



Iowa Governor's Conference on Public Health 2020



Local Action • Global Impact

April 14 - May 1, 2020
Virtual Conference

Local Action, Global Impact

2020 IGCPH Virtual Conference

The Iowa Governor's Conference on Public Health is a must-attend event for all Iowans who work in public health, environmental health, primary care, health promotion, health education, laboratory sciences and more! Conference attendees receive profession-specific knowledge and exposure to other disciplines within public health. You will hear from national, state and local experts in public health through our two-week webinar series. See the pages below for more information!

The conference theme Local Action, Global Impact which represents the importance of the work individuals do to make a difference in their local community, which expands to have a larger global impact within public health.

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Who We Are

The following organizations work together as partners to plan the Iowa Governor's Conference on Public Health:

- Iowa Counties Public Health Association
- Iowa Department of Public Health
- Iowa Environmental Health Association
- Iowa Public Health Association
- University of Iowa College of Public Health
- University of Iowa Division of Child and Community Health

Thank you to our Sponsors!



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Webinar presentation slides are available to download from webinar links on the [IPHA YouTube Channel](#).

Who should participate?

- Boards of Supervisors
- Boards of Health
- Dental Hygienists
- Dentists
- Dietitians
- Environmental Health Specialists
- Epidemiologists
- Family and Community Science Specialists and Community Planners
- Family Physicians
- Health Educators
- Individuals that are interested in assuring the health of individuals, families, and communities
- Laboratory Scientists
- Mental Health Professionals
- Nurses
- Other Allied Health Professionals
- Pediatricians
- Pharmacists and Pharmacy Professionals
- Public Health Administrators
- Social Workers
- Statisticians
- Students
- Substance Abuse Prevention and Treatment Staff

Continuing Education and Contact Hours Credit

Applications for credit approval are being submitted for the following:

- Dental
- Dietetics
- Entry-level CHES (Certified Health Education Specialists)
- Nursing

Attendees who would like to obtain CEU credit will receive detailed instructions at the beginning of the webinar. If you have any questions, please contact Lina Tucker Reinders at lina@iowapha.org.

Looking ahead to IGCPH 2021

The continued education and development of our public health professionals is something that we all know is necessary. Your support is needed now more than ever as we face the financial impact of having to cancel this year's traditional conference but still fund our 2021 gathering. If you find value in these webinars and are able to, you can

donate to the Iowa Governor's Conference on Public Health [here](#). (***Please write "IGCPH 2021" in the comment section of your donation.***)

If your organization is interested in learning about sponsor opportunities for the 2021 conference, please email kellys@assoc-mgmt.com.

Keynote Address

“Rehumanizing the Workplace – why it matters now more than ever”

Dr. Rosie Ward, April 14, 2020 – 12:00 - 1:30 pm

Our world is rapidly changing and becoming increasingly volatile, uncertain, complex, and ambiguous (VUCA). We are living and working in a world where disruption is the norm. While some chaos is necessary because it sparks exploration, growth, and innovation, it also can lead to isolation and dehumanization. Our disrupted world inherently triggers us to show up in life in increasingly disconnected, guarded and reactive ways - especially in the workplace. Many of us spend more time at work than anywhere else, and these dynamics play out more there than anywhere else, leading to toxic environments that have ripple effects on the rest of our lives. In fact, according to Jeffrey Pfeffer’s research from his 2018 book, *Dying for a Paycheck*, dehumanized workplaces account for an additional 120,000 deaths per year - making them the 5th leading cause of death in the United States and accounting for 8 percent of our healthcare spend. We have a humanity crisis on our hands! This session will outline 5 key principles essential for rehumanizing our workplaces and communities that restore hope, wellbeing and performance.

Rosie Ward, Ph.D., MPH, MCHES, BCC, Certified Intrinsic Coach®

Rosie began her career in 1994 in the fitness industry as a group fitness instructor and personal trainer then ended up focusing on worksite health promotion. With degrees in kinesiology and public health, she learned early on in her career of the fundamental disconnect between the research being done by industry leaders demonstrating the financial link between health risks and costs, ROI, etc. and what business leaders actually cared about on a daily basis. In 2004, Rosie began her training and development in Intrinsic Coaching® and was intrigued by the focus on shifting thinking patterns. She began providing coaching services and eventually became a Certified Intrinsic Coach® Mentor leading training programs for others. She earned her Ph.D. in 2008 in Organization and Management where her studies focused on organizational culture, leadership, coaching and intrinsic motivation. Rosie’s niche is helping organizations recognize the importance of wellbeing on the organizational and individual level and utilizes this as the Dare To Lead facilitator. She formed Salveo Partners, LLC with her business partner where they leverage The Fusion of organizational and employee wellbeing to create thriving workplace cultures. She truly practices what she

preaches; in her “spare” time, Rosie teaches Spinning® and Zumba® classes. And, of course, she cherishes and enjoys spending time with her family.

Webinar Topics (in alphabetical order per session title)

A Proactive Approach for Reducing Patient Medication Costs and Saving Time for Busy Primary Care Staff (4/27/2020 – 12:00 pm)

Guadalupe Chavez; Lauren Reist

Adverse medication events cause 1.3 million emergency department visits annually. Older adults are 7 times more likely to be hospitalized than younger persons, causing unnecessary spending of healthcare dollars. Multiple barriers to effective medication prescribing exist in everyday family medicine practice, including cost. This may delay or interrupt therapy and lead to hospital admissions due to uncontrolled chronic diseases.

Centralized Healthcare Solutions (CHS) is based out of the University of Iowa College of Pharmacy. Eastern Iowa Family Medicine Clinics are currently collaborating with CHS to provide Chronic Care Management (CCM) to Medicare patients. Clinical pharmacists and student pharmacists provide CCM to patients over the phone. When prescribers and/or their patients have medication cost concerns, CHS student pharmacists proactively contact the patient's insurance company to identify less expensive alternatives. Clinical pharmacists message prescribers directly through the electronic medical record (EMR) with affordable and effective treatment recommendations. This is a low-cost and effective alternative to having on-site clinic staff spend time reducing medication costs for patients.

To date, this service has received a high acceptance rate of recommendations (>90%) designed to reduce cost and improve the control of a wide variety of chronic health conditions. Over 400 patients are available for analysis.

Access to Community-based Physical Activity and Nutrition Programs for Older Iowans (5/1/2020 – 1:00 pm)

Tami Swenson, PhD; G. Joseph Sample, MPA

The Area Agencies on Aging (AAAs) serve Iowans with disabilities and older Iowans by coordinating delivery of over 30 different programs to help older Iowans age in place; to prevent abuse, neglect, and exploitation; and to protect and preserve their rights. These home and community-based support services are also provided by the AAAs to caregivers of older Iowans and Iowans with disabilities and, thus, reach both the individuals and their families with services and support. The availability of evidence-based physical activity and nutrition programs by the AAAs varies geographically across

the state, and each of the six regional AAA offices have identified service gaps for rural populations that limit access to these programs.

In comparison to the AAAs, both urban and rural local health departments have varying degrees of collaborating, cooperating, coordinating, or networking levels of partnerships with other organizations within their communities to address population health and health promotion activities.

Central to these initiatives for community-wide health improvement is engagement with health providers. The importance of these partnerships between public health and nonprofit hospitals increased in 2013 with the requirement of hospitals to complete a community health needs assessment at least every 3 years and implement strategies to address the identified health needs. The resources available to address population health within rural communities are limited by fewer healthcare providers and types of expertise available for local public health to engage with on health improvement initiatives. Gaps within the health infrastructure may result in communities lagging behind in community health and prevention activities that address “upstream” factors.

An Inpatient Probiotic Intervention to Prevent *Clostridioides Difficile* (4/17/2020 – 12:00 pm)

Olivia Masterson

The CDC has identified *Clostridioides difficile* (CDI) as an urgent threat in a 2019 antibiotic resistance report. Institutions should reduce communal spread of an intensifying public health threat by decreasing infection rates. Prior research notes mixed effects of probiotics on CDI rates. At Broadlawns Medical Center, a probiotic protocol using DanActive was started for high-risk patients in September 2018. A quasi experimental study was devised to analyze protocol efficacy comparing one year (four quarters) prior to and after initiation with intent to determine if the protocol reduced inpatient CDI lab orders and other related testing. Primary and secondary outcomes are associations of reduced inpatient CDI rates with probiotic usage and reduced lab orders for CDI and other applicable testing, respectively. A total of 20 lab-identified CDI cases between September 1st, 2017 to August 1st, 2018 were found from both qualified inpatient cases and from the community. A Mann-Whitney U test compared total qualified CDI lab-identified cases between pre and post-intervention. Baseline variables analyzed were antimicrobial days of therapy, PPI/H2 blocker usage, antibiotic type, diagnosis location, readmissions, age, and gender. No significant difference was associated with qualified inpatient cases CDI following the protocol ($p=0.486$, 0.399/1000 days vs 0.691/1000 days), yet, total cases statistically increased in the same time period ($p=0.029$, 1.094/1000 days vs 2.130/1000 days).

Barriers and Facilitators to the Success of Diabetes Self-Management Education Programs (4/24/2020 – 12:00 pm)

Sydney Tylke

Diabetes Self-Management Education (DSME) is an evidence-based lifestyle change program aimed at preventing medical complications (e.g. amputations, kidney and cardiovascular disease, death) in individuals with diabetes. The ability of DSME programs to reach large numbers of lowans with high-quality services is essential to preventing diabetes-related injury, illness, and deaths in the state. However, DSME programs face many barriers to doing so. Additionally, the facilitators to achieving these goals are not always well-understood. The proposed presentation will thus describe the results of a survey (n=101) and follow-up, semi-structured interviews with DSME staff (n=9) conducted in 2019 as part of a larger evaluation project with the Iowa Department of Public Health. Presenters will familiarize attendees with the current DSME landscape in Iowa, display descriptive statistics (counts) from the survey, and provide recurring themes from the interviews to highlight commonly encountered barriers (e.g. lack of health care provider awareness of DSME, a lack of reimbursement for care) and facilitators (e.g. good relationships within health care systems, offering flexible class schedules) to program success. Presenters will also identify recommendations for replicating and expanding program facilitators and potential solutions to barriers identified by program staff. Both results and recommendations will be contextualized using the social-ecological model as a framework.

Better Messages, Better Advocacy, No Better Time than NOW (4/29/2020 – 12:00 pm)

Deborah Thompson, MPA; Dennis Tibben, MPA

This session is a must have for the conference. It will introduce Jonathan Haidt's Moral Foundations Theory as provided for in the book entitled, "The Righteous Mind: Why Good People are Divided by Politics and Religion." The session will include methods of working the theory into public health messaging and will provide an opportunity to workshop the lessons learned - not once, but twice! The session will also include advocacy do's and don'ts and is sure to generate enthusiasm for legislative engagement given the expertise and charm of the co-presenters. We possess public health expertise as well as knowledge of the medical field. This will be valuable to the audience as the partnership between the public health and medicine comes full circle under implementation of the Affordable Care Act.

Cancer Survivors in Iowa: Growing Number, Growing Need (4/24/2020 2 12:30 pm)

Katie Jones, MPH; Kelly Wells Sittig, CCPH

Nearly 150,000 people living in Iowa are cancer survivors, and the number of cancer survivors in Iowa continues to grow, especially as the number of Iowans age 65 and older increases and more cancer survivors live longer. This training will discuss the demographic trends of cancer survivorship including disparities, healthcare issues including specialist shortages and cancer survivorship care plans, an overview of some of the support programs available, and the role of public health and primary care in supporting cancer survivors.

Topics that will be covered include the importance of transportation, access to care, physical activity, nutrition, tobacco and nicotine cessation, and cancer survivorship care plans for cancer survivors. This interactive presentation will include discussions on how to create a societal understanding of the growing cancer survivor population and issues surrounding cancer survivorship.

Creating Healthy Places (4/23/2020 – 1:00 pm)

Mike Bell, PLA; ASLA, Naura Godar, AIA

Many community planners are limited in their understanding of how the built and natural environments impact public health. This presentation is focused on community development and design strategies that link the built and natural environments and human health. This session will provide strategies and tools to execute ecologically-based approaches in community planning & design, enhancing human connections with nature and each other, increasing physical activity, and encouraging healthy people and places.

Developing a Health Communication Campaign: Navigating the Process to Achieve Healthier Outcomes Together (4/29/2020 – 12:30 pm)

Elise Bechler

This presentation will provide an overview of data available from the Iowa Department of Public Health, and discuss important confidentiality considerations when working with public health data. Part one will highlight public health data available publicly from IDPH and data available to complete more in-depth analyses through the submission of an application and execution of a data sharing agreement. Information will be provided on how IDPH data requests are reviewed, including some tips and tricks on how to submit a great application and how to get through the approval process as quickly as possible. Part two of this presentation will provide an overview of IDPH's updated Disclosure of

Confidential Public Health Information, Records, or Data Policy. Information covered will include making release decisions related to small count sizes, protecting confidentiality when sharing success stories, and other important best practices for ensuring the confidentiality of lowans while working with valuable public health data. The presentation will conclude with examples and time for audience members to ask questions regarding data availability or the IDPH data request process. County health departments, local boards of health, students, researchers, IDPH staff, and any other entity with a contract or data sharing agreement with the Iowa Department of Public Health would benefit from this information.

Effective Partnerships: Understanding What Other Sectors Need - And Providing It! (4/27/2020 – 12:30 PM)

Kelli Gerdes

As public health professionals, we are uniquely capable of bringing together colleagues from many sectors around a common cause.

Across the country, shared concerns and closely related goals are translating into effective partnerships – with health systems, business, housing, and education, to name just a few. In those communities, public health analytics, needs assessments, and proven prevention strategies are informing policy and action and providing wide value. But even as many locales are showcasing effective partnerships, others are lagging behind. Too often, key community decisions are being made without the contribution of public health. The benefits of the rigorous knowledge and rich data in the field are sometimes getting lost. There is a gap that must be bridged so that the assets and power of public health can reach a larger audience.

To open the door to effective partnerships, public health professionals need to understand what matters to other sectors and offer it. In today’s session, you’ll learn how to start the conversation from the partner’s point of view and gain access to a toolkit full of resources and strategies to allow public health professionals to align their vision with that of others and move community health initiatives further and faster together. THE PHRASES (Public Health Reaching Across Sectors) toolkit, spearheaded by the de Beaumont Foundation, builds communication skills and strategies designed for success.

Emergence of New Delhi Metallo-beta-lactamase in Iowa (4/30/2020 – 1:00 pm)

Megan Nelson

New Delhi Metallo-beta-lactamase (NDM) is a plasmid-mediated carbapenemase, commonly found in Enterobacteriaceae. Carbapenemase producing organisms are an urgent public health threat due to high levels of resistance to antibiotics making them very difficult to treat. They are easily transmissible and have been implicated in hospital

and community acquired infections. First discovered in India in 2008, NDM quickly spread worldwide. Three NDM carrying isolates were found in the U.S. in 2009, and by 2017 this number increased to 379. In February 2019, the State Hygienic Laboratory confirmed the first NDM positive isolate in Iowa from a community medical center. Currently, five NDM positive isolates of differing species and gene variants have been detected. Whole-genome sequencing identified two genetically closely related *Enterobacter cloacae* complex isolates carrying NDM-1 which were submitted five months apart from distant facilities. NDM-5 genes were found in two isolates (*Escherichia coli* and *Klebsiella pneumoniae*) submitted two months apart. The patient with *K. pneumoniae* was a visitor from Nepal, where NDM-5 is common. Finally, NDM-7 was found in an *E. coli* from a patient with recent medical treatment in India. The emergence of this resistance mechanism in three different bacterial species in 2019 highlights the rapid acquisition of antibiotic resistance genes from out of state sources with the potential to further disseminate within Iowa.

Engineering Solution to Reduce Airborne Bacteria in Swine Production (5/1/2020 – 12:00 pm)

Emma Meador

Inhalation of dust prevalent in swine farms poses those caring for the swine to be susceptible to respiratory symptoms, lung dysfunction, and disease. Improving the air quality can create a safer working environment and achieve optimal health between the animals and humans. Therefore, to eliminate the hazardous effects caused by swine dust, we are testing its effects on ultraviolet (UV) light and filtration. Air samples and plate assays from the treatment and control rooms are used to compare the effectiveness of the air cleaning technology. Specifically, comparing the concentration of airborne bacteria, in colony forming units per cubic meter, of the treatment vs control room.

Expanding Emergency Food Access: Thinking Beyond Food Pantries and Meal Sites (4/23/2020 – 12:30 pm)

Aubrey Alvarez, MPA; Steven Williams

With hundreds, if not thousands, of food pantries and free meal sites throughout Iowa, how are 1 in 5 children and 1 in 8 adults still food insecure? During this session, we'll explore opportunities available within every rural, suburban, and urban community to put more quality food where individuals and families are already located.

**Got Vaccine? Preventing Disease Outbreaks using School Immunization Data
(4/20/2020 – 12:30 PM)**

Juan Cadenillas, MPH; Susan Brooks, RN, BSN, BS

Any community is susceptible to a disease outbreak. High rates of unvaccinated residents could prevent an effective herd immunity protection. Lack of proper monitoring procedures and tools could also compromise preventive response efforts. Public health agencies should ensure they have access to the most relevant and prompt data to respond to a potential outbreak. During this presentation, staff from Polk County Health Department (PCHD) will share their approach in using their school immunization audit reporting as a tool for monitoring and response to outbreaks. School immunization audits are mandated by the State and can provide a glimpse into the immunization status of students as a whole. However, during a disease outbreak, when time is of the essence, the format of the audit results makes retrieving actionable information time consuming and difficult. PCHD is implementing a new approach that will assist PCHD in monitoring and preventing spread of a disease. Using a web-based approach, PCHD staff is capable of quickly generating immunizations reports. The reports contain valuable information about populations missing a specific type of vaccine and schools at most risk. PCHD staff will share lessons learned through the implementation of this new web-based approach. PCHD hopes that the implementation of this new system will help to keep medically fragile residents and the community in general safe.

**Growing the Farm to School Movement in the Waukee Community School District
(4/30/2020 – 12:30 pm)**

Kaitlyn Scheuermann, MPP-D, RDN, LD; Jeannie Allgood

With a passion for providing healthy food opportunities to the rapidly increasing student population while also supporting the local community, the Waukee Community School District collaborated with the local health department to apply for a Farm to School Planning Grant from the United States Department of Agriculture and was awarded funding in June of 2018. This grant was instrumental in structuring the District's Farm to School efforts by embedding known best practices and policy supports early in the planning process. In this session, the Waukee Farm to School team will share their experience in leveraging cross-sector partnerships and developing a strategic plan to support local food procurement, nutrition education, and hands-on agricultural opportunities in the fastest growing school district in Iowa. Through an interactive workshop, participants will brainstorm ideas for growing the Farm to School movement in their local communities and leave the session with tangible tools and resources to support procurement, programming, partnership, and policy efforts, whether they are just beginning or already engaged in the farm to school movement.

Healthy LifeStars: Empowering Children One Lesson at a Time by Turning Unhealthy Habits into Healthy Lifestyles, through Collaboration, in a Neighborhood Near You

(4/29/2020 – 1:00 pm)

Josie Hentzen, MPH; Sofie Dollison

Over the course of the last year since the Iowa Institute of Public Health Research and Policy took on the new venture of bringing Healthy LifeStars, a national non-profit organization, to Iowa, the program has been enthusiastically supported in the Iowa City and surrounding area. The program inspires personal responsibility to change unhealthy habits into healthy lifestyles. Using a collective impact model, the strengths of local communities and child serving organizations who are interested in promoting healthy behaviors, build collaborations to deliver the childhood obesity prevention program. In the pilot year of the program, we have successfully implemented the curriculum in afterschool programs in neighborhoods that are under-resourced and underserved. We have also conducted an evaluation to critically examine the program and ensure program fidelity and positive outcomes. The evaluation involved collecting and analyzing information about the program's activities and outcomes in order to improve its effectiveness and to inform programming decisions. This presentation will highlight the results of the evaluation, the expansion of the program, and how to partner with Healthy LifeStars to bring the program to your community. We will also incorporate an interactive element to our presentation by demonstrating a Healthy LifeStars lesson during our presentation so that our audience experiences the program in real time.

How to Increase Diet Quality for Iowa Food Assistance Clients: A Qualitative Analysis of 13 Interviews (4/30/2020 – 12:00 pm)

Julie Uram

Public health professionals recognize the missed opportunity of Food Assistance (Supplemental Nutrition Assistance Program; SNAP) to improve the diet quality of participants. The following data represent perspectives of key informants of Food Assistance (SNAP) in Iowa on how diet-quality could be improved for Food Assistance (SNAP) clients. Data were gathered from one-on-one interviews with questions about policy pilot options and were evaluated based on a codebook of opportunities and barriers for the various pilot proposals. Results are depicted visually and discussed in the recommendations section to illustrate the consensus of interview participants. Here we conclude that pilots involving the following three components have the highest support of Iowa Food Assistance (SNAP) key informants: expanding the types of items included in financial incentives, financial incentives for fruits and vegetables with a focus on rural communities, and increased healthy marketing strategies. These results will be

part of a larger report made available to inform state and federal nutrition policymakers. The project is a combined effort by The Harkin Institute for Public Policy and Citizen Engagement (Des Moines, IA) and the Center for Science in the Public Interest (Washington D.C.).

“I’ll have no lye with my beer, please.” Partnering With Public Health After Noting an Increase in Beverage Contamination with Drink-Dispenser Cleaners at Commercial Food Establishments (4/17/2020 – 12:30 PM)

Edward Bottei

An unusual cluster of beer-line cleaner exposures in customers at various commercial food establishments prompted us to characterize our poison center’s experience of beverage contamination with drink-dispenser cleaners. Our EMR was searched from 2010 to 2019 for cases that involved ingestion of a cleaning product that was dispensed from a beverage machine at a commercial establishment. Twenty-seven cases were found. The plurality of exposures, eleven, were from tap beer. In 9 cases, a specific beer-dispenser cleaner with a pH ≥ 13.5 was identified. All 27 patients developed symptoms; 13 sought health care, 4 were hospitalized, 1 was intubated. EGD results found three patients had significant esophageal and/or gastric burns. The one patient who was intubated had a difficult intubation because of significant caustic burns and edema down to the vocal cords. The significant increase in cases starting in 2017 was reported to our state health department, along with our epidemiological information. The state health department, partnering with other state agencies, sent a reminder to commercial food establishments about the importance of rinsing beverage dispensers after cleaning, and the health consequences that can occur if they are not adequately rinsed. Most exposures resulted in minor symptoms, but serious injury has occurred. By partnering with public health, the poison center’s findings led to an important reminder being sent to food establishments across the state.

Investigating the relationships between known risk factors and drug-related mortality in rural Iowa (4/28/2020 – 1:00 PM)

Brianne Cook, Jacob Garner, Devon Niewohner

With the increase in prescription opioid overdose deaths, there is a growing need to understand the risk factors that contribute to these fatalities. As a global issue, there has been a substantial increase in drug overdose mortality in several countries worldwide over the past decade (Paulozzi, 2007). Here in the US, drug mortality rates overall are higher in counties characterized by more economic disadvantage, more blue-collar and service employment, and higher opioid-prescribing rates (Monnat, 2018). Nationally, factors including low Socio-Economic Status, low education level, and

race (Rooney, 2018), as well as lack of insurance and incarceration status, have been identified as contributing variables (Altekruse, 2011). While the correlations between these risk factors and opioid overdose mortality have been explored in some areas of the country, often urban settings, the studies remain somewhat limited in the rural Midwest. Our study, therefore, focused on investigating the relationships between the known risk factors and drug-related mortality among rural Iowa counties.

Iowa Double Up Food Bucks (4/22/2020 – 12:00 PM)

Aryn McLaren

Double Up Food Bucks began in six Iowa farmers markets in 2016 and is now active at 37 sites including farmers markets, farm stands, mobile markets and grocery stores. To date, the program has resulted in nearly \$525,000 worth of fresh fruits and vegetables purchased by Double Up Food Bucks customers. From recent program evaluation, 94 percent of SNAP shoppers reported eating more fruits and vegetables and 74 percent of farmers reported making more money because of Double Up. In 2018, the Iowa Healthiest State Initiative and local partners received a three-year FINI award for \$480,044 to support the growth of the Double Up Food Bucks program in the retail setting.

Iowa Violent Death Reporting System: Finding Ways to Prevent Violent Deaths by Understanding Contributing Circumstances (4/21/2020 – 12:00 PM)

Tiffany Conroy, MSW, LISW; Lisa Roth, BA

The Iowa Violent Death Reporting System (IAVDRS) is a CDC-funded statewide surveillance system that collects information on deaths that occur in Iowa resulting from homicide, suicide, unintentional firearm deaths, legal intervention and deaths of undetermined intent. IAVDRS is a multi-source data system from death certificates, medical examiner and law enforcement reports. The system connects information about the “Who, when, where, and how” from data on violent deaths and provides insights about “why” they occurred. The system can capture 600 unique data elements on all types of violent deaths, in all settings, for all age groups. The data collected are abstracted and the de-identified information is entered into the anonymous national violent death reporting system database. The goal of this effort is to aid in the development of public health prevention strategies to reduce violent deaths and save lives. Iowa began collecting data in 2015 for the seven most populous counties. By 2016, IAVDRS expanded statewide, and surveillance is ongoing. This presentation will offer an overview of the IAVDRS program and highlight notable findings from data collected on violent deaths in Iowa since 2015.

It's Happening Now: Decennial Census 2020 and What It Means for My Community's Health (4/21/2020 – 12:30 PM)

Sandra Charvat Burke, MS

The Decennial Census of 2020 will be happening at the same time as the Governor's Public Health Conference in April 2020. Too often we don't realize the importance of responding to the Decennial Census and the local impact it has on our community and our community's health. This session offers a look at the what, why, how, and community health impact of the Decennial Census. The session will provide:

- An overview of the questions being asked (and not asked) on the Decennial Census form
- How the Decennial Census designates Race and Hispanic Origin
- A timeline of when to expect the new data and information
- The Constitutional origins and requirements of the Decennial Census
- How the Decennial Census compares with the American Community Survey
- How the Decennial Census impacts community health

Lessons Learned from the Field: Don't Get Caught by the Pooh! (4/22/2020 – 12:30 PM)

Katie LaFollette, RN; Gina Anderson, RN, BSN

The aim of this presentation is to summarize *Clostridioides difficile* lessons learned from 17 Iowa acute care hospitals and 66 Iowa Nursing Homes, 1) Participants will understand the primary drivers of *C. difficile* and Antibiotic Stewardship, 2) be able to identify two reasons for diarrhea other than *C. difficile*, and 3) appreciate the impact of CDI to patient/families, and value-based reimbursement. It's about the microbiota! *Clostridioides difficile* (formerly *Clostridium difficile*) is an anaerobic gram-positive, spore-forming, toxin producing bacillus. It is transmitted among humans through the fecal-oral route. In the words of the CDC, "C. diff germs are carried from person to person in poop."

Local Public Health and Emergency Departments Work Together to Make Progress in the HIV Battle (4/28/2020 – 12:00 PM)

Megan Burnabe, Becca McCaughey & Alicia Steines

Late diagnosis of HIV infection is believed to be responsible for high rates of HIV transmission. Novel strategies are needed to reduce HIV transmission, particularly among individuals who are unaware of their HIV status. Emergency departments (EDs) routinely receive individuals in a medical setting where an opportunity exists to screen them for HIV. This presentation will provide an overview of the pilot project and the

results from the project. This pilot project will address how community collaboration can help to alleviate missed opportunities for patients to receive an HIV diagnosis and how to help ED patients diagnosed with HIV access care. The presentation will also review how local LPHA's and ED's can begin to coordinate together to benefit the patient and community in regard to communicable infections. During the presentation we will provide an overview of the workflow plan from the initial phase and how it expanded by the end of the project. We will ask the audience questions throughout the presentation and have them respond by use of their phones to gauge answers in real-time.

Pacific Climate Change Migrants in Iowa: Public Health Implications (4/28/2020 – 12:30 PM)

Michele Devlin, PhD

Pacific Islanders are among the most rapidly growing populations in Iowa and the Midwest but are often poorly understood. Many public health and social service organizations in Iowa are challenged on a daily basis with providing culturally appropriate services to this population and other immigrants, but they face significant language, cultural, financial, political, and related barriers to care. Most of these Pacific Island migrants come from former U.S. territories, and by treaty they may live and work in the United States legally. The Marshall Islands and a number of other Pacific nation-states such as Kiribati, Tuvalu, Palau, and the Federated States of Micronesia are submerging under rapidly rising sea levels due to climate change. The loss of habitat, traditional economies, homes, and jobs will force citizens of these islands to seek new lives elsewhere. With legal access to the U.S., Iowa and other Midwestern states are now receiving growing numbers of certain groups of “environmental refugees.” Many are being recruited to work in meatpacking and other jobs in Iowa. This presentation, therefore, will provide an overview of the forced environmental migration that is occurring around the world, and how this is connected to the rise in Pacific Islanders that are moving to Iowa for work. The public health implications of these new migration streams will be discussed, and strategies will be provided for public health professionals to better meet the needs of these vulnerable environmental refugees that now live in the state as newcomers in many communities.

Pertussis Outbreak in an Unvaccinated Community (4/23/2020 – 12:00 PM)

Lynn Fellingner, RN

Davis County, Iowa is home to a large number of Amish who are unvaccinated or under vaccinated. All vaccine preventable diseases are a threat for this community. In recent years, the Amish community has had increased contact with the English nearby, so an emerging concern is the spread of vaccine preventable diseases into the English

population. Lynn Fellingner, RN, Manager of Davis County Public Health, will discuss the identification of a pertussis outbreak in the Amish community starting in June 2019. Issues to be highlighted include beliefs prevalent in the Amish community, barriers to diagnosis, treatment, and compliance with recommendations, and communications issues.

Safe to Drink?: Iowa's Contaminated Private Wells (4/24/2020 – 1:00 PM)

Ingrid Gronstal Anderson

Des Moines Water Works has struggled for years to provide safe drinking water to its customers, battling nitrate contamination from upstream farms. But contamination from agricultural practices may be even worse for the estimated 230,000 to 290,000 Iowans whose drinking water comes from private wells.

Scientific Communication Approaches to Boost Environmental Health Literacy (4/15/2020 – 12:30 PM)

Jacqueline Curnick, MDP

This interactive workshop will share practical scientific communication and media skills within the framework of Environmental Health Literacy. Appropriately conveying scientific information, which may include data related to environmental health risk, in a way that is understandable, and empowering is an important skill for public health professionals. As we face more public health challenges we will need a population that is competent in environmental health literacy. Multimedia approaches, including video production, photography, podcasts and social media communities have become increasingly important ways to convey scientific information. In addition, these methods have facilitated networks of solidarity among marginalized populations and groups, propelling social movements united around similar challenges or experiences. These approaches can also be used by public health professionals to convey scientific information and enhance environmental health literacy in their own communities. This workshop will provide opportunities for participants to tell their own stories and discuss ideas for programming in their own communities. Participants will learn about best practices in storytelling, including different approaches to storytelling and the value of community-based storytelling activities. The workshop will also provide practical tips related to video production and media relations. Staff from the Environmental Health Sciences Research Center at the University of Iowa will share some recent projects that they have implemented.

The Band-Aids Must Come Off (4/20/2020 – 12:00 PM)

Caprice Jones; Ann McDonough, JD

At the Fountain of Youth Program in Dubuque Iowa a large percent of those we work with are suffering from generational poverty. The vast majority of those we serve come from families that have lived in poverty for more than two generations. Children and adults who live in generational poverty experience low self-esteem, an attitude of despair and dependency on others. Fountain of Youth has been helping children and adults by providing personal and professional development as well as wrap-around community services that are geared towards completing self-chosen goals to assist them in escaping the cycle of generational poverty. We believe the answer is not to solve people's problems for them. Rather, we seek to show them someone cares and to guide them through the overwhelming process of learning to succeed in a world they have only looked at from the outside. Prior to working with us, no one has believed in them and they have had no idea how to believe in themselves nor can they defeat popular beliefs that people cannot change. We teach them that each and every person is a valuable life. At the Fountain of Youth program, we work with those that need the support and knowledge of others who can understand their plight, sometimes experiencing it ourselves. Together we can rip the Band-Aid off the festering sores that result from childhood trauma and compound the challenges of generational poverty, resulting in citizens who are assets to society rather than liabilities.

Viral Suppression Among Rwandan People Living with HIV: A Peer Education Program Evaluation (4/15/2020 – 12:00 PM)

Mariah Schrack

Rwanda has made remarkable progress toward achieving HIV epidemic control in the aftermath of the 1994 Rwandan Genocide, where rape and deliberate infection with HIV was well documented as a type of warfare. In part, this success is attributed to the Rwanda Network of People Living with HIV Peer Education Program, which aims to increase the number of people living with HIV who have achieved viral load suppression (CD4 count <200 cells/ μ L). To evaluate the program's effectiveness and identify barriers to success, we conducted a mixed methods secondary analysis to (1) report trends in viral suppression and (2) identify socioecological factors that influence viral suppression outcomes among program participants. The latter was achieved by qualitatively analyzing peer educator notes from 142 randomly selected client charts, stratified by the four Rwandan provinces and Kigali City. Notes summarized the barriers faced by the participants to achieve viral suppression and by the health educators to effectively provide services. Between October 2018 and September 2019, we observed a significant increase (13.7%) in the number of participants achieving viral suppression. We identified numerous barriers to viral suppression, which were best summarized using the Social Ecological Model; they included drug use among participants (individual level), disruptions of the educator-client relationship (interpersonal level),

insufficient training of peer educators (organizational level), poor access to healthcare facilities (community level), and restricted access to community-based health insurance (policy). Overall, the program is achieving its goal, but opportunities exist to better support peer educators and their clients.