communities using health care assessments and planning.
- Work collaboratively with other public entities to develop projects which may be applied widely and serve as models for communities throughout the state.
- Work in conjunction with a 20 member advisory committee to monitor and assess rural health issues and support policy development toward improving access to quality health care for rural and underserved populations.

Population Served: Vulnerable populations including rural, underserved, elderly, racial/ethnic minorities, health providers, agencies, and organizations and rural communities.

Funding Sources: General Fund Appropriation and Federal Grant

State funds are used for a 3:1 match for the Office of Rural Health Grant.

K09-0905; 0153-0902

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$348,733 | \$343,053 | \$369,386 |
| Federal Funds | \$73,047 | \$202,757 | \$127,500 |
| Total Funds | \$421,780 | \$545,810 | \$496,886 |
| FTEs | 6.19 | 6.36 | 6.05 |

Ryan White HIV CARE Act (Title II)
Division of Acute Disease Prevention and Emergency Response

Program Objective: State funding was allocated to the AIDS Drug Assistance Program for the first time in FY06 to address a closed program and consequent waiting list. The funds addressed the issue for that year. However, the program continues to project growth at a faster rate than current funding. The Ryan White and ADAP Program addresses the unmet health needs of persons living with human immunodeficiency virus (HIV) disease by funding primary health care and support services that enhance access to and retention in care. Like many health care problems, HIV disproportionately strikes people in poverty, racial/ethnic populations and other individuals who are underserved by health care and prevention systems. This program acts as a “payer of last resort.” It fills gaps in care not covered by other resources and often provides services to people with no source of health care and those with Medicaid or private insurance whose care is not being met.

Program Services: The CARE Act program provides support for essential health and support services to individuals and families with HIV disease. Support includes reimbursement for treatment, medical/dental care, mental health/counseling, case management, and direct support of emergency services. The CARE Act includes funds to support an AIDS Drug Assistance Program that provides life-saving drugs to low-income Iowans with HIV/AIDS.

Population Served: Low-income Iowans living with HIV disease.

Funding Sources: General Fund Appropriation, Tobacco Fund Appropriation and Federal Grant

K07-0761; K86-8602; 0153-0804

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|--------------------|--------------------|--------------------|
| State Funds | \$0 | \$0 | \$100,000 |
| Tobacco Funds | \$0 | \$0 | \$275,000 |
| Federal Funds | \$2,221,290 | \$1,990,553 | \$2,221,702 |
| Total Funds | \$2,221,290 | \$1,990,553 | \$2,596,702 |
| FTEs | 2.13 | 2.02 | 1.85 |

Scope of Practice Review Committee
Division of Behavioral Health and Professional Licensure

Program Objective: Provide an objective method to evaluate proposed changes in the authorization and regulation of health professions.

Program Services: Review committees conduct an impartial, analytical assessment of the proposed scope of practice change using established objective criteria and develop recommendations to ensure and protect the public's health, safety, and welfare.

Population Served: Services are provided for public policymakers, health professional groups or associations, health care practitioners, health profession regulators, and consumers of health services.

Funding Source: Unfunded mandated

Senior Prescription Drug Plan
Division of Health Promotion and Chronic Disease Prevention

Program Objective: IDPH promotes the goal of helping Medicare-eligible Iowans achieve savings in the purchase of prescription drugs by providing contract management and policy advice to the Iowa Priority Prescription Drug Corporation, a non profit entity established by federal law to assist Medicare-eligible Iowans purchase prescription drugs at a discount.

Program Services: The Iowa Priority Prescription Drug Corporation operates a senior drug discount program with funding from the Center for Medicare and Medicaid Services. The department receives the federal funds designated for distribution to Iowa Priority. The Division then distributes the funds to Iowa Priority via contractual agreement, and provides budget oversight and accountability for these federal funds.

Population Served: Eligible Iowa seniors

Funding Source: Federal Grant

0153-1120

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$1,079,318 | \$4,235 | \$0 |
| FTEs | 0.16 | 0.00 | 0.00 |

Sex Offense Prevention

Division of Behavioral Health and Professional Licensure

Program Objective: Reduce and prevent the incidence of sex offenses in Iowa.

Program Services: Through a contract with the Iowa Coalition Against Sexual Assault:

- Conduct training for community professionals assisting victims of sexual offenses
- Establish and maintain a support network and information/referral resource for victims of sex offenses and their families
- Support related administrative expenses

Population Served: This program serves women 12 years and older.

Funding Source: Federal Grant

0153-1758

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$72,322 | \$52,878 | \$68,220 |
| FTEs | 0.00 | 0.00 | 0.00 |

Sexually Transmitted Diseases

Division of Acute Disease Prevention and Emergency Response

Program Objective: Reduce the incidence and spread of syphilis, gonorrhea, chlamydia, and other sexually transmitted diseases through treatment, intervention, and prevention.

Program Services: Field personnel are assigned throughout the state to reduce the incidence and spread of sexually transmitted diseases. Their responsibilities include:

- Clinical and laboratory assistance for detection, diagnosis, and treatment.
- Case management, patient interviews and contact follow-up activities for individuals receiving treatment.
- Providing current medical information to health care practitioners about the testing, diagnosis, and treatment of these diseases. Medications and testing materials are also provided to the clinics throughout the state.

Population Served: Health care providers and Iowans seeking treatment and prevention services for sexually transmitted diseases.

Funding Sources: General Fund Appropriation and Federal Grant

State funds are used for a 75% match for the Title V Block Grant.

K15-1563; 0153-1564

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$68,680 | \$68,000 | \$68,282 |
| Federal Funds | \$794,525 | \$766,550 | \$773,566 |
| Total Funds | \$863,205 | \$834,550 | \$841,848 |
| FTEs | 3.61 | 4.21 | 4.00 |

Small Hospital Improvement Grant Program
Division of Health Promotion and Chronic Disease Prevention

Program Objective: To assist in assuring quality health services by providing additional resources to small rural hospitals to use for the implementation of Prospective Payment Systems (PPS), compliance with the provisions of the Health Insurance Portability and Accountability Act (HIPAA), and to reduce medical errors and support quality improvement (QI) strategies.

Program Services: Contracts are awarded to eligible hospitals to support activities including staffing, education, technology purchases and updates, and renovations identified by the hospitals to meet their needs in complying with PPS, HIPAA, or QI.

IDPH staff provides ongoing technical assistance and consultation in the planning of activities, contracts, and payment processes.

Population Served: All Iowans receiving services from small rural hospitals, rural hospitals and hospital staff.

Funding Source: Federal Grant

0153-0916

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$583,500 | \$583,339 | \$728,520 |
| FTEs | 0.00 | 0.37 | 0.00 |

**State Medical Examiner’s Office
 Department Director’s Office**

Program Objective: Provide autopsy services statewide to determine manner and cause of death in cases outside the scope of a local medical examiner’s ability or training and collect community data to monitor trends requiring public health intervention.

Program Services: The Office of the Iowa State Medical Examiner performs autopsies on deaths that are high profile, extremely difficult, or require the expertise of a trained forensic pathologist, (i.e., homicides, children, and badly decomposed remains). Ongoing consultation, assistance and training by the State Medical Examiner are provided to medical examiners statewide in order to assure consistent review, as well as frequent consultation regarding proper and appropriate procedures.

In addition, the State Medical Examiner works very closely with state and local law enforcement officials on cases requiring investigation.

Population Served: Services are provided statewide.

Funding Sources: General Fund Appropriation and Retained Fees

K19-1951

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|--------------------|--------------------|--------------------|
| State Funds | \$511,211 | \$526,268 | \$865,269 |
| Other Funds | \$649,819 | \$772,954 | \$1,702,736 |
| Total Funds | \$1,161,030 | \$1,299,222 | \$2,568,005 |
| FTEs | 8.28 | 9.51 | 10.90 |

**State Planning Grant
Department Director's Office**

Program Objective:

- Serve as a resource for data on Iowa's uninsured population.
- Design coverage options incorporating newly collected and comprehensive data.
- Develop a strategy to expand access to health insurance coverage.
- Participate in State Planning Grant activities at the national level as required by the Secretary of Health and Human Services.

Program Services: Iowans who lack health insurance coverage suffer from a number of difficulties related to access to health care. These include difficulties in obtaining treatment for existing medical conditions, and access to diagnostic and preventive medical treatment as well as other economic and social concerns. Issues such as health disparities relating to race, income and geographic region; economic inefficiency and rising health care costs; and quality of life concerns all relate to access to affordable health insurance.

Population Served: Information is obtained on all Iowans who lack insurance coverage with the intention of improving access to health care for all Iowans.

Funding Sources: Federal Grant and Intra State Transfer (Iowa Workforce Development Grant)

0153-0460

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$38,627 | \$105 | \$65,675 |
| Other Funds | \$23,005 | \$542 | \$0 |
| Total Funds | \$61,632 | \$647 | \$65,675 |
| FTEs | 0.00 | 0.00 | 0.00 |

State Systems Development Initiative (Title V)
Division of Health Promotion and Chronic Disease Prevention

Program Objective: To improve the state’s maternal and child health program’s capacity for assessing and assuring the well-being of pregnant women, infants, children and youth, including children with special health care needs. The project is designed to develop the infrastructure needed to build system capacity and the technical expertise needed to improve the state’s ability to assure comprehensive public health population based strategies.

Program Services: Projects are determined by identified needs in each state. Iowa projects include:

- Data Capacity – Advance integration and linkage of data sets to improve public health information regarding the health and well-being of pregnant women, infants and children. It also assists in developing data use skills among public health professionals and their partners.
- Household Survey - Identify the health status and health care needs of children and families in Iowa. This population-based survey provides needed data to help state and local maternal and child health programs plan. It also provides baseline data to assess future program performance.

Population Served: Children and families of Iowa

Funding Source: Federal Grant

0153-0684

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$81,718 | \$83,261 | \$87,955 |
| FTEs | 0.56 | 0.50 | 0.50 |

Stillbirth Workgroup
Division of Health Promotion and Chronic Disease Prevention

Program Objective: House File 2362, passed during the 2004 session, requires the department to study and develop prevention strategies to reduce stillbirths and other congenital or inherited disorders, which cause the death and disability of newborns in this state. A stillbirth workgroup has been established to develop guidelines for the evaluation of stillbirths.

Program Services: Development of stillbirth evaluation guidelines to be used by providers of maternity care services. Information collected will be entered into the Registry for Congenital and Inherited Disorders to allow for surveillance of the causes and trends of stillbirths in Iowa.

Population Served: Providers of maternity and family planning services, and families of Iowa.

Funding Source: Tobacco Fund Appropriation

K84-8402

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Tobacco Funds | \$0 | \$14,633 | \$26,000 |
| FTEs | 0.00 | 0.00 | 0.00 |

See also – Congenital and Inherited Disorders: Iowa Stillborn Surveillance Project

Substance Abuse Commission
Division of Behavioral Health and Professional Licensure

Program Objective: As outlined in the code of Iowa, to establish policies governing the performance of substance abuse prevention and treatment and advise the department on other policies.

Program Services:

- Approving the comprehensive substance abuse program.
- Advising the department on policies governing the performance of the department.
- Considering and approving or disapproving all applications for substance abuse treatment license.
- Advising or making recommendations to the Governor and general assembly relative to substance abuse treatment, intervention and education, and prevention programs.
- Promulgating rules for substance abuse prevention and treatment.
- Investigating the work of the department relating to substance abuse.
- Acting as the appeal board regarding funding decisions made by the department.

Population Served: All Iowans benefit from the development of substance abuse policies and regulatory authority over substance abuse treatment programs.

Funding Source: General Fund Appropriation

K01-0207

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$4,834 | \$6,611 | \$0 |
| FTEs | 0.00 | 0.00 | 0.00 |

Substance Abuse Comprehensive Prevention
Division of Behavioral Health and Professional Licensure

Program Objective: Prevention of community problems and individual drug addiction associated with the use of alcohol, tobacco, and illicit drugs.

Program Services: Use of multiple substance abuse evidence-based prevention strategies:

- Information dissemination
- Education programs designed to prevent substance abuse
- Alternative activities
- Environmental and social policy change
- Problem identification and referral
- Community-based process

Population Served:

- Youth (both in and out of school)
- Adults
- Individuals with a higher risk of addictions
- Community coalitions
- Workplaces

Funding Sources: General Fund Appropriation, Federal Grant and Intra State Receipt (Department of Commerce - Sunday Liquor Sales) (FY 04 and 05 only) (Departments of Education, Human Rights, Human Services and Office of Drug Control Policy) (FY 06 only)

K01-0151/0154 (Partial) (FY 04 and 05 only); 0153-0152/0214 (50%)

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|--------------------|--------------------|--------------------|
| State Funds | \$443,655 | \$418,015 | \$413,979 |
| Federal Funds | \$2,713,633 | \$3,141,468 | \$3,012,809 |
| Other Funds | \$116,396 | \$5,206 | \$40,000 |
| Total Funds | \$3,273,684 | \$3,564,689 | \$3,466,788 |
| FTEs | 5.76 | 5.41 | 5.77 |

Substance Abuse Disaster Capacity Expansion
Division of Behavioral Health and Professional Licensure

Program Objective: To expand Iowa’s capacity to respond to the mental health and substance abuse needs that follow an emergency/disaster/crisis incident. Develop and implement a state plan for accomplishing Iowa’s statewide response effort.

Program Services: Provide training to disaster responders. Training set up by Department of Human Services (DHS) contractor with staff from DHS and IDPH presenting the response plans and resources each department has available.

Population Served: Training is open to all medical professionals, substance abuse and mental health professionals, Iowa Disaster Human Resource Council and affiliates, and the faith-based community in Iowa.

Funding Source: Intra State Receipt (Department of Human Services)

0153-0122

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$0 | \$5,214 | \$6,000 |
| FTEs | 0.00 | 0.00 | 0.00 |

Substance Abuse Mentoring
Division of Behavioral Health and Professional Licensure

Program Objective: To promote the creation of youth mentoring programs on a statewide basis.

Program Services:

- Mentoring youth
- Establishing formal mentoring programs in communities that promote relationship-building, social skill development, and the reduction of substance abuse through the use of high school mentors

Population Served: Youth less than 18 who reside in specific counties or school districts.

Funding Source: Tobacco Fund Appropriation

K01-0168 (FY 05 only); K90-9002 (FY 06)

| Fiscal Year | 04 Actual | 05 Actual | 05 Estimate |
|--------------------|------------------|------------------|--------------------|
| Tobacco Funds | \$0 | \$329,162 | \$200,000 |
| Other Funds | \$0 | \$0 | \$32,000 |
| Total Funds | \$0 | \$329,162 | \$232,000 |
| FTEs | 0.00 | 0.25 | 0.30 |

Substance Abuse Prevention County Funding
Division of Behavioral Health and Professional Licensure

Program Objective: To provide funds for 99 counties in Iowa as a resource for the program services provided.

Program Services:

- Education
- Prevention
- Referral
- Post treatment

Population Served: County residents in need of substance abuse services other than treatment services.

Funding Source: Intra State Receipt (Department of Commerce - Sunday Liquor Sales)

K01-0154 (Partial)

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$301,423 | \$280,448 | \$339,580 |
| FTEs | 0.00 | 0.00 | 0.00 |

Substance Abuse Prevention for Kids
Division of Behavioral Health and Professional Licensure

Program Objective: To provide substance abuse prevention programming for children that encompasses instruction and skill building activities, parent involvement, and community support through Boys and Girls clubs using the SMART Moves model program.

Program Services:

- Provide training in the SMART Moves program to nine Boys and Girls Club staff.
- Implement the SMART Moves program for a minimum of 1000 children/adolescents.
- Evaluate the program implementation using a pre-post test developed by the Iowa Consortium for Substance Abuse Research and Evaluation.

Population Served: 1000 high-risk children/adolescents in nine Boys and Girls clubs in Iowa.

Funding Source: Tobacco Fund Appropriation

K75-7502

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Tobacco Funds | \$0 | \$0 | \$200,000 |
| FTEs | 0.00 | 0.00 | 0.00 |

Substance Abuse Prevention State Incentive Grant
Division of Behavioral Health and Professional Licensure

Program Objective: Reduction of alcohol, tobacco, and marijuana in adolescents, age 12 to 17 years, by building upon statewide collaboration of public and private organizations.

Program Services:

- Development of an updated state plan for substance abuse prevention
- Implementation of model and evidence-based programs
- Development of substance abuse coalitions
- Development of community wide environmental strategies

Population Served: Youth aged 12 to 17 and community coalitions

Funding Sources: Federal Grant and Intra State Receipts (Office of Drug Control Policy)

0153-0166

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|--------------------|--------------------|--------------------|
| Federal Funds | \$2,798,953 | \$2,630,224 | \$844,911 |
| Other Funds | \$223 | \$0 | \$0 |
| Total Funds | \$2,799,176 | \$2,630,224 | \$844,911 |
| FTEs | 2.07 | 1.40 | 0.95 |

Substance Abuse Reporting System (SARS)
Division of Behavioral Health and Professional Licensure

Program Objective: Provides a substance abuse management information system in order to track relevant data on substance abuse clients.

Program Services:

- Gathers prevalence, demographic and service data on substance abuse clients who are in the treatment system.
- Monitors substance abuse treatment clients in the managed care system.
- Gathers data for performance measures.

Population Served:

- 110 substance abuse assessment or treatment programs.
- Other state agencies
- Federal government
- Media

Funding Source: Federal Grant

0153-0104

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$53,134 | \$46,371 | \$52,454 |
| FTEs | 0.60 | 0.54 | 0.60 |

Substance Abuse Safe/Drug Free Data
Division of Behavioral Health and Professional Licensure

Program Objective: To support a comprehensive data system that addresses both data collection/reporting and the effective use of student drug and violence data. Build the capacity of regional staff to support local agencies with training and technical assistance to local education areas (LEAs) and local agencies on how to apply the Principles of Effectiveness.

Program Services: Increase the capacity of state and regional agencies to implement and support the collection and use of student drug and violence data in ways that complement multiple existing state initiatives.

At a minimum, increase the number of LEAs

- That effectively incorporate student drug and violence data in needs assessments
- Using these data to develop quality performance measures
- Considering these data in selecting school- and community-based interventions for implementation.
- Monitoring the success of interventions in reducing drug and alcohol use and violence
- Sharing data with the public
- That have received training in collecting, analyzing, and using data to manage and improve drug and violence prevention programs.

Population Served: Primarily school age youth.

Funding Source: Intra State Receipt (Department of Education)

0153-0120

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$0 | \$8,747 | \$33,575 |
| FTEs | 0.00 | 0.13 | 0.50 |

Substance Abuse Tobacco Prevention for Kids (Gateway Addiction Prevention Project)

Division of Behavioral Health and Professional Licensure

Program Objective: To provide evidence-based prevention programming for middle school aged youth (grades 6-9), including implementing at least one evidence-based program or implementing effective mentoring practices to reduce alcohol, tobacco, and marijuana use by youth. In addition, develop or expand community collaboration with substance abuse, tobacco, or mentoring initiatives.

Program Services: The project must provide education on the harmful effects of alcohol, tobacco, and marijuana. Evidence-based prevention program options:

- Project Northland
- Life Skills Training
- Project Alert
- Across Ages

Mentoring programs not implementing one of the program options must submit a plan addressing how alcohol, tobacco, and marijuana prevention would be implemented.

Population Served: Middle school aged youth, grades 6-9.

Funding Source: Tobacco Fund Appropriation

K74-7402

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Tobacco Funds | \$0 | \$0 | \$400,000 |
| FTEs | 0.00 | 0.00 | 0.00 |

**Substance Abuse Treatment
Division of Behavioral Health and Professional Licensure**

Program Objective: To provide substance abuse treatment to Iowans who are abusing or addicted to alcohol, prescription drugs, or other illegal drugs.

Program Services:

- Assessment
- Residential
- Day treatment
- Halfway house
- Intensive outpatient
- Extended Outpatient
- Continuing care and after care
- Medication-assisted treatment for drug abuse

Population Served: Iowans who are abusing or addicted to alcohol, prescription drugs or other illegal drugs. Families or significant others may also receive crisis intervention or treatment services in order to better understand how substance abuse affects the entire family. Services are available on a sliding fee.

Funding Sources: General Fund Appropriation, Federal Grant, Gambling Treatment Appropriation, Tobacco Treatment Appropriation and Intra State Receipts (Departments of Education, Human Rights, Human Services and Office of Drug Control Policy) (FY 06 only)

State funds are used for a required maintenance of effort for the Substance Abuse Prevention and Treatment Block Grant.

K01-0101/0110/0112; K91-9102; K97-9702; 0153-0102/0214 (50%)

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|---------------------|---------------------|---------------------|
| State Funds | \$92,363 | \$107,311 | \$100,341 |
| Federal Funds | \$8,494,219 | \$8,882,934 | \$10,314,481 |
| Gambling Funds | \$1,690,000 | \$1,690,000 | \$1,690,000 |
| Tobacco Funds | \$11,800,000 | \$11,800,000 | \$11,800,000 |
| Other Funds | \$0 | \$0 | \$40,000 |
| Total Funds | \$22,076,582 | \$22,480,245 | \$23,944,822 |
| FTEs | 1.38 | 2.33 | 2.68 |

Substance Abuse Treatment Licensure
Division of Behavioral Health and Professional Licensure

Program Objective: License all substance abuse treatment programs and investigate complaints in accordance with Iowa Code, Chapter 125.13 and 641 IAC, Chapter 3.

Program Services:

- Licensure of substance abuse treatment programs
- Complaint investigations
- Technical assistance
- Evaluation and treatment referral and coordination

Population Served:

- Substance abuse treatment, assessment, and evaluation programs in the state
- Clients who receive substance abuse or addiction treatment services
- Family members of individuals receiving substance abuse treatment services
- General population

Funding Source: Federal Grant

0153-1968

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$297,577 | \$306,960 | \$340,721 |
| FTEs | 3.82 | 3.87 | 4.00 |

Substance Abuse Treatment Needs Assessment
Division of Behavioral Health and Professional Licensure

Program Objectives:

- Track substance abuse prevalence and trend data.
- Develop a Web-based management information system and a system to store applicable data in Iowa’s data warehouse.

Program Services:

- Telephone interviews conducted on a statewide basis
- Assessment and urine analysis of Woodbury County arrestees
- Data analysis
- Reports
- Development of a Web-based treatment reporting system

Population Served: The public, Woodbury County jail population, and 110 assessment and treatment programs.

Funding Source: Federal Grant

0153-0114

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$211,682 | \$165,879 | \$0 |
| FTEs | 0.86 | 0.30 | 0.00 |

Substance Abuse Youth Mentoring
Division of Behavioral Health and Professional Licensure

Program Objective: To promote the creation of formal youth mentoring programs in community-based settings.

Program Services:

- One-on-one mentoring for at-risk youth
- Promotion of the use of elements for effective mentoring practice
- Establishment of formal mentoring programs in communities that promote relationship-building, social skill development, and the reduction of substance abuse

Population served: Youth who reside in specific counties or school districts.

Funding source: Intra State Receipt (Department of Commerce - Sunday Liquor Sales)

K01-0154 (Partial)

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Other Funds | \$373,802 | \$445,219 | \$460,100 |
| FTEs | 0.00 | 0.00 | 0.00 |

Sudden Infant Death Syndrome (SIDS) Autopsies
Division of Health Promotion and Chronic Disease Prevention

Program Objective: The Code of Iowa, Chapter 331.802, requires the department to reimburse autopsies on infants who are suspected victims of sudden infant death syndrome.

Program Services: Establishes a firm diagnosis for infants who are suspected victims of Sudden Infant Death Syndrome (SIDS) by reimbursing for autopsies when no other funding source is available. This often alleviates many of the intense psychological problems experienced by families whose infant is not autopsied.

Population Served: Any family experiencing the death of a child under suspicion of SIDS.

Funding Source: General Fund Appropriation

K05-0665

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$2,000 | \$0 | \$3,600 |
| FTEs | 0.00 | 0.00 | 0.00 |

Tobacco Administration
Division of Tobacco Use Prevention and Control

Program Objectives: Implement a sustainable comprehensive tobacco control program in the state that works to improve the health of all Iowans by eliminating tobacco use in all its forms.

Program Services:

- Provide technical assistance and guidance to all counties and community partnerships on school policies, prevention, cessation, media, youth involvement, secondhand smoke, outreach to disparate populations, enforcement, and evaluation methods
- Determine the goals and objectives of the work of the division in collaboration with the State Commission on Tobacco Use Prevention and Control.
- Help build sustainable coalitions to support tobacco control activities in local communities
- Partner with internal and external departments and organizations to maximize the tobacco efforts in the state and reduce duplicate services
- Support the work of the commission and the Just Eliminate Lies (JEL) Executive Council

Population Served: The program strives to prevent and reduce tobacco use among youth and adults statewide.

Funding Source: Tobacco Fund Appropriation and Federal Grant

K93-9356; 0153-9342 (Partial)

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Tobacco Funds | \$355,116 | \$320,900 | \$388,565 |
| Federal Funds | \$0 | \$376,919 | \$523,251 |
| Total Funds | \$355,116 | \$697,819 | \$911,816 |
| FTEs | 4.75 | 8.97 | 10.30 |

Tobacco Cessation Services
Division of Tobacco Use Prevention and Control

Program Objective: Provide tobacco cessation counseling and services to youth and adults throughout the state.

Program Services:

- Maintain *Quitline Iowa*, administered by the University of Iowa’s College of Public Health, to provide free cessation counseling to all Iowans through phone counseling, Web site, educational materials, language counseling interpretive services, and a TDD line.
- Support free medical clinics across the state to eliminate the cost barriers to smoking cessation treatment for low-income and uninsured individuals by providing counseling and pharmaceuticals.
- Maintain community partnerships to provide cessation training and services at the local level.
- Provide education to health-care providers on guidelines for provision of cessation services to patients.
- Promote *Quitline Iowa* services via a statewide, paid media campaign.
- Collaborate with DHS to develop a mechanism to provide free referral and cessation counseling services for Medicaid clients who are eligible for coverage of nicotine replacement therapy.

Populations Served: All Iowans who want to quit using tobacco.

Funding Source: Tobacco Fund Appropriation and Federal Grant

K82-8202; K93-9310; 0153-9342 (Partial)

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Tobacco Funds | \$327,967 | \$335,824 | \$328,000 |
| Federal Funds | \$47,000 | \$171,997 | \$305,001 |
| Total Funds | \$374,967 | \$507,821 | \$633,001 |
| FTEs | 0.00 | 0.00 | 0.00 |

Tobacco Community Partnerships
Division of Tobacco Use Prevention and Control

Program Objectives: Maintain community partnerships to reduce tobacco use among Iowans; foster a climate in which tobacco use is no longer the social norm; promote compliance by minors and retailers with tobacco sales laws; enhance the capacity of youth to make healthy choices.

Program Services:

- Work with a coalition of community leaders and tobacco control advocates to change behaviors and attitudes toward tobacco use.
- Collaborate with the Just Eliminate Lies program to encourage youth to become tobacco control advocates in their communities.
- Promote and support voluntary policies to reduce exposure to environmental tobacco smoke in workplaces and public places.
- Promote the availability of appropriate cessation services for all Iowans through systems level change and through promotion of Quitline Iowa.
- Promote and support implementation of tobacco-free school campus policies.

Populations Served: Services are available to all Iowans.

Funding Source: General Fund Appropriation and Tobacco Fund Appropriation

K01-0209; K93-9302

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|--------------------|--------------------|--------------------|
| General Funds | \$0 | \$0 | \$470,000 |
| Tobacco Funds | \$1,926,091 | \$1,947,684 | \$2,033,775 |
| Total Funds | \$1,926,091 | \$1,947,684 | \$2,503,775 |
| FTEs | 0.00 | 0.00 | 0.00 |

Tobacco Enforcement
Division of Tobacco Use Prevention and Control

Program Objectives: Support enforcement of state and federal law prohibiting sales of tobacco products to minors.

Program Services:

- Collaborate with the Alcoholic Beverages Division (ABD) of the Department of Commerce to offer the Iowa Pledge program. This program exists to reduce youth access to tobacco products through education of tobacco retailers and enforcement of tobacco retail sales law.
- Through interagency agreement with ABD, contract with local law enforcement agencies and the Department of Public Safety to conduct ABD tobacco compliance checks at Iowa’s retail establishments.
- Through interagency agreement with ABD, administer a program to educate and certify tobacco retail sales clerks, including subcontracts with local law enforcement agencies to provide access to monthly classes in each county.

Population Served: Iowa youth and tobacco retailers in all 99 counties.

Funding Source: Tobacco Fund Appropriation

K93-9308

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Tobacco Funds | \$1,040,706 | \$1,050,000 | \$1,050,000 |
| FTEs | 0.00 | 0.00 | 0.00 |

**Tobacco Evaluation and Research
Division of Tobacco Use Prevention and Control**

Program Objectives: Foster evaluation and research expertise in tobacco control in Iowa to help ensure the long-term operation of the program by enabling in-state researchers, public health professionals, and the Tobacco Use Prevention and Control Commission to guide and direct program initiatives where they are most needed.

Program Services:

- Contract with research professionals to produce an annual progress report to track and verify changes in key indicators toward program goals and objectives.
- Conduct the Iowa Youth Tobacco Survey to measure changes in youth tobacco use prevalence and related behaviors and attitudes in the state.
- Conduct the Adult Tobacco Survey to measure changes in adult tobacco use prevalence and related behaviors and attitudes in the state
- Provide training and technical assistance to local partners on effective program evaluation
- Provide support to and collaborate with the TUPC Commission to produce an annual program evaluation to document the efficacy of program activities and strategies toward reaching program goals and objectives.

Populations Served: The targeted population includes all Iowans.

Funding Source: Tobacco Fund Appropriation

K93-9354

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Tobacco Funds | \$70,000 | \$70,500 | \$70,000 |
| FTEs | 0.00 | 0.00 | 0.00 |

Tobacco Just Eliminate Lies (JEL) Program
Division of Tobacco Use Prevention and Control

Program Objectives: Support a statewide, youth-led tobacco use prevention education and advocacy program to prevent the initiation of tobacco use by youth.

Program Services:

- Support JEL recruitment, training, and advocacy activities.
- Provide administrative and technical support to the JEL Executive Council in planning JEL activities, meetings, “street marketing” events, and development of media campaign messages.
- Promote collaborations between JEL and the Community Partnerships to ensure the support of youth tobacco prevention education and advocacy activities at the community level.
- Collaborate with the JEL Executive Council to plan and implement the annual JEL Youth Summit.
- Continue to develop and support an effective JEL counter advertising campaign that reaches every media market in the state, including support for the JEL Web site at www.jeliowa.com,

Population Served: JEL serves all Iowa youth.

Funding Sources: Tobacco Fund Appropriation, Federal Grant, and Other Funds (American Legacy Foundation) (FY 04 only)

K93-9312/9352; 0153-9342 (Partial)

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|--------------------|--------------------|--------------------|
| Tobacco Funds | \$1,321,645 | \$1,285,130 | \$1,216,225 |
| Federal Funds | \$333,269 | \$118,200 | \$110,000 |
| Other Funds | \$94,995 | \$425 | \$0 |
| Total Funds | \$1,749,909 | \$1,403,755 | \$1,326,225 |
| FTEs | 0.00 | 0.00 | 0.00 |

Tobacco Priority Populations
Division of Tobacco Use Prevention and Control

Program Objective: Reduce the disproportionate health and economic impact of tobacco use on priority and higher-risk populations across the state.

Program Services:

- In collaboration with community leaders and community-based organizations, identify and assess priority and higher-risk populations.
- Collaborate with other organizations and coalitions, locally and statewide to build the capacity to support tobacco prevention and cessation programs within the identified populations.
- Support activities that address policy and systems change to reduce tobacco use and exposure to secondhand smoke within identified priority populations.
- Recruit minority youth for the Just Eliminate Lies (JEL) program and summit.
- Provide education for community partnerships and division staff in strategies for outreach to diverse communities.

Populations Served:

- Hispanic
- Southeast Asian
- Homeless populations

Funding Source: General Fund Appropriation and Federal Grant

K01-0211; K93-9342 (Partial)

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$0 | \$0 | \$30,310 |
| Federal Funds | \$551,376 | \$160,786 | \$200,000 |
| Total Funds | \$551,376 | \$160,786 | \$230,310 |
| FTEs | 5.57 | 0.00 | 0.00 |

Traumatic Brain Injury

Division of Behavioral Health and Professional Licensure

Program Objective: To increase access to brain injury information, training, services, and support to individuals and families experiencing brain injury, as well as the professionals who provide these services.

Program Services:

- Managing the Iowa Brain Injury Resource Network (IBIRN) system of service/support providers who assist families with linking to necessary informational resources, services, and support.
- Expanding the IBIRN as necessary to meet the needs of families experiencing brain injury.
- Developing and updating informational resources for families and providers, working to ensure that they receive up-to-date information on brain injury services and support.
- Creating awareness and training forums for families experiencing brain injury and the professionals and providers who serve and support them.
- Conducting outcome data collection to identify the impact on populations served.

Population Served:

- More than 50,000 Iowans living with a long-term disability from brain injury
- Family members
- Service providers

Funding Source: Federal Grant

0153-1802

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$23,099 | \$47,129 | \$58,403 |
| FTEs | 0.00 | 0.15 | 0.05 |

Tuberculosis

Division of Acute Disease Prevention and Emergency Response

Program Objective: Provide appropriate evaluation and treatment to those with tuberculosis infection or disease, and provide consultative services to the public and medical professionals regarding case management.

Program Services:

- Education, case management, and consultation services to physicians and other health care professionals.
- Medication distribution to treat or prevent tuberculosis.
- Implementation of control measures designed to break the chain of disease transmission.
- Surveillance activities to determine the focus for future program activities and affected populations.

Population Served: Health care professionals and Iowans living with, or exposed to tuberculosis infection or disease.

Funding Sources: General Fund Appropriation and Federal Grant

K15-1601; 0153-1602

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$54,023 | \$59,957 | \$62,949 |
| Federal Funds | \$844,031 | \$448,430 | \$416,389 |
| Total Funds | \$898,054 | \$508,387 | \$479,338 |
| FTEs | 4.80 | 3.41 | 3.40 |

Uninsured Prescription Drug Access
Division of Health Promotion and Chronic Disease Prevention

Program Objective: Provide support to increase access to prescription drugs for clients of free health care clinics.

Program Services: The free clinic will establish a partnership and test program, for a cooperative approach for purchasing prescription drugs at a price less than retail.

Population Served: The prescription drugs purchased through the approach shall be provided to patients of the free clinic who are uninsured or underinsured.

Funding Source: General Fund Appropriation

K77-7701

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$0 | \$10,000 | \$0 |
| FTEs | 0.00 | 0.00 | 0.00 |

Vaccine Preventable Diseases

Division of Acute Disease Prevention and Emergency Response

Program Objective: To prevent and control the incidence of childhood preventable diseases.

Program Services: Childhood vaccines are provided to local and county health departments to ensure that children receive measles, mumps, rubella, haemophilus b, polio, diphtheria, pertussis, hepatitis, tetanus, and varicella immunizations. Immunizations are administered at 2, 4, 6, 12, 15 and 18 months old with a booster given between 4 to 6 years of age. Field personnel are assigned throughout the state to assist local public health clinics providing immunization services. Assistance is also provided to school and local public health nurses to encourage disease reporting and to ensure proper vaccine handling and storage.

Immunization Registry Information System (IRIS) is a computerized registry that permanently stores a record of immunizations and can be used to remind patients when vaccines are due. The Vaccine for Children program is a federally mandated entitlement program that provides vaccines free of charge to eligible children.

An additional component of this program is the Iowa Infant Immunization Initiative, which focuses on children up to 2 years old. This initiative provides infrastructure support to state and local health departments to ensure that infants and preschool children are appropriately immunized.

Population Served: Main emphasis on children from birth to 18 years old who meet the following criteria: no health insurance, underinsured, American Indian or Alaskan Native or a child enrolled in Medicaid. Also serves high-risk adolescents and adults.

Funding Sources: General Fund Appropriation and Federal Grant

K15-1521; 0153-1522

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|--------------------|--------------------|--------------------|
| State Funds | \$399,439 | \$367,472 | \$397,803 |
| Federal Funds | \$2,334,383 | \$1,956,702 | \$2,319,074 |
| Total Funds | \$2,733,822 | \$2,324,174 | \$2,716,877 |
| FTEs | 13.21 | 13.93 | 14.55 |

Vital Records
Division of Environmental Health

Program Objective: The bureau records all vital events occurring in the state, such as births, deaths and marriages. The bureau provides the population set of data critical to the assessment of the health of Iowans.

Program Services:

- Receives and records birth information from Iowa hospitals
- Receives and records death information from physicians, hospitals and funeral directors
- Receives and records marriage information from officiates
- Provides certified copies of birth, death and marriage records
- Partners with county recorders throughout Iowa to ensure integrity of state vital records system
- Provides vital information for the annual publication of the *Vital Statistics of Iowa*
- Provides population data to health researchers and state health registries

Population Served: Anyone who was born or married in Iowa, or has a relationship to someone who has died in Iowa, has received services from the Bureau of Vital Records, as well as many health researchers nationwide and department programs to assess program performance.

Funding Sources: Federal Grant and Retained Fees

0024-0024/1024 (FY 04 only)

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|--------------------|--------------------|--------------------|
| Federal Funds | \$386,653 | \$466,410 | \$300,000 |
| Other Funds | \$1,354,658 | \$1,460,434 | \$2,246,718 |
| Total Funds | \$1,741,311 | \$1,926,844 | \$2,546,718 |
| FTEs | 26.64 | 27.12 | 29.85 |

Volunteer Health Care Provider Program

Division of Health Promotion and Chronic Disease Prevention

Program Objective: Iowa's free clinics must recruit and retain volunteer health care providers. This program assists by reducing the barrier to volunteerism through legal defense and indemnification of eligible health care providers and clinics providing free health care services through qualified programs and eligible free clinics. Iowa Code section 135.24 and 641 Iowa Administrative Code Chapter 88.

Program Services:

- Enrolls a health care provider or free clinic into the program through a thorough review of an application provided by Iowa Department of Public Health.
- Once approved, volunteer health care providers are identified as state employees for professional liability purposes.
- Once approved, eligible free clinics are considered a state agency for professional liability purposes.
- In the event of a claim seeking damages, the health care provider or free clinic is provided defense by the Iowa Department of Justice at no cost and the health care provider or free clinic is indemnified to the full extent of any judgment brought against that individual or free clinic if all conditions of the agreement between the state and the individual or free clinic are satisfied.

Population Served: Free clinics and their patients throughout Iowa.

Funding Sources: Unfunded mandate.

Water Programs
Division of Environmental Health

Program Objectives: Monitoring and surveillance of fluoride operations at public water systems in Iowa and the granting of funds to public water systems for starting fluoridation.

Program Services: Supports an environmental engineer to provide technical assistance to, conduct surveillance of, and to oversee monitoring of fluoridation in public water systems. This engineer recommends modifications when necessary in order to deliver fluoride at the optimal dental public health range.

Population Served: Residents of communities using fluoride in their drinking water. All local public health agencies benefit from the consultative services provided.

Funding Sources: Federal Grant and Retained Fees (FY 04 only)

0153-1904

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$25,471 | \$114,671 | \$120,526 |
| Other Funds | \$14,630 | \$0 | \$0 |
| Total Funds | \$40,101 | \$114,671 | \$120,526 |
| FTEs | 0.63 | 1.00 | 1.00 |

Water Programs – Pools and Spas
Division of Environmental Health

Program Objective: Inspection and regulation of public swimming pools and spas to ensure the safety of those utilizing these facilities.

Program Services:

- Regulation of swimming pool and spa operations through the development of administrative rules.
- Review of pool and spa design and construction through plan review, issuance of construction permits and on-site inspections.
- Annual facility inspection by a qualified inspector and training of county and city environmental health workers.
- Information and rules interpretation to operators and inspectors directly and through a newsletter.
- Maintenance of pool and spa registration records and certified pool operator certification and continuing education records.
- Provision of information on aquatic health and safety to the general public.

Population Served: Anyone wishing to operate a public pool or spa as well as training to local public health officials who inspect these facilities. Iowans who swim in public facilities or use public spas such as those located in hotels and health clubs.

Funding Source: General Fund Appropriation

K19-1905

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| State Funds | \$103,065 | \$51,507 | \$61,749 |
| FTEs | 1.46 | 1.00 | 1.00 |

Well-Integrated Screening and Evaluation for Women Across the Nation (WISEWOMAN)

Division of Health Promotion and Chronic Disease Prevention

Program Objective: To test the effectiveness of a nutrition and physical activity intervention developed especially for women receiving cancer-screening services through the Breast and Cervical Cancer Early Detection Program.

Program Services:

- Blood pressure, cholesterol, height, and weight measurements.
- Participation in the specially designed 12-session nutrition and physical activity intervention.

Population Served: Under-insured and un-insured women with household income of no more than 250% of the federal poverty guideline who participate in the Breast and Cervical Cancer Early Detection Program. Women age 40-64 are eligible for the enrollment in the research study.

Funding Source: Federal Grant

0153-0420

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$752,704 | \$923,236 | \$1,289,265 |
| FTEs | 3.80 | 3.68 | 3.68 |

Women, Infants and Children (WIC)
Division of Health Promotion and Chronic Disease Prevention

Program Objective: The federal United States Department of Agriculture (USDA) Supplemental Nutrition Program for Women, Infants, and Children (WIC) pays for food prescriptions purchased by program participants at local vendors throughout the state. This program provides funding for the 20 local community-based agencies that provide onsite services to women, infants, and children.

Program Services:

- Certification of the applicant to receive program benefits.
- Nutrition assessment and education through social marketing strategies.
- Health assessment.
- Breastfeeding promotion and support.
- Referral to health care providers.

Population Served: Pregnant and postpartum women, infants, and children up to 5 years old at or below 185% of the federal poverty guideline. Approximately 68,000 recipients receive assistance to help purchase approved food products at local grocery stores each month.

Funding Sources: Federal Funds

0153-0508/0512/0514/0516/0652/0680

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$33,755,170 | \$36,852,016 | \$38,194,683 |
| FTEs | 14.07 | 14.13 | 12.65 |

Women, Infants and Children (WIC) Breastfeeding
Division of Health Promotion and Chronic Disease Prevention

Program Objective: Fulfills federal law P.L. 101-147, which mandates that 3% of WIC administrative funds must be designated for breastfeeding promotion.

Program Services:

- Increase the quantity and quality of breastfeeding education, teaching materials for staff use with clients.
- Provide ongoing orientation and training on breastfeeding promotion and support.
- Coordinate with private and public health care systems, educational systems, and community organizations to create a supportive climate and ensure effective use of available resources.
- Collect data to measure incidence and duration of breastfeeding.
- Establish peer support systems and professional support programs to help mothers in the early weeks of breastfeeding.
- Establish a WIC peer-counseling program with designated federal peer counseling funding.

Population Served: Iowa counties that have breastfeeding/nutrition coalitions.

Funding Sources: Federal Grant

K05-0608

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$139,502 | \$186,157 | \$214,541 |
| FTEs | 1.01 | 1.44 | 0.85 |

Women, Infants and Children (WIC) Computer Systems
Division of Health Promotion and Chronic Disease Prevention

Program Objective: Development of a new data system for the federally funded Supplemental Nutrition Program for Women, Infants and Children (WIC).

Program Services: The data collected on the system will be used to monitor program operation at the local and state levels and to fulfill reporting requirements of USDA, CDC and GAO regarding health characteristics. This system will allow a move to multi-month distribution of food instruments and interface with the banking system to assure efficient reconciliation. This system will enable the WIC program to detect vendor fraud.

Population Served: Agencies and institutions such as banks that are involved in delivery of the WIC program.

Funding Source: Federal Grant

0153-0678

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$1,423,686 | \$1,536,434 | \$1,139,057 |
| FTEs | 0.00 | 0.00 | 0.00 |

Women’s Health (AWARe)
Division of Health Promotion and Chronic Disease Prevention

Program Objective: To raise awareness of women’s health issues throughout life.

Program Services:

- Assure coordination of primary care, preventive services and mental health services for women in Iowa by strengthening state-level infrastructure for women’s health.
- Maintain an Office of Women’s Health within IDPH.
- Maintain the Women’s Health Committee, an external advisory committee to IDPH on women’s health issues and the grant.
- Improve access to women’s health information by enhancing existing resources.
- Develop best practices for influencing women’s health behaviors through improving women’s health literacy.

Population Served: Women of Iowa

Funding Source: Federal Grant

0153-0306

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$74,103 | \$88,668 | \$30,000 |
| FTEs | 0.85 | 0.64 | 0.15 |

Youth Violence Prevention
Division of Behavioral Health and Professional Licensure

Program Objective: To reduce youth violence by using public health strategies to address risk and protective factors.

Program Services:

- Assess state programs and activities that address risk and protective factors for youth violence, including suicide and bullying.
- Develop a report card of risk and protective factors underlying youth violence in Iowa.
- Develop a strategic plan to reduce risk factors and increase protective factors, in collaboration with key state agency stakeholders.

Population Served: All youth in Iowa under 24 years old, especially those at risk for violence.

Funding Source: Federal Grant

0153-0694

| Fiscal Year | 04 Actual | 05 Actual | 06 Estimate |
|--------------------|------------------|------------------|--------------------|
| Federal Funds | \$0 | \$38,189 | \$85,603 |
| FTEs | 0.00 | 0.55 | 1.00 |