

Jasper County Board of Health Agenda Mission: Protecting and improving the health of Jasper County.

Thursday, July 10, 2025, 11:00 AM

Jasper County Office Building, 315 W. 3rd St. N., Large Conference Room, Newton, Iowa A hybrid option is available via Zoom link at the end of the agenda.

- 1. Tentative Agenda (2 pages)
- 2. Call to Order (by Chair, Julie Smith) Time:
- 3. A moment of silence for John Van Ryswyk
- 4. Roll Call of Jasper County Board of Health members:
  - □ Julie Smith, Chair
  - Dr. Andrew Cope, Medical Director He will be on vacation.
  - Donna Akins
  - □ Jody Eaton
  - Doug Cupples, Board of Supervisors
- 5. Introduction of others present:
- 6. Approval of Minutes: (Action) May 8, 2025, meeting minutes (Attachment, 2 pages)
- 7. Agenda Approval:(Action) Consider and approve the agenda
- 8. Comments from Citizens: The public may comment on public health items (Limit: 3 minutes)
- 9. Outside Agency Reports: (Information Only)
- Environmental Health: Kevin Luetters, Community Development Director
  - May and June reports (Attachment, 1 page)
  - Changes to stray dog policy. (Attachment, 1 page)
  - Jamie Elam last day was 7.4.2025.
  - o On agenda, DIAL Agreement for Pool, Spa, Tattoo
- MICA: Megan Thompson, Health Services Director
  - May/June 2025 Report (Attachment, 2 pages)
  - Healthy Child Care Iowa FY24 Report (Attachment, 4 pages)

### Old Business:

- 10. IHHS Updates: Information (Attachment, 2 pages)
  - <u>Iowa Behavioral Health:</u> changes 7.1.2025
  - <u>Iowa's Disability Service System</u>: Access Point Handout (Attachment, 2 pages)
  - Iowa Local Governmental Public Health System: Results of the 2024 Local Public

<u>Health System Survey:</u> link

• <u>Governmental Local Public Health Snapshot:</u> (Attachment, 2 pages)

### New Business:

- 11. <u>Annual Report FY25:</u> (Attachment, 33 pages) (Action)
- 12. <u>Strategic Plan FY26:</u> (Attachment, 1 page) (Action)
- 13. Jasper LPHS FY25 Progress Report: (Attachment, 6 pages) (Action)
- 14. DIAL agreement: Pool, Spa, Tattoo 3 years (Attachment, 8 pages) (Action)
- 15. <u>Health Department Report</u>: Information Only Becky Pryor, Administrator

Community Health Improvement Plan (CHIP):

- Housing meeting July with City
- Transportation in October

Resource Guide:

• Senior Health and Fitness Fair on 5/28/2028

<u>Opioid Settlement Funding</u>: meeting 7/22/2025.Opioid reports due 7/15/2025 emailed. <u>Jasper County Cares Coalition</u>:

• Meeting 6/11/2025, 7/9/2025 networking event.

Public Health Emergency Preparedness (PHEP):

- Tabletop Exercise was completed on 5/15/2025.
- Working on the IS2200 class for everyone.
- Kristina, Nurse
  - o Immunizations: MMR, Pertussis, Back to School, Wording update
  - <u>Communicable diseases:</u>(Epidemiology): TB, measles in Iowa.
  - o Public Relations: daily social media

Melissa, Assistant

- <u>Homecare Reimbursement:</u>
- <u>Car seats:</u> 51 for the year
- <u>Events</u>: Library for CPPC on 6/4/2025, The Very Hungry Caterpillar book
- 16. Next meeting: Thursday, September 11, 2025, 11:00 AM.
- 17. <u>Motion to Adjourn</u>: (Action) Time:

Join Zoom Meeting <u>https://zoom.us/meeting/register/JOi-z4M7QzmjO6qTgA7Wtw</u> The hybrid/virtual meeting option is provided for convenience, but it cannot guarantee access. To ensure participation, members of the public should attend in person. Contact: Becky Pryor, <u>bpryor@jasperia.org</u>

Revision 7.3.2025 Final

### **Jasper County Board of Health- Minutes**

Thursday, May 8, 2025, 11 AM

Jasper Co. Office Building, 315 W 3rd St N, Large Conference Room, Newton, Iowa

Call to Order Time: 10:58 AM

Roll call: Jasper County Board of Health Members.

- X Julie Smith, Chair
- X Dr. Andrew Cope, Medical Director
- X Donna Akins
- X Jody Eaton

Board members absent: Doug Cupples, Board of Supervisors

Introduction of others present: Staff: Becky Pryor, Kristina Winfield, Melissa Gary

Outside Agencies: Jamie Elam, Community Development; Emma Krapfl, American Lung; Jana Larsen, Maternal and Child Health Director MICA; Kristina Burma, I-Smile Coordinator, MICA

Members of the public: None

Approval of Minutes: Motion to approve March 13, 2025, minutes. See 2-page attachment.

Motion: Dr. Cope Seconded by: Donna Akins Motion passed: unanimously

Agenda: Motion to approve the amended agenda with the addition of MICA: See 2-page attachment. Motion: Jody Eaton

Seconded by: Dr. Cope Motion passed: unanimously

Citizen comments: None

Outside Agency Reports: Information only

Environmental Health: Jamie Elam, March & April reports. See 1-page attachment

American Lung: Emma Krapfl Q3 Newsletter and Report. See the 3-page attachment

MICA: Kristina Burma reported on the I-smile Dental Sealant Program at Newton and Colfax-Mingo elementary and middle schools. Jana Larsen reported on MICA's Hawk-I, Maternal Health, Child Health, and WIC programs

Old Business: Information Only

9.) IHHS updates: <u>HHS Behavioral Health State Plan</u> link. Information only. Pages 6 and 7 mention public health. See 2-page attachment.

New Business:
10.) IHHS Updates:
Motion to receive and file Iowa Grants Contractor Notice "Applicable Law". See 1-page attachment. Motion: Donna Akins Second: Jody Eaton Motion passed: unanimously
11.) Grants: Private Well FY26:
Motion to approve Environmental Health: Private Well FY26 grant for \$50,505. See 2-page attachment. Motion: Jody Eaton Second: Dr. Cope Motion passed: unanimously

12.) New Evaluation Form:

Motion to approve the new Jasper County Evaluation Form. See 2-page Attachment Motion: Jody Eaton Second: Donna Akins Motion passed: unanimously

13.) Administrator and Staff Report: Information Only

Administrator report: Becky Pryor.

- Monthly reports: March/April. See 1-page attachment
- Finances: LPHS, Immunization complete. PHEP, Decat, and CPPC are billed to April.
- Audit: Homecare reimbursement original claims pulled from FY21 to FY25.
- Decat grant received for FY25/FY26 for \$12124.
  - Newton Y Healthy Kids Day 4/26/2025 and car seat event on 4/24/2025.
  - Objectives are met for FY25.

Community Health Improvement Plan (CHIP):

- Housing/homeless: Meeting 3/19/2025. PR. The flow sheet is complete
- Food: Meeting 5/14/2025
- Mental Health and Substance Abuse:
  - ☐ Mental Health Awareness Month is May.
- Opioid Settlement Funding meeting 3/25/2025, 4/22/2025, 7/22/2025.
  - $\Box$  Opioid reports are complete for the 3<sup>rd</sup> quarter.
- Promotion and Outreach complete.

<u>Jasper County Cares Coalition</u>: Meeting 4/9/2025, 5/14/2025. About 220 people are involved. Working on the community calendar and having everyone enter events. Updated resource guide, updates for the County website.

### Public Health Emergency Preparedness (PHEP):

- Meeting with the school, law enforcement, and EMA
- □ MOU signed.
- □ Planning an exercise on May 15, 2025.
- All staff took the FEMA IS 2200 class. Two County employees left.

Kristina, Public Health Nurse

- Immunizations. The MMR vaccine is available.
- Communicable Diseases (Epidemiology): TB, Measles information.
- Attended the Public Health Conference 4/1-4/2/2025

### Melissa, Assistant

- o Homecare Reimbursement
- Car seat installations

<u>Next meeting</u>: Thursday, July 10, 2025, 11:00 AM. (Dr. Cope will be absent from the July 10, 2025, meeting.) <u>Motion to Adjourn</u>: (Action) Time: 11:46 AM

Motion: Jody Eaton Seconded by: Dr. Cope Motion passed: unanimously

Board Member's Signature Minutes taken by Melissa Gary on 05/08/2025 Date

Stray Dog Policy Effective 07/01/2025

Jasper County Animal Control (JCAC) will only respond to calls when dogs and cats are involved in actions the Jasper County Sheriff office is part of

- JCAC will no longer pick up any strays from any citizens in Jasper County including the cities the cities we use to contract with have been notified.
- JCAC will no longer take any animals from actions involving the State Troopers.
- JCAC will continue to be the primary contact for animal bites.
- JCAC will continue to work with the Sheriffs office in dealing with animal neglect and abuse cases plus enforcement of the animal control ordinance.

Rescues in central lowa

- Animal Rescue League of Iowa ---- 515-262-9503
- Paws-N-Claws ---- 515-497-0304
- Poweshiek Animal League Shelter ---- 641-990-1692
- Animal Rescue League of Marshalltown ---- 641-753-9046
- Marion County Humane Society ---- 641-828-7387
- Happy Tales Ranch and Rescue (cats only) ---- 712-249-3203

Please pass this email on to all it will impact Any questions please give me a call or email

Thanks

Kevin Luetters Community Development Director

Jasper County Community Development Planning & Zoning Division

Environmental Health Division Animal Control Division 315 W 3<sup>rd</sup> St N - #150 Newton, IA 50208 Ph: 641-792-3084 Email: <u>kluetters@jasperia.org</u> Website: jasperia.org

### Environmental Report for Jasper County Board of Health For FY25- 7/1/2024 to 6/30/2025

Environmental Reporting	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total
	7.777		2008-01-044	100	1 2 2 2 2 2 2	270.25	1000		100010004	00.00	iviay	Juir	1 2 7 7 7
Septic Eval & Inspections	5	6	10	9	5	4	4	4	9	10			66
Time of Transfer Inspections	6	4	4	2	5	4	1	0	2	4	1	1	34
New Water Wells	0	2	0	1	1	0	0	0	1	0	1	1	7
Plugged Water Wells	3	5	0	1	2	0	2	0	3	2	2	3	23
Water Tests	3	2	4	0	1	1	1	2	4	3	3	3	27
Pool/Spa Inspections	0	0	0	0	9	1	0	0	0	0	0	7	17
Tanning Facility Inspections	0	0	0	0	8	2	0	0	1	0	0	0	11
Tattoo Facility Inspections	0	0	0	0	8	3	2	0	0	0	0	0	13
Septic Tank Pumper Inspections	0	0	0	0	0	0	0	0	1	4	0	0	5
Nuisance Complaints	4	4	2	2	2	0	1	1	1	1	4	4	26
Rabies / Dog Bites	0	0	2	0	1	0	0	0	1	1	2	2	9
Radon Test Kits Sold	1	1	0	0	0	0	0	0	0	1	0	1	4
Any Issues or Complaints	0	0	0	0	2	0	0	0	0	0	0	0	2
Totals	22	24	22	15	44	15	11	7	23	26	13	22	244

### Mid-Iowa Community Action (MICA)

MICA helps families experiencing poverty meet their needs, build on their strengths, and achieve their goals.

Serving Families in: Boone, Jasper, Marshall, Poweshiek, Story and Tama Counties.

### **Board of Health Newsletter May/June 2025**

WIC	April
Participation	2025
Marshalltown	1,388
Grinnell	196
Tama	263
Colfax	76
Newton	478
Settlement	19
Boone	231
Ames	1,198
Nevada	101
Traer	24
Brooklyn	38
Agency Total	4,012

\*WIC grant requires participation numbers in all BOH newsletters.

### I-Smile @ School 24-25 School Year

MICA's I-Smile @ School Team completed oral health screenings for 861 students this school year. They also placed 1,484 sealants on 355 children. Sealants are offered to kids in schools with 40% or higher free and reduced lunch rates. These kids often have more barriers to dental care and higher rates of decay, so sealants are placed as a great way to prevent cavities. The team also connects children with active decay to a local dentist for treatment.





It's been a busy Spring doing outreach in all counties of our service area!

### **Additional Health Program Updates:**

### Child Care Nurse Consultant (CCNC)

MICA's CCNC Program provides health and safety guidance as well as technical assistance to local childcare providers. Centers and In-Home daycares can receive support from MICA's Child Care Nurse Consultant. CCNCs also help providers through the new IQ4K process by completing health and safety checklists. MICA's CCNC has been busy facilitating trainings and connecting providers in the process of licensing to necessary resources for health and safety. We are currently hiring for a second CCNC, based out of Marshalltown.

### WIC

MICA recently received a positive shout-out from the Iowa HHS WIC team. Month-over-month growth at MICA continues to be steady with a 2.27% increase in participation, this was the highest increase in the state in April. In addition, MICA also had the second highest year-over-year growth in the state, with an increase of 5.24% from last year. The WIC team has been working hard to ensure families are promptly connected to WIC services.

### 1<sup>st</sup> Five

1<sup>st</sup> Five continues to partner with local pediatric and family practice providers in Boone, Jasper, Marshall, Poweshiek, Story and Tama Counties to promote the use of validated developmental screening tools such as the ASQ at well-child visits. Through early identification 1<sup>st</sup> Five is able to support families by getting children connected to early intervention services, promoting healthy growth and development before they start school.

### Maternal Health

The Maternal Health Program at MICA serves pregnant individuals throughout their pregnancy and postpartum. During appointments with our Maternal Health nurse, patients receive one-on-one education and support to help them have the healthiest pregnancy possible. The Maternal Health Nurse can also provide referrals for tobacco cessation and newborn necessities. Free prenatal vitamins are also offered to those participating in the Maternal Health Program. The Maternal Health Nurse has been busy assisting patients with Medicaid applications and connecting them to prenatal care providers for ongoing medical care.

### Child Health

Child Health continues to provide gap-filling services throughout the service area. These services include lead testing, caregiver depression screenings, ASQ developmental screenings and more. The Child Health Team also works to increase awareness and education about immunizations and connects families to medical and dental homes.

### Pick A Better Snack

The Pick A Better Snack program just wrapped up lessons for the school year. The Nutrition Educator completed monthly lessons at all six Marshalltown Community School District Elementary Schools and at South Tama Elementary. 2<sup>nd</sup> and 3<sup>rd</sup> graders enjoyed trying a new fruit or vegetable each month, learning about where it comes from, how to prepare and eat it as well as engaging in physical activities to promote lifelong healthy habits.

### I-Smile

The I-Smile Team has closed out another successful school year providing sealants at 30 schools. Sealants are offered to 2<sup>nd</sup> and 3<sup>rd</sup> graders in schools with a 40% or higher free and reduced lunch rate. In addition, the I-Smile team visited six high-risk 7<sup>th</sup> grades to do oral health screenings and sealants on at-risk students. The sealant program works extensively to connect children with decay to local dental providers. The team also does a fantastic job educating all students about proper oral healthy hygiene habits to prevent decay.

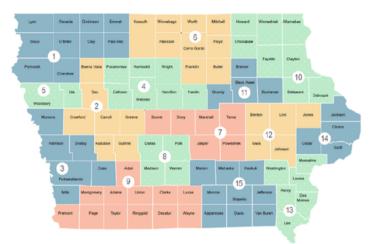
### Healthy Child Care Iowa (HCCI) State Fiscal Year 2024 (SFY24)



### SFY24 Snapshot

Healthy Child Care Iowa (HCCI) works to improve the quality of health and safety in Early Care and Education (ECE) programs both centers and homes serving infants, toddlers, preschoolers, school-aged children and their families. Healthy Child Care Iowa supports local Child and Adolescent Health (CAH) agencies to define the role and responsibilities of the Child Care Nurse Consultant (CCNC).

The CCNC program is evidence-based and helps to ensure that children have access to healthy and safe care. CCNCs build collaborative relationships with child care programs offering their support, knowledge and desire to help them succeed with improving quality in their child care environment. Every child care environment and early childhood professional is unique just as the children that attend their program.



CAH Collaborative Service Areas Map – Local CCNC Services

	SFY24 Totals
Visits made by Child Care Nurse Consultants	3,492
Technical assistance provided	8,133
Child care programs who participated with a CCNC	1,919

### Child and Adolescent Health (CAH) State Performance Measure #3 Percentage of Early Care and Education Programs who received CCNC Services



55% of ECE p Child Ca

of ECE programs participated with a Child Care Nurse Consultant (CCNC)

96%

of ECE programs who participated with their local CCNC increased health and safety in their child care environment.

### **Child Care Nurse Consultants**



**30** Registered nurses with specialized training and vast knowledge of best practices in child care health and safety are employed as CCNCs.

CCNC services are free of charge and are a voluntary service for child care programs. CCNCs provide visits for reviewing child health records, care plans for children with special health needs, medication administration, assessing playgrounds for safety, and completing the Iowa Quality For Kids® required research-based Health and Safety Checklist for Early Care and Education Programs developed by the California Childcare Health Program. CCNCs also provide health and safety trainings for child care providers. These are just few of the valuable services provided to assist providers to improve quality in early childhood programs.

### **Special Health Needs**

CCNCs in SFY24 identified **2,027** special health needs when providing services to child care programs. The number of special health needs has increased over the past 4 years from 458 in SFY21 to 2,027 in SFY24. The increase of children in care with special health needs is not specific to lowa, increasing numbers of young children with seizures, asthma, insulin dependent diabetes, behavioral and developmental disorders has become a trend nationwide.

Special Health Need	SFY24 Total		
Asthma	309		
Allergies/Anaphylaxis	807		
Seizures	111		
Diabetes	44		
IEP/ISFP	329		
Other	427		

### **90%** Of the health needs identified had a care plan in place as a result of CCNC services.

### **Special Health Needs Care Plans**

CCNCs have the skill and expertise to assist child care programs and families to ensure children with special health needs have a care plan in place. A care plan details how the child care provider will keep a child with a special health need(s) safe and healthy while attending child care. Plans are individualized and tailored to each child's unique needs. CCNCs work in collaboration with the child's medical provider to create the plan, then they work with the child care provider and staff to ensure they understand and are able to follow through with the care plan. This includes competency in necessary skills, medication administration (when needed) and individualized emergency procedures. An individualized care plan is an ongoing process that can take time and coordination depending on the complexity of the health needs of the child. Care planning is done with the child care provider, family and child's health care team that may involve several specialists.

### **Health and Safety Trainings**

Health and safety trainings are provided to early childhood professionals. Trainings provided by the CCNC are important for child care professional development and in meeting children's individualized needs. CCNCs offered face-to-face and virtual trainings in SFY24.

### **289** Health and safety trainings completed **2,518** Providers attended CCNC trainings

98% Of participants gained knowledge from trainings provided by CCNCs

### **Training Success Story**

A child care provider attended HCCI "Caring for Children with Allergies, Anaphylaxis and Seizures" training with the local CCNC. Shortly after taking the class, she was present when a child needed an emergency medication. The provider was prepared to assist and act quickly, applying the information she learned in the training. A few days later she contacted the local CCNC, thanking her for the class she taught. The provider said she felt confident and more comfortable assisting with this emergency after attending the training.



### Additional trainings provided by local CCNCs include:

- Back to Sleep-Tummy to Play: Reducing the Risk of SIDS & Promoting Active Tummy Time
- Breast Milk Feeding Promotion and Support in Child Care
- Caring for Children with Allergies, Anaphylaxis and Seizures
- Caring for Children with Asthma

- Immunization and Child Care
- Medication Administration Skills Competency
- Playground Supervision and Sun Safety Iowa Training Program
- The Period of PURPLE Crying
- Universal Precautions

### Use the QR codes or links below to learn more about Healthy Child Care Iowa.



<u>HCCI Child Care Nurse Consultant</u> <u>Performance Measures (2017-2024)</u>



https://hhs.iowa.gov/programs/program s-and-services/child-care/hcci

### **Impact of CCNC Services**

There were numerous success stories shared by the CCNCs during SFY24 with positive impacts for child care providers, program environments, children, families and communities.

### Impacts of CCNC services from SFY24 include:

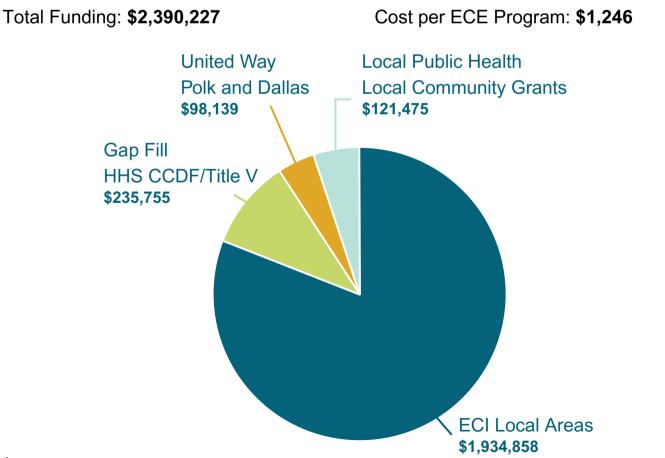
Improved children's access to medical homes, enrollment in health insurance, referrals to community and health agencies, toothbrushing and handwashing education for children, Positive Behavior Intervention Supports (PBIS) and collaboration with Child Care Resource and Referral (CCR&R) consultants as well as Iowa HHS child care regulatory staff.

Provided special health care education to support and ensure access for children with health care needs.

Strengthened environmental health practices such as diapering, handwashing, poison prevention, appropriate sanitizing and disinfecting and identifying hazards in child care environments.

Assisted, encouraged and supported current IQ4K providers and those working on a obtaining a rating. CCNCs worked with 817 IQ4K rated programs.

### **Healthy Child Care Iowa Funding SFY24**



From:	Becky Pryor
То:	Kristina Winfield
Subject:	FW: State of Iowa Launches New Behavioral Health and Disability Services Systems
Date:	Tuesday, July 1, 2025 11:42:00 AM

From: State Of Iowa <StateOflowa@public.govdelivery.com>
Sent: Tuesday, July 1, 2025 11:37 AM
To: Becky Pryor <br/>bpryor@jasperia.org>
Subject: State of Iowa Launches New Behavioral Health and Disability Services Systems

[NOTICE: This message originated outside of Jasper County -- DO NOT CLICK on links or open attachments unless you are sure the content is safe.]

### Having trouble viewing? View this as a webpage

HHS GovDelivery Header 2024

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July 1, 2025

### State of Iowa Launches New Behavioral Health and Disability Services Systems

DES MOINES, Iowa — Today, the Iowa Department of Health and Human Services (HHS) launches its newly designed Behavioral Health and Disability Services Systems. Now Iowans, no matter where in the state they live, can access the same sets of mental health, substance use, problem gambling, and disability support services.

### Behavioral Health Service System

Beginning today, lowans without insurance—or with limited coverage—can access care through the new Behavioral Health Service System. To streamline care delivery, the Behavioral Health Administrative Service Organization (BH-ASO), <u>lowa Primary Care Association</u>, will handle administrative tasks, allowing behavioral health providers to focus more on delivering high-quality care.

All lowans can use <u>Your Life lowa</u> for 24/7 support through calls, texts, or online chat. In addition, Your Life lowa will be able to connect lowans to Behavioral Health System Navigators to help connect individuals to services and resources in their communities.

### **Disability Services System**

Coordination of disability services now lives with Iowa's new Disability Access Points (DAPs), which are part of the state's <u>Aging and Disability Resource Center (ADRC) Network</u>. DAPs assist individuals and families by providing information, making referrals, creating service plans, and ensuring ongoing support so Iowans can live healthy, independent lives.

lowa HHS has worked closely with DAPs to ensure a smooth transition and continuity of care for individuals previously served by the Mental Health and Disability Services Regions.

"By redesigning the state's behavioral health system, we ensure that every lowan can access the care they need, regardless of where they enter," said Governor Kim Reynolds. "This approach enables better coordination of care and supports the best possible outcomes for each individual. It's what lowans deserve, and it's what we intend to deliver."

"At Iowa HHS, we've been fully committed to reimagining and transforming our systems to be truly person-centered—and today, we're seeing that vision become a reality," said Iowa HHS Director Kelly Garcia. "Iowans now have easier, more seamless access to the care they need, when and where they need it."

To learn more about Iowa's Behavioral Health Service System visit: hhs.iowa.gov/ibhss

To learn more about Iowa's Disability Service System, visit: <u>hhs.iowa.gov/disability-service-system</u>

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Stay Connected with the <u>lowa Department of Health and Human Ser</u>	vices:
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This email was sent to you by the Iowa Department of Health and Human Services. <u>https://hhs.iowa.gov/</u>

This email was sent to <u>bpryor@jasperia.org</u> using GovDelivery Communications Cloud on behalf of: State of Iowa · 1007 E Grand Ave · Des Moines, IA 50319



### What is a Disability Access Point?

A "Disability Access Points" or "DAPs" are local places that help people with disabilities, their families, and their caregivers find the services and support they need—both short-term and long-term. They are a friendly first stop for finding helpful information and services.

There are 4 agencies designated as DAPs across 7 districts in Iowa. These agencies are part of Iowa's Aging and Disability Resource Center (ADRC) Network.

### What Services are provided by DAPs?

DAPs help people with disabilities and their families find and use the services they need by providing the following services:

- Information & Assistance: DAPs give people, their families, and caregivers important information to help them make informed choices about long-term services and supports (LTSS) by
  - Figuring out what the person needs.
  - Making sure the person knows about services and opportunities.
  - Connecting the person with local providers for the help they need (respite or home modifications).
- Options Counseling: DAPs help people understand their pathways and set goals to make informed choices on their care. The person leads the process, and they can include family members or others they trust. This usually lasts about 90 days.
- Non-Medicaid Short-Term Services and Supports (STSS): These are temporary services that help people with disabilities live in their homes and communities and provide support to their families and caregivers.
- Service Coordination for Non-Medicaid LTSS: This is a process where someone helps the person get and manage their LTSS. The person works with a coordinator to create a care plan, set goals, and choose services to meet those goals.

### Who can I reach out to with concerns after July 1, 2025?

If you have any concerns or experience any issues with your services, you can reach out to your Disability Access Point.



### **District 2**

Dickinson, Emmet, Kossuth, Winnebago, Worth, Clay, Palo Alto, Hancock, Pocahontas, Humboldt, Wright, Sac, Calhoun, Webster

### Lyon Osceola Dickinson Emmet Kossuth Winnebago Worth Mitchell Howard Winneshiek Allamake Palo Alto Clay Sioux O'Brien Hancock Септо Floyd Chickasaw 2 3 Gordo Fayette Clayton Cherokee Pocahontas Humboldt Wright Franklin Plymouth Buena Butler Bremer Vista 1 Black Buchanan Delaware Dubuque Hardin Grundy Sac Calhoun Webster Hamilton Woodbury Ida Hawk Jackson Crawford Carroll Greene Boone Story Marshall Tama Linn Jones Monona Benton 7 Clinton 5 Shelby Audubon Guthrie Dallas Polk Jasper Poweshiek lowa Johnson Cedar Harrison Scott 6 Muscatine Cass Adair Pottawattamie Madison Warren Washington Marion Mahaska Keokuk Louisa 4 Mills Montgomery Union Clarke Wapello Jefferson Adams Lucas Monroe Henry Des Mai Ringgold Fremont Page Taylor Decatur Wayne Appanoose Davis Van Buren Lee

### District 3

Mitchell, Howard, Winneshiek, Allamakee, Cerro Gordo, Floyd, Chickasaw, Fayette, Clayton, Franklin, Butler, Bremer, Hardin, Grundy, Marshall, Tama

### District 7

Black Hawk, Buchanan, Delaware, Dubuque, Linn, Jones, Jackson, Johnson, Cedar, Clinton, Muscatine, Scott, Louisa, Des Moines

### **District 5**

Hamilton, Greene, Boone, Story, Dallas, Polk, Jasper, Madison, Warren, Marion, Clarke, Lucas, Decatur, Wayne

### District 6

Benton, Poweshiek, Iowa, Mahaska, Keokuk, Washington, Monroe, Wapello, Jefferson, Henry, Appanoose, Davis, VanBuren, Lee

### Western Iowa Service Collaborative District 1, 4 712-328-5645 Swatson@pottcounty-ia.gov

District 1

Plymouth,

Lyon, Osceola, Sioux, O'Brien,

Cherokee, Buena

Vista, Woodbury,

Crawford, Carroll,

Shelby, Audubon,

Cass. Adair. Mills.

Taylor, Ringgold

Guthrie, Pottawattamie,

Montgomery, Adams,

Union, Fremont, Page,

Ida, Monona.

Harrison

**District 4** 

### Behavioral Health & Disability Services District 5 515-286-3570 bhds@polkcountyiowa.gov

**Collaborative Individual & Community Supports** District 2, 3, 6 515-513-6870 Info@cicsmhds.org MH/DS of the East Central Region District 7 319-892-5671 admin@ecriowa.org



### Governmental Local Public Health Snapshot

### **Public Health Implementation**

Local boards of health (LBOH) are independent county boards. They have the authority over public health matters in the county and can either directly employ staff or contract with an entity to provide public health activities and direct services.

### **County-Based Agencies**

Local boards of health directly employ staff to provide public health activities and direct services in **65 counties**.

### **Health System-Based Agencies**

Local boards of health contract with hospitals or health systems to provide public health activities and direct services in **30 counties.** 

### **Other Agencies**

Local boards of health contract with other entities to provide public health activities and direct services in **4 counties**.

### **Public Health Workforce**



**1,306** people provided activities and services on behalf of a local board of health



A little more than half of local public health agencies (52) employ less than 10 people

The majority of the public health workforce consists of administration and leadership, nurses, licensed practical nurses (LPNs), home health aides, environmental health specialists, health educators, and community health workers.

### Local Investment

Approximately **\$40 million** was invested by boards of supervisors (BOS) in state fiscal year 24 (SFY24) to support population health (public health services) and non-population health (direct services).

### **Leadership Experience**

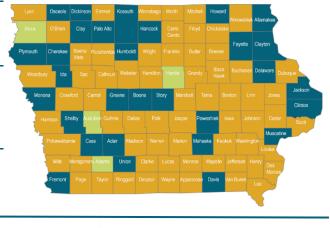


In SFY24, 522 volunteer members served on a local board of health

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Half (50%) of LBOH members have served less than 5 years.

In just the past 6 years, **almost two-thirds (62%)** of local public health agencies have **experienced a turnover in their administrator. Twenty-two** of the 62 agencies had a change in administrator **two or more times.** 



### **Delivery of Activities and Services**



**100%** of counties provided Emergency Preparedness and Response

99%

of counties provided

Disease Follow-up.

Surveillance, and Control



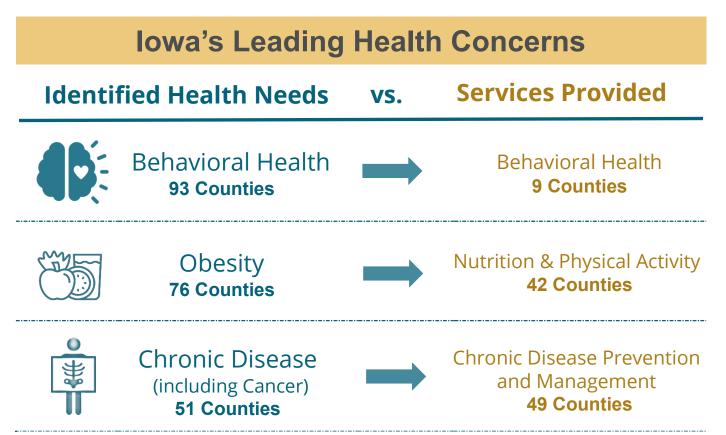
**97%** of counties provided Immunization and Tuberculosis

97%



of counties provided Public Information, Health Education, and Community Engagement

Although these four public health services are extremely important to the health of a community, the majority of public health activities associated within these four services do not directly address lowa's leading health concerns.



In their community health needs assessment, counties identify their top health needs for their county. However, most local public health agencies are not providing services to address those needs.

Sources: Iowa Local Governmental Public Health System: Results of the 2024 Local Public Health Systems Survey (self-reported data from Iowa's local public health agencies); Community Health Improvement Plans submitted to Iowa HHS in November 2023

315 W 3<sup>rd</sup> St N, Suite 100, Newton, Iowa 50208

# ANNUAL REPORT





# JASPER CO. HEALTH DEPT. ABLEOF CONTENTS

- Mission & Vision
- Board of Health
- Jasper County Community Health Improvement
- Jasper County Cares
   Coalition
- Public Health Emergency
   Preparedness
- Immunizations and Communicable Disease
- Public Relations
- Finances



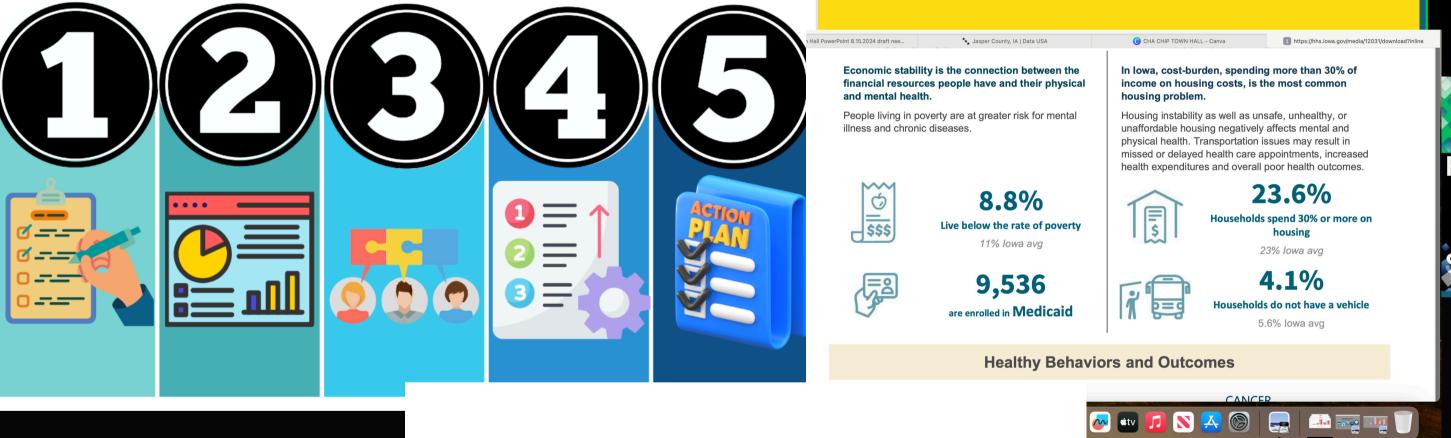


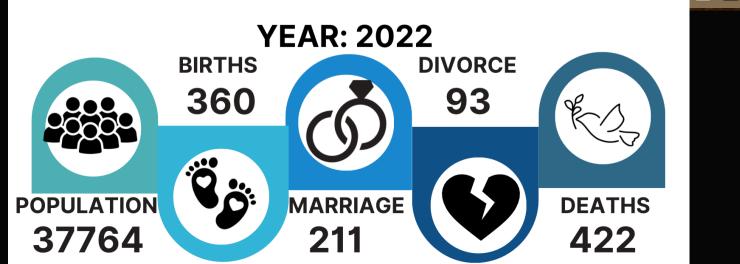
# COMMUNITY HEALTH IMPROVEMENT PLAN





# **JASPER CO. HEALTH DEPT.** COMMUNITY HEALTH **IMPROVEMENT PLAN**









JASPER COUNTY FFORDABLE HOUSING CARES SUBGROUP

### Wednesday, March 19, 2025 9 AM





Location: Jasper Co. Office Building-Large Conference Room, Before the Jasper County Cares Meeting

Jasper County Cares Coalition March 18 · 🚱

purce Guide. Check out new resources from Child Care Resource & Referral of Central Iowa e of Iowa, WAGE\$, TEACH and many more. Whether you know a child eds childcare or you want to be a childcare provider, there are num available including financial assistance, scholarships, WAGE\$ salary supplement program. vith starting a child care business or expa



# JASPER CO. HEALTH DEPT. **COMMUNITY HEALTH IMPROVEMENT PLAN**

### 1. Access to Medical Care

- 1. Workforce Shortage
- 2. Transportation
- 3. Lack of Ins./ Medicaid
- 4. Dental Care
- 5. Lack of Preventive
- 6. Medications
- 7. Lack of Quality
- 8. Home Care/Hospice
- 9. Hospital
- 10. Emergency Care
- 11. Specialty Care
- 12. Prenatal&postpartum
- 13. Long Term Care,
- Adult Day, Assisted living
- 14. Other:

2. Mental Health/Disorders, Substance, Alcohol, Tobacco, Addictive Disorders

- 1. Workforce Shortage 2. Crisis Intervention 3. Suicide 4. Drug overdoses 5. Prevention 6. Schools & kids 7. Treatment & Inpatient 8. Binge Drinking 9. Alcohol-impaired driving deaths 10. Jail & legal issues 11. Low reimbursement 12. Stigma 13. Support Systems/Peer
- 14. Other:

### **3. Active Living** & Healthy Eating, Lifestyle

1. Environment 2. Wellness Programs 3. Physical Activity 4. Prevention Chronic Disease/Cancer 5. Obesity 6. Food Insecurities 7. Fall Prevention 8. Socialization 9. Independent Aging 10. Sexual Health 11. Premature death 12. Breastfeeding 13. Stress

### 4. Social, Economic, & Environmental

- 1. Workforce Shortage
- 2. Lack of Job Training
- 3. Unaffordable Housing or Homeless
- 4. Lack of basic needs, food, utilities, clothes,
- transportation
- 5. Violence, Abuse
- 6. Injury Prevention
- 7. Childcare
- 8. Parenting
- 9. Education/College
- 10. Health Equity
- 11. Economic Instability
- 12. Vulnerable Population
- 13. Lack of Resources
- 14. Other:

# COMMUNITY HEALTH IMPROVEMENT PLAN

### **6 SIGNS OF A FENTANYL OVERDOSE**

Call 911 immediately if a person exhibits ANY of the following symptoms:

NATIONAL FENTA AWARENESS DAY

Their face is extremely pale and/or feels clammy to the touch

Their body goes limp

Their fingernails or lips have a purple or blue color

They start vomiting or making gurgling noises

They cannot be awakened or are unable to speak

Their breathing or heartbeat slows or stops

## Substance

Misuse

Mental Health

### **Opioid Settlement**









### **State System**









### Jasper County **Cares Coalition**

Meeting Dates (2nd Wednesday)

/11/h

May 14 Sep 10 Jun 11 Oct 8 July 9 Nov 12 Aug 13 Dec 10

Contact: jaspercocares@jasperia.org Jasper Co. Office Building, Large Conference Room 315 W. 3rd St N. Newton, IA 50208

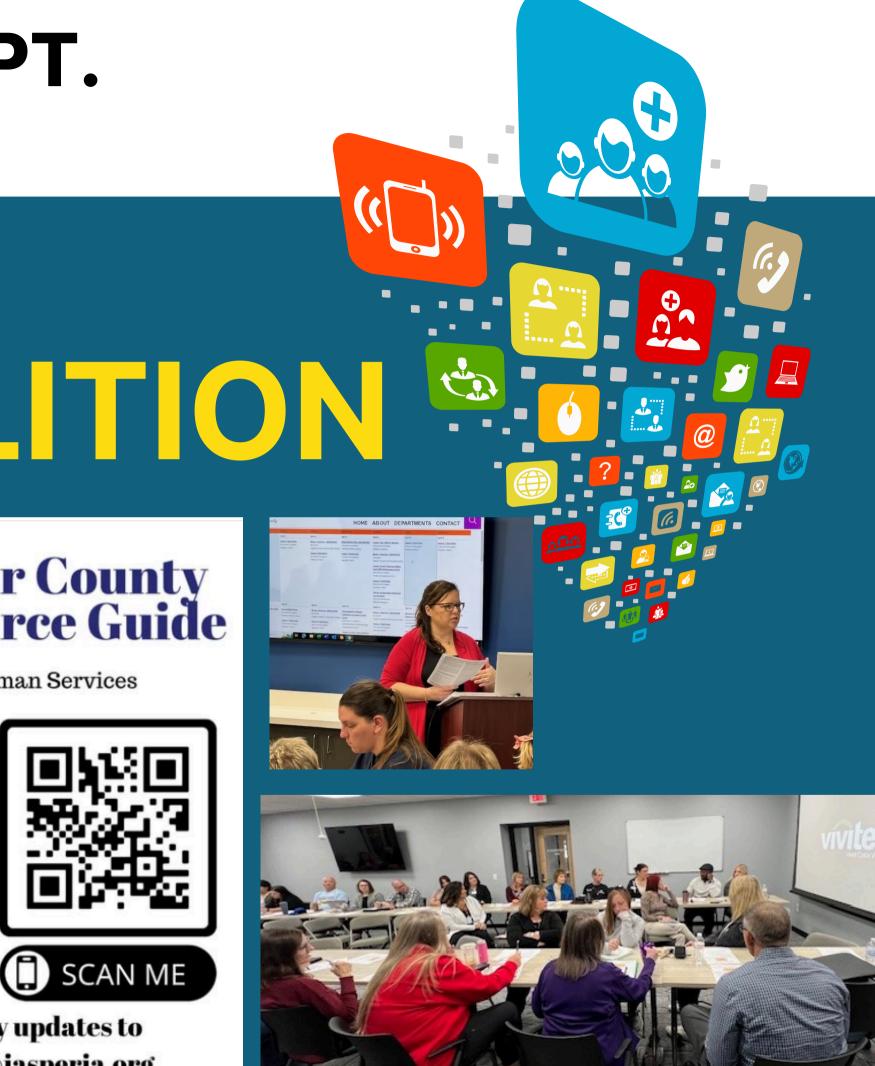
# JASPER CO. CARES COALTION



Jasper County Resource Guide

Health and Human Services





Please send any updates to jaspercocares@jasperia.org

# JASPER CO. CARES COALTION

9=meetings 447=Total Attendance 50= Average Attendance





# PUBLIC HEALTH **EMERGENCY PREPAREDNESS**

### JASPER COUNTY NEWS



Lisa Goldsworthy, with Iowa HHS teaching the table. This tabletop exercise bridges the gap between discussion and operational exercise for PODs.

# And Prompting

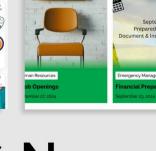
• JOB OPENINGS

• BUDGET INFO • NEWSLETTERS

• AGENDAS/MINUTES

• ROAD INFO/ALERTS • COMMUNITY EVENTS







WWW JASDEDIA ODC



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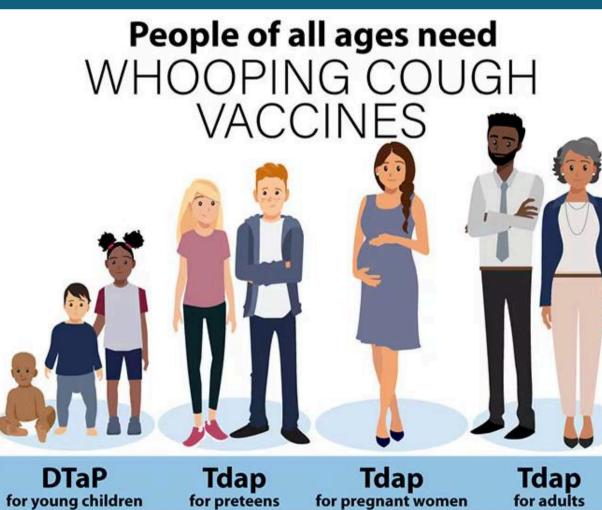
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DRIVER'S LICENSE





# IMMUNIZATION & COMMUNICABLE DISEASE





2, 4, and 6 months
15 through 18 months
4 through 6 years

for preteens ✓ 11 through 12 years

✓ During the 27-36th week of each pregnancy for adults ✓ Anytime for those who have never received it

### Measles is one of the most contagious disease in the world.

If 1 person has measles, 9 out of 10 people around that person will become infected if they are not protected.



# INNUNZATON & COMMUNICABLE DISEASE

### IT'S NOT TOO EARLY TO BE THINKING ABOUT BACK TO SCHOOL IMMUNIZATIONS.

Call your doctor now to schedule an appointment before school begins.

Kindergarten,7<sup>th</sup> grade, and 12<sup>th</sup> grade students have required immunizations before starting the school year.

### **BACK TO SCHOOL IMMUNIZATION CLINC**

Friday, August 16th 9am-3pm **Jasper County Health Department** 315 W 3rd St N Suite 100 Newton, IA 641-787-9224

Please call to schedule an appointment, walk-ins will be welcomed.

Immunization Clinic for VFC eligible children. Medicaid enrolled, no insurance, underinsured, American Indian or Alaskan Native, age 18 years or younger.



# 217 = Given 5380 = school audits 806 = daycare audits



# JASPER CO. HEALTH DEPT. COMMUNICABLE DISEASE

78= Cases 239= Visits 677= days of meds



# PUBLIC RELATIONS







### Child Abuse Prevention Hey Jasper County

### Wear Blue April 4, 2025









### Share your picture belo



JASPER COUNTY

### <u>National</u> <u>Wear Red Day</u>

Feb 07, 2025

For every woman, every heart, everywhere.

> Let's Fight I Diseas

### JASPER CO. HEALTH DEPT.







### **JASPER CO. HEALTH DEPT. PR**

10542: Outreach 51: Car seats Instagram-2061, 520 followers Facebook: 425,324; 5788 followers Media: 89; 1,335,000 Website reach: 13334 Referrals: 1455 Totals: 1,787,716 times





### **ENVIRONMENTAL** & HOMEMAKER



### JASPER CO. HEALTH DEPT.

## ENVIRONMENTAL

Septic: 66 Time of Transfer: 34 New Wells: 7 Plugged Wells: 23 Water Test: 27 Pool/Spa: 17 Tattoo: 13 Tanning: 11 Septic Tank Pumper Inspections: 5 **Rabies/Dog Bites: 9** Radon Kits: 4 Other: 28

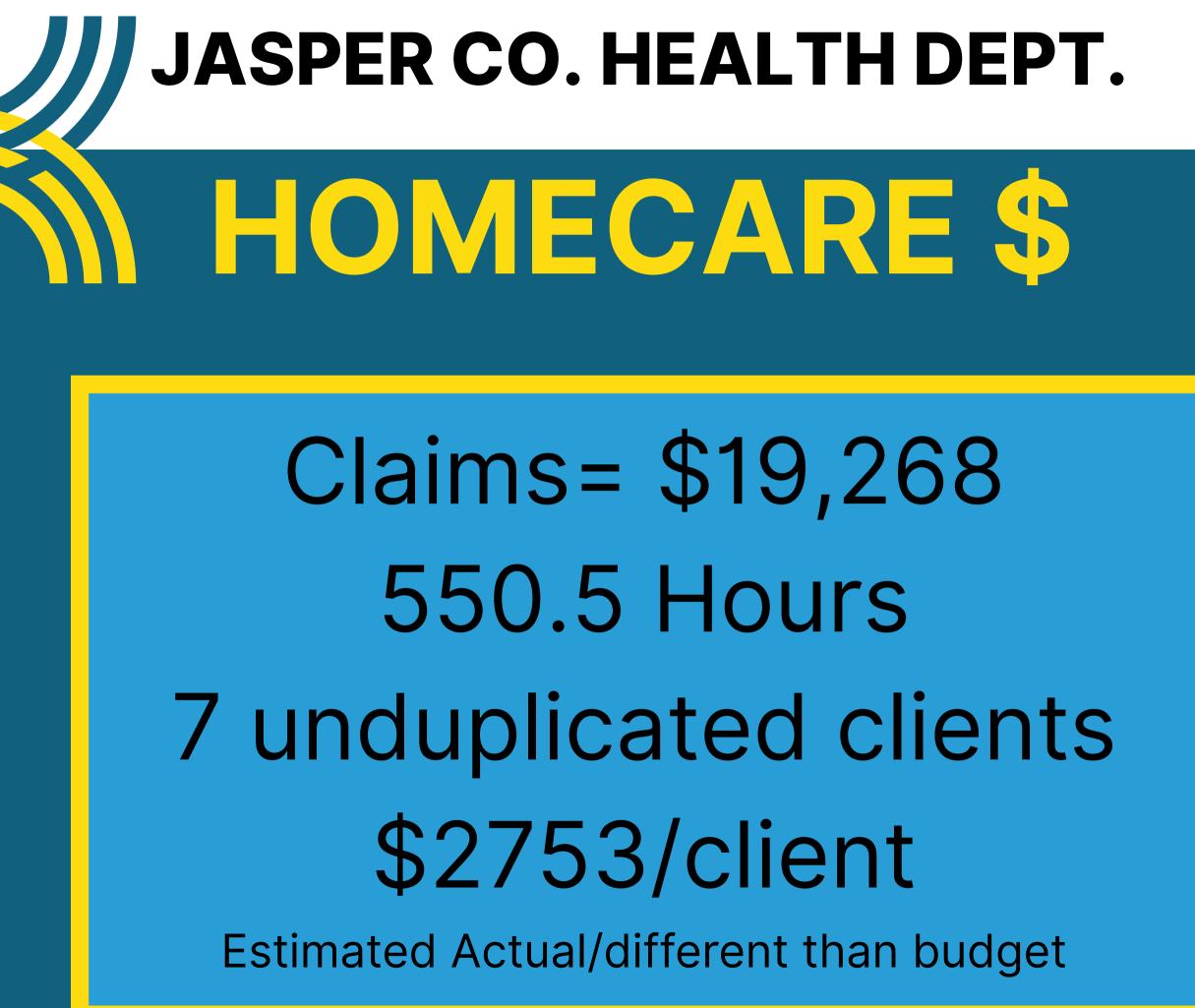
### **Total 244**



## JJASPER CO. HEALTH DEPT. ENVIRONMENTAL

Goals FY26: Hire staff Train staff Change in the stray dog policy







## **WJASPER CO. HEALTH DEPT.**

### **FINANCES**

### Budget FY25: Actual Budget Expenses: \$390057 \$437840 Revenue: \$147471 \$143541

Based on 6/30/25 reports.



## JASPER CO. HEALTH DEPT. FINANCES

### **Grants billed**

Local PH Services: \$86940 Emergency Prep PH: \$31142 Immunizations: \$11200 Other: \$9711 Total billed: \$138,993





### JASPER CO. HEALTH DEPT.

## **FINANCES**

### Expenses:

- Salary/fringe: \$339026- 87%
- Home Care: \$19836- 5%
- Grants: \$19687-5%
- Other: \$11508-3%





## **JASPER CO. HEALTH DEPT.**

FY25 STRATEGIC PLAN GOALS MET



### Jasper County Health Department

GOALS FY25: Strategic Planning

#### State IHHS

<ul> <li>Monitor the lowa Health and Human Services changes in public h</li> </ul>	ealth.
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#### Emergency Preparedness

- Clean out Emergency Preparedness Trailer. Clean, seal, & cots and linens in trailer. Done 7/2024, finish 9/4/2024
- Inventory PPE para levels and distribution of excess. Yearly inventory in Salamander. Done 9/2024.
- Update Emergency Plans (PHERP) as changes happen. HVA complete 7/10/2024. Media plan 8/2024, updated 9/2024.
- Monthly radio test, communication drills, meetings, and training.
- Regular PHEP billing and tasks on time. Approvals for Zoom and Salamander 7/2024. Billed July and Aug.
- Help with FEMA post flooding 7/2024, meeting. Complete.
- Stop the Bleed project with schools and government. Kits and training.

### Community Health Assessment and Health Improvement Plan - New FY25

- Survey results from May 2024. Secondary Date complete. Townhall meeting on 9/11/2024. Complete
- CHA report.
- Establish a Health Improvement for 2025-2028.

### Immunizations/clinic

- School & daycare immunization audits: September 2024 school & January 2025 daycares. Scheduled schools starting 9/18
- Plan flu clinic and annual blood draws for Jasper County employees. Scheduled 10/2 and 10/31/2024.
- Back to school immunization clinic on 8/16/2024. Complete.
- Improve Immunization rates from previous year. In progress
- Explore new Vaccine for Adult (VFA). Meeting 9/5/2024. In progress.
- Fix the refrigerator at EOC. 8/2024.Complete.
- Complete timely the immunization contract, reports, quality, records, VFC reenrollment 7/15/2024, VFA funds, etc. Complete

### Communicable Disease

- Use video direct observation for TB clients. In progress, still 11/2024
- Complete investigations in a timely manner.
- Community education on disease prevention and public health concerns.

### Jasper County Cares Coalition

- Plan meetings for year. Coordinate agendas, packets, and spotlight agencies.
- Update resource guide, Facebook, and contact list.
- CPPC- Red Ribbon Week, Child Abuse Prevention, Car Seat Event, Trick or Treat bags, Foster Care outreach, Event, Kids Day YMCA, books. Attend meetings. First meeting 7/2024. New contact Meredith.

### Public Relations-

- Regular social media posts.
- Attend health fairs. Plan spring 2025
- Answer and return phone calls and emails.

### Financials/Grants

- Monitor budgets for current FY25 and planning for FY26.
- Regular billing and auditing of grants.
- Audit all revenue and expenses monthly and yearly. Complete 7/2024. State Auditors 7/2024.
- Local Public Health Services: contract, billing, reports, requirements. Up to date. Reports due January and July.
- Evaluate Environmental Health subcontract and grants. New Environmental Health subcontract 9/12/2024.

### Administrative & Board of Health

- Annual employee evaluations in Spring of 2025.
- Annual report complete FY24. 9/12/2024
- 6 Board of Health meetings per contract year- July, Sep, Nov, Jan, Mar, May.
- Employee update CEU including, but not limited to, CPR, Bloodborne pathogen, Mandatory reporter, VFC required education nursing license education. Other: drivers license and insurance. Kristina complete Mandatory reporter on 9.4.2024
- Employee handbook review with BOH and employees 7/2024. Complete
- Evaluate and audit home care reimbursement program.
- FY26 Union negotiations and pay scales for FY26.

### JASPER CO. HEALTH DEPT.



## JASPER CO. HEALTH DEPT.

### FY26 STRATEGIC PLAN



### /// JASPER CO. HEALTH DEPT.

### Jasper County Health Department: Strategic Planning FY26 7.2.2025

The following should be complete by the Jasper County Health Department by 6/30/2026.

- 1. State IHHS, Administrator will:
  - a. Monitor the Iowa Health and Human Services changes in public health.
  - b. Attends pertain meetings.
  - c. Update the Board of Health.
- 2. Emergency Preparedness, Administrator will:
  - Update Emergency Plans (PHERP).
  - b. Ensure Monthly radio test, communication drills, meetings, and trainings complete.
  - c. Complete billing monthly.
- Community Health Improvement Plan, Administrator will:
  - a. Oversee the Jasper County Health Improvement Plan goals and update.
  - b. Oversees subgroup meetings.
    - i. Opioid Settlement Committee, Administrator will:
      - Serve on committee
      - Evaluate needs of community and make suggestions to Committee.
      - Ensure reports are complete quarterly, along with tracking funding and state reports.
- 4. Jasper County Cares Coalition, Administrator will:
  - Coordinate meetings and attendees, along with facilitate the meeting.
  - b. Update resource guide, Facebook, and contact list.
  - c. Complete activities as CPPC and Decat funding is available.
- 5. Immunization Program, Public Health Nurse will:
  - a. School & daycare immunization audits
  - b. Plan flu clinic and annual blood draws for Jasper County employees
  - c. Host Back to School Immunization Clinic and accommodate those in need of immunizations.
  - d. Work to improve Immunization rates
  - e. Coordinate Vaccine for Adult and Vaccine for Children programs
- 6. Communicable Disease, Public Health Nurse will:
  - a. Complete investigations in a timely manner
  - b. Keep up with current epidemiology.
  - Complete training on state IDSS 2.0 system

## $\mathbf{FY25}$ Par

### JASPER CO.HEALTH DEPT

- wernprese starting an exact in a a start operation 7. Public Relations, Administrator will oversee:
  - Regular social media posts.
  - b. Participate in health fairs.
  - c. Welcoming new health and human service staff to Jasper County.
  - d. Keep website updated.
  - e. Update Jasper County Resource Guide
- Financial Management, Administrator will:
  - a. Monitor and comply with budget protocols,
  - b. Regular billing and auditing of grants.
  - c. Audit all revenue and expenses monthly and yearly.
  - Evaluate IHHS grants and other funding sources.
  - e. Coordinate with Environmental Health programs.
- Administrative & Board of Health, Administrator will: 9.
  - Complete biannual employee evaluations starting October 2025.
  - b. Complete annual report and strategic plan each fiscal year.
  - c. Organize at least 6 Board of Health meetings per contract year- July, Sep, Nov, Jan, Mar, May.
  - d. Ensure employee updates CEU including, but not limited to, CPR, Bloodborne pathogen, Mandatory reporter, VFC required education, nursing license education. Other: drivers license and insurance.
  - e. Evaluate and audit home care reimbursement program.

Note: The Administrator may delegate duties to Public Health Nurse or Assistant.



### JASPER CO. HEALTH DEPT.

# Questions? Thank You



#### Jasper County Health Department: Strategic Planning FY26 7.2.2025

The following should be complete by the Jasper County Health Department by 6/30/2026.

- 1. State IHHS, Administrator will:
  - a. Monitor the Iowa Health and Human Services changes in public health.
  - b. Attends pertain meetings.
  - c. Update the Board of Health.
- 2. Emergency Preparedness, Administrator will:
  - a. Update Emergency Plans (PHERP).
  - b. Ensure Monthly radio test, communication drills, meetings, and trainings complete.
  - c. Complete billing monthly.
- 3. Community Health Improvement Plan, Administrator will:
  - a. Oversee the Jasper County Health Improvement Plan goals and update.
  - b. Oversees subgroup meetings.
    - i. Opioid Settlement Committee, Administrator will:
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  - b. Keep up with current epidemiology.
  - c. Complete training on state IDSS 2.0 system
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  - a. Regular social media posts.
  - b. Participate in health fairs.
  - c. Welcoming new health and human service staff to Jasper County.
  - d. Keep website updated.
  - e. Update Jasper County Resource Guide
- 8. Financial Management, Administrator will:
  - a. Monitor and comply with budget protocols,
  - b. Regular billing and auditing of grants.
  - c. Audit all revenue and expenses monthly and yearly.
  - d. Evaluate IHHS grants and other funding sources.
  - e. Coordinate with Environmental Health programs.
- 9. Administrative & Board of Health, Administrator will:
  - a. Complete biannual employee evaluations starting October 2025.
  - b. Complete annual report and strategic plan each fiscal year.
  - c. Organize at least 6 Board of Health meetings per contract year- July, Sep, Nov, Jan, Mar, May.
  - d. Ensure employee updates CEU including, but not limited to, CPR, Bloodborne pathogen, Mandatory reporter, VFC required education, nursing license education. Other: drivers license and insurance.
  - e. Evaluate and audit home care reimbursement program.

Note: The Administrator may delegate duties to Public Health Nurse or Assistant.



### FY25 LPHS - End of Year Progress Report

Thank you for completing the End of Year LPHS Progress Report!

This form serves as the End of Year Report for the FY2025 Local Public Health Services Contract. This report collects information on your population health activities in Leadership & Governance, Health Promotion, and Strengthening PH Infrastructure along with nonpopulation health direct services.

#### Instructions:

- Review and complete all fields in this report.
- Save and return to the report anytime by clicking the save button at the bottom right. A pop-up box will appear with a unique link to re-access the report that can be copied or emailed. This link is needed to re-access the report.
- Hit the submit button on the bottom to submit. A confirmation email will be sent to the address provided in the email field of the report.

### **Contact Information**

Name of Person Completing this Form:

**Becky Pryor** 

Phone NumberEmail6417879224bpryor@jasperia.orgCountyHealth Department NameJasperJasper County Health Department

Leadership & Governance

1. What public health approach did your agency use when engaging with your Board of Health or other local policymakers on a policy, plan, or law?

Jasper County Health Department utilized a community-centered, evidence-based public health approach when engaging with the Jasper County Board of Health regarding the Jasper County Community Health Assessment Report and Improvement Plan. This approach emphasized collaboration, transparency, and data-driven decision-making to identify and prioritize the county's most pressing health needs.

The Community Health Assessment (CHA) and Improvement Plan were developed through a comprehensive process involving data analysis, community surveys, and stakeholder engagement. These findings and strategic goals were then formally presented to the Jasper County Board of Health at their January 9, 2025, meeting. During this session, board members reviewed the report's key priorities, including mental health services, substance misuse, lack of healthcare professionals, community services for food insecurity, transportation, childcare, and housing. The plan was approved with full support from the Board of Health, which helped ensure alignment with local initiatives and provided a foundation for future funding and program development.

This process exemplifies how public health agencies can use a structured assessment and improvement planning process to inform, educate, and build consensus among local policymakers.

### 2. Which partners were involved in the development, discussion, or implementation of the policy, plan, or law?

We collaborated with MercyOne Newton to conduct the Community Health Assessment. In addition, numerous community partners and residents were actively involved throughout the process. A key contributor was the Jasper County Cares Coalition, a diverse group comprising over 200 individuals representing sectors such as healthcare, education, human services, faith-based organizations, law enforcement, nonprofits, government agencies, and the broader community. Their input was instrumental in shaping the assessment through survey responses, discussions, and shared expertise.

3. How was data utilized to inform or support the public health approach? Please cite your Data Source and Value. Data can be Qualitative or Quantitative from local, state, or other trusted sources.

Multiple data sources were used to inform and guide our public health approach. One key resource was the Health and Human Services (HHS) Snapshot system, which provided a comprehensive overview of health indicators in Jasper County. This data, along with information gathered from community surveys and local health records, helped identify priority health issues, guide decision-making, and shape the strategies outlined in the Community Health Assessment and Improvement Plan.

4. What actions did your agency take as part of this engagement, what steps were implemented, and how is impact being measured or evaluated?

The Jasper County Board of Health approved the Community Health Improvement Plan. The plan was established, published, and shared with the community and Jasper County Cares. It will be evaluated on a semi-annual basis by monitoring action items included in the Jasper County CHIP.

Upload any supporting documents to highlight this population health work.



5. Is there any technical assistance you need to support this Leadership & Governance effort from the Local Public Health Performance team? No

### **Health Promotion**

1. What public health issue or objective did your agency focus on, and how did you use a public health approach to address it?

The Jasper County Board of Health approved the Community Health Improvement Plan. The plan was established, published, and shared with the community and Jasper County Cares. It will be evaluated on a semi-annual basis by monitoring action items included in the Jasper County CHIP.

2. Which partners did your agency work with to develop and carry out the health education or promotion strategy?

Partners included all agencies in Jasper County Cares Coalition (222 people are on the distribution list) and Leadership committee, Jasper County Department Heads and Elected Officials, coalition members, mayors, churches, schools, libraries, Newton YMCA, Senior Health committee, Habitat for Humanities, Capstone Behavioral Health, Discover Hope 517, and partner agencies.

3. What specific data did you use to guide your approach, and how did it support your strategy? Please cite your Data Source and Value. Data can be Qualitative or Quantitative from local, state, or other trusted sources.

Data included population in each zip code, number of students in each school district with our immunization audit data, the number of people served by certain organizations such as Capstone Behavioral Health, the number of people engaging in our website, social media, and attending the Jasper County Cares meeting.

4. What actions did your agency and partners take to implement the strategy, what was done to reach the target population, and how is impact being measured or evaluated?

We look at data from the Community Health Assessment survey for the needs in the community.

Upload any supporting documents to highlight this population health work.



5. Is there any technical assistance you need to support this Health Promotion effort from the Local Public Health Performance team?

No

### **Strengthen Public Health Infrastructure**

1. What public health approach did your agency use to create and maintain partnerships aimed at protecting and improving community health?

We continue to work with the Jasper County Cares Coalition to build partnerships. The group puts the community health plan in action.

### 2. Which partners did your agency involve in this work?

We have a list with over 200 community partners, including health, human services, schools, law enforcement, mental health, substance abuse, churches, food, transportation, housing, and supporting agencies

3. What data did your agency use to guide or support the partnership efforts, and how was it applied? Please cite your Data Source and Value. Data can be Qualitative or Quantitative from local, state, or other trusted sources.

We use our community health survey data and assessment to work on subgroups such as transportation, housing, child care, mental health, etc ..

4. What steps did your agency and partners take to build and sustain these partnerships, and how are you measuring or evaluating their impact?

We make welcome packets, send agendas, and allow everyone's voices to be heard. We evaluate by attendance numbers, surveys, and Mentimeter presentations.

Upload any supporting documents to highlight this population health work.



5. Is there any technical assistance you need to support your Strengthening Public Health Infrastructure effort from the Local Public Health Performance team? No

### **Non-Population Health Activities**

These are activities that are direct care to an individual.

1. Did you use these contract dollars for non-population health activities?

No

### Feedback

### Feedback

This progress report format made it easy for me to clearly communicate my progress.	Strongly Agree
The shortened response fields in this format provided enough space for me to share the necessary information.	Strongly Agree



KIM REYNOLDS, GOVERNOR CHRIS COURNOYER, Lt GOVERNOR

#### 28E-2023-PTT-04

#### **BETWEEN THE**

#### IOWA DEPARTMENT OF INSPECTIONS, APPEALS & LICENSING

#### AND

#### XXX FILL IN LOCAL DEPARTMENT XXX

This Agreement is made and entered into by and between XXX Fill in Health Department XXX, hereinafter called the BOARD, and the Iowa Department of Inspections, Appeals, & Licensing, hereinafter called DEPARTMENT pursuant to Iowa Code Sections 10A.531(7) and 135I.4(6).

PURPOSE: It is the mutual desire of the EOAL(D and the D= $P_{\rm c}$ /R M=NT to assure the health and safety of the public by providing effective environmental health services. This Agreement delegates the DEPARTMENT'S inspection and enforcement authority with respect to swimming pool and spa facilities and tattoo establishments to the BOARD.

- I. The term of this Agreement shall be from July 1, 2025, to June 30, 2028.
- **II.** The BOARD certifies that it is a local board of health pursuant to Iowa Code Chapter 135. The requirement that the BOARD is a local board of health pursuant to Iowa Code Chapter 135 is a material term of this Agreement.
- III. Agreement Administrators

Joe Mullen, Division Administrator, Building and Construction Division, is the Authorized State Official for this agreement. The Authorized State Official must approve any changes in the terms, conditions, or amounts specified in this Agreement. Questions regarding the implementation of this Agreement should be referred to Kane Young at telephone (515) 724-3216 or Kane.Young@dia.iowa.gov.

Pursuant to Section III.B.IX, and as newly emphasized by DIAL, the responsibility for initiating enforcement actions shall rest primarily with the BOARD. While this obligation was previously acknowledged, it is now formally underscored and mandatory. The BOARD is hereby required to execute all enforcement measures in accordance with the provisions set forth. Notwithstanding the foregoing, the Department retains exclusive authority to issue, approve, suspend, or revoke permits as deemed appropriate.

The current Pool and Spa rules are located in IAC 641 Chapter 15. It is understood between the DEPARTMENT and the BOARD that during this Agreement cycle the Pool and Spa rules will be moved to IAC 481, and chapter to be determined. The Department will email the BOARD a copy of the new Pool and Spa rules when they are made available.



LARRY JOHNSON, JR., DIRECTOR

KIM REYNOLDS, GOVERNOR CHRIS COURNOYER, Lt GOVERNOR

> Xxx Fill in contract admin XXX has been designated by the BOARD to act as the Agreement Administrator. This individual is responsible for financial and administrative matters of this Agreement.

Name	
Business Name	
Street Address	
City, State, Zip	
Telephone Number	
Email	TEMPLATE

#### IV. General Provisions

- A. The DEPARTMENT agrees to:
  - I. Provide technical essistance, rule interpretation and clarifications, engineering support, notice of new facility inspections, and registration, permitting, and licensing information to the BOARD on matters related to the swimming pool and spa program and the tattoo program.
  - II. Provide and maintain a star dard inspect on form for inspection programs to be used by the BOARD.
  - III. Provide and maintain an annual report form to be completed by the BOARD.
  - IV. Develop and provide at a minitation on a annual training for new and existing inspectors regarding the swimming pool, spa, and tattoo programs.
  - V. Coordinate training for new inspectors.
  - VI. Delegate enforcement activities to the BOARD unless:
    - 1. The BOARD specifically requests the DEPARTMENT'S involvement after the BOARD has completed the steps outlined in IAC 641 Chapter 15.6(2) a & b or IAC 481 Chapter 492.16(2).
    - 2. The BOARD actions are determined by the DEPARTMENT to be inappropriate, untimely, or inadequate.
    - 3. The statute or rules require enforcement action to be taken by the DEPARTMENT.
  - VII. Provide confidentiality training for BOARD staff.

B. The BOARD agrees to:

- I. Provide the services outlined in this agreement in the following geographic area(s): COUNTIES
- II. Provide consultation and information to the swimming pool and spa facilities and tattoo facilities & artists to eliminate or minimize potential health and safety problems.

KIM REYNOLDS, GOVERNOR CHRIS COURNOYER, Lt GOVERNOR

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- III. Employ adequate personnel to perform inspection services outlined in this Agreement. Adequate personnel is defined by:
  - 1. Registered Environmental Health Specialist/Registered Sanitarian (REHS/RS) in good standing with the National Environmental Health Association, or
  - 2. Education consistent with the requirements of the REHS/RS, or
  - 3. Graduated from a recognized two year college program in an environmental health field, or
  - 4. Graduated from a standard four-year high school, and has a minimum of two years' work experience in one or more of the fields of environmental health. Provide documentation of meeting this requirement upon request from the
  - DEPARTMENT.
- IV. Provide a list of employees and their contact information providing inspection services under this Agreement. The BOARD will notify the DEPARTMENT within 30 days of personnel changes or changes to their contact information.
- V. Ensure employees providing inspection services outlined in this Agreement obtain a minimum of twe weilight our of continuing education per year. The continuing education must be training that has been approved for credit by the lowa Environmental Health Association's Environmental Health Registry. The BOARD shall provide evidence of meeting this requirement upon request from the DEPARTMENT.
- VI. Verify that all inspectors review the applicable lowa Codes, Administrative Codes, and this Agreement on an about basis.
- VII. Use an inspection form provided by the DEPARTMENT in conducting all inspections pursuant to this Agreement. The BOARD may use an alternative form; however, the alternative form shall at a minimum contain the items included on the DEPARTMENT'S form. The DEPARTMENT may request to review the alternative form and may require revisions to De riace
- VIII. Ensure that inspected facilities are currently registered or permitted.
  - 1. Facilities must have permits visible on the premises, and confirmation through the public portal must e so be completed to avoid forgeries. Please note that the DEPARTMENT will be moving to a new licensing system in the middle of this Agreement. Updates will be given when available.
  - 2. https://amanda-portal.idph.state.ia.us/adpereh/portal/#/public/public-search
- IX. Conduct all enforcement actions prior to requesting the DEPARTMENT to carry out final action. Enforcement activities may include but are not limited to, activities outlined in IAC 641 Chapter 15.6(2) and IAC 481 Chapter 492.16(2), requiring facilities to order necessary Cease & Desist orders, shut down facilities for health violations, complete Corrective Action Plans, following up on Corrective Action Plans, special inspections, adopting local ordinances, requesting city or county attorney's assistance, testifying at enforcement hearings, preparing a timeline or communication log of activities that have occurred between the inspection agency and the facility.
- X. Submit requests for waivers that the BOARD receives from the facilities to the DEPARTMENT within 15 days of its receipt. The submission shall also include the BOARD or inspector's written recommendations with the request for waiver for consideration by the DEPARTMENT.
- XI. At the request of the DEPARTMENT, the BOARD will submit an annual report on a form provided by the DEPARTMENT. At a minimum, the report will include:

KIM REYNOLDS, GOVERNOR CHRIS COURNOYER, Lt GOVERNOR

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LARRY JOHNSON, JR., DIRECTOR

- 1. The total number of routine inspections, special inspections, and reasons for closure of swimming pools and tattoo establishments.
- 2. Latitude and longitude location information for each swimming pool in the jurisdiction on a form provided by the DEPARTMENT.
- 3. Copies of minutes showing annual reports made during local board of health meetings
- XII. Link with the local board of health for each jurisdiction where services are provided to assist the local board of health in performing its roles and responsibilities as defined in 641 IAC-77.3. The BOARD shall provide a report to each local board of health in each county outlined in IV. B. I at least annually.
- XIII. Maintain accurate, current, and complete records of all activities related to this agreement for a period of five years.
- XIV. Allow the DEPARTMENT to monitor the BOARD's performance through site visits, reports, or other means deemed necessary by the Department. The BOARD agrees that the DEPARTMENT may conduct site visits to review Agreement compliance, assess management controls, as less relevant services and activities, and provide technical assistance. The BOARD agrees to ensure the cooperation of the BOARD's employees, agents, and board members in such efforts and provide all requested information to the DEPARTMENT in the manner determined by the DEPARTMENT. Following each site visit or review of the requested information, the DEPARTMENT may submit a written report to the BOARD vultich identifies the findings // Corrective Action Plan with a timetable to address any deficiencies or problems noted in the report may be requested. The Corrective Action Plan shall be submitted to the DEPARTMENT for approval within the timelines outlined in the written report. The BOARD agrees to implement the plan after it is approved by the DEPARTMENT. Failure to do so may result in suspension or termination of the Agreement.
- XV. Comply with the considentiality requirements provided by the DEPARTMENT and contained within Iowa Code Chapter 492, 139A, 141A, and other relevant provisions of state law.
- XVI. Ensure that all staff who interact with inspections or investigations files pertaining to this agreement participate in confidentiality training as provided by the DEPARTMENT.
- XVII. Pursuant to IAC 481 Ch 492, the BOARD will retain tattoo inspection reports for at least 3 years.
- V. For the Swimming Pool and Spa Program
  - A. The DEPARTMENT agrees to:
    - I. Register swimming pools and spas pursuant to Iowa Code Chapter 135I and 641 IAC Chapter 15, maintain a registration database, and distribute to the BOARD information on currently registered swimming pools, water slides, and spas.
    - II. Conduct plan review and perform on-site inspections of new construction or substantial reconstruction. The DEPARTMENT will attempt to notify the BOARD when on-site inspections are conducted in an attempt to include the local agency on the inspection.
    - III. Provide facility status updates to local inspectors.
  - B. The BOARD agrees to:
    - I. Employ adequate personnel to perform swimming pool and spa program services outlined in Section (B)III, in this Agreement. In addition, the personnel performing

KIM REYNOLDS, GOVERNOR CHRIS COURNOYER, Lt GOVERNOR LARRY JOHNSON, JR., DIRECTOR

swimming pool and spa program services must have a current Certified Pool Operator (CPO), AFO, PPSO, or LAFT certificate and meet the education requirements of 641 IAC 15.

- II. Provide personnel with the following minimum equipment necessary to perform inspections:
  - 1. Test kit meeting the requirements of 641 IAC 15.
  - 2. Measuring Tape
  - 3. GFCI Receptacle Tester
  - 4. Digital Camera
  - 5. Digital Thermometer
  - 6. Screwdrivers- Phillips and Flat Head
- III. Conduct a minimum of one routine, annual inspection and for-cause special inspections of all registered swimming pools and spas within the coverage area outlined in this agreement to determine compliance with 641 IAC Chapter 15. Inspections or follow-up may be required for facilities found to be unregistered.
- IV. Conduct an ir iti d in spect or for new ficilities 30-60 days after they initially open.
- V. Conduct special inspections in accordance to Procedures Regarding Inspection Frequencies found at

https://dial.iowa.gov/licenses/swimming-pools-spas/resources/facility-toolbox.

- VI. Conduct special inspections resulting from complaints or incidents within 5 business days of the DEFARTI 4EI T's request. If the 30AKE cannot conduct the special inspection within 5 business days, the BCARD will notify the DEPARTMENT immediately with a justification of why the expectation cannot be met.
- VII. Forward reportable incidents received by the BOARD to the DEPARTMENT within one day of receipt.
- VIII. The BOARD souther red to collect report the incident data pursuant to 641 IAC 15.4(7) and the DEPARTIMENT is authorized to collect this information pursuant to Iowa Code sections 1351.4 and 135.40 and 641 IAC Chapter 15. The parties are authorized to transfer reportable incident case between and within the parties pursuant to 641 IAC 175.10(2) as necessary to conduct an investigation into the reportable incident. The BOARD shall not re-release confidential reportable incident data.
- IX. The BOARD can issue an order to close a swimming pool or spa if the facility does not have an active registration or any other health violations written in the code. The request shall be in writing and list the violations. The written order will be sent to the facility and the DEPARTMENT. Only the DEPARTMENT holds the right to revoke or withhold a facilities registration.
- VI. For the Tattoo Establishment Program
  - a. The DEPARTMENT agrees to:
    - i. Permit tattoo artists, permanent color technologists, tattoo establishments, mobile units, and temporary establishments in accordance with Iowa Code Section 135.37 and 481 IAC Chapter 492.
    - ii. Provide artist and establishment status updates to local inspectors.
  - **b.** The BOARD agrees to:

LARRY JOHNSON, JR., DIRECTOR

KIM REYNOLDS, GOVERNOR CHRIS COURNOYER, Lt GOVERNOR

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- Employ adequate personnel to perform tattoo program services outlined in Section III(B)III, in this agreement. In addition, the personnel performing tattoo program services shall have successfully completed a blood-borne pathogen certification from the American Red Cross or an equivalent nationally recognized organization.
- ii. Ensure that a new inspector has obtained a blood-borne pathogen certification prior to performing inspections.
- iii. Conduct a minimum of one routine, annual inspection and for-cause inspections of all permitted tattoo establishments, temporary establishments, and mobile units, within the coverage area outlined in this agreement to determine compliance with 481 IAC – Chapter 492. Inspections or follow-up may be required for facilities found to be unregistered.
- iv. Conduct an initial inspection for new establishments within 2 weeks of notification by the DEPARTMENT. Upon completion of the inspection, the BOARD will report back to the DEPARTMENT via email with the outcome of the inspection within two days. If unable to meet expectation, the BOARD will notify the DEPARTMENT immediately with a justification of twitter opect ation cannot be met.
- v. Conduct special inspections resulting from complaints or incidents within 5 business days of the DEPARTMENT'S request. If the BOARD cannot conduct the special inspection within 5 business days, the BOARD will notify the DEPARTMENT immediately with a justification of why the expectation cannot be met.

#### VII. Manner of financing

- A. The DEPARTMENT shall not be financially responsible for any of the functions to be performed by the BOARD under the provisions of this agreement. The BOARD shall charge, collect, and retain inspection fees for the respective programs in accordance with the following rules:
  - 1. For the Swining | col and Sca program, oursular, to lowa Code Chapter 1351 and 641 IAC 15.
  - 2. For the Tattoo Establishment program, nursuant to Iowa Code sections 10A.531 through 535 and 481 IAC 492.
- VIII. It is mutually understood and agreed that:
  - A. This Agreement can be amended by the mutual written consent of both parties only.
  - B. Any use of the DEPARTMENT'S name, logo, or other identifier must have prior written approval from the DEPARTMENT.
  - C. The terms and provisions of this Agreement shall be construed in accordance with the laws of the State of Iowa. Any and all litigation or actions commenced in connection with this Agreement shall be brought in Des Moines, Iowa, in the Iowa District Court in and for Polk County, Iowa. If, however, jurisdiction is not proper in the Polk County District Court, the action shall only be brought in the United States District Court for the Southern District of Iowa, Central Division, provided that jurisdiction is proper in that forum. This provision shall not be construed as waiving any immunity to suit or liability that may be available to the DEPARTMENT or the State of Iowa.

KIM REYNOLDS, GOVERNOR CHRIS COURNOYER, Lt GOVERNOR

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LARRY JOHNSON, JR., DIRECTOR

- D. Subcontracting. None of the work or services relating to this Agreement shall be subcontracted to another organization or individual without specific prior written approval by the DEPARTMENT except for subcontracts under \$2000. To obtain approval, the BOARD shall submit to the DEPARTMENT the proposed contract or written agreement between the parties. The proposed contract or agreement shall contain:
  - (1) A list of the work and services to be performed by the subcontractor.
  - (2) The contract policies and requirements.
  - (3) Provision for the DEPARTMENT, the BOARD, and any of their duly authorized representatives to have access, for the purpose of audit and examination, to any documents, papers, and records of the subcontractor pertinent to the subcontract.
  - (4) The amount of the subcontract.
  - (5) A line item budget of specific costs to be reimbursed under the subcontract or agreement or other cost basis for determining the amount of the subcontract as appropriate.
  - (6) A statement that all provisions of this Agreement are included in the subcontract including audit requirements.
  - (7) Period of performance.
  - (8) Any additional subcontract conditions.
- a. Any subcontract or other written agreement shall not affect the BOARD'S overall responsibility and accountability to the DEFARTMENT for the cynall direction of the project.
- b. If during the course of the subcontract period the BOALD or subcontractor wishes to change or revise the subcontract, prior written approval from the DEPARTMENT is required.
- c. The BOARD shall maintain a contract stan nistration system which ensures that subcontractors perform in accordance with the terms, conditions, and specifications of their contracts or purchase orders.
- d. The BOARD shall maintain written standards of conduct governing the performance of its employees engaged in the award and administration of any subcontract. No employee, officer or agent of the BOARD or subcontractor shall participate in the selection or in the award or administration of a subcontract if a conflict of interest, real or apparent, exists.
- E. Termination
  - a. This Agreement may be terminated by the BOARD upon thirty (30) working days advance written notice for the failure of the DEPARTMENT to comply with any term, condition, or provision of this Agreement. In this event, the BOARD shall deliver to the DEPARTMENT written notice specifying the nature of the DEPARTMENT'S default. The DEPARTMENT shall have a thirty-day notice period to correct the problem that resulted in the default notice.
  - b. This Agreement may be terminated by the BOARD upon thirty (30) working days advance written notice if circumstances beyond the control of the BOARD make continuation of this Agreement impossible.
  - c. This Agreement may be terminated by the DEPARTMENT for any of the following reasons:

KIM REYNOLDS, GOVERNOR CHRIS COURNOYER, Lt GOVERNOR

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LARRY JOHNSON, JR., DIRECTOR

- i. <u>Default by the BOARD</u>. The failure of the BOARD to comply with any term, condition, or provision of this Agreement shall constitute a default by the BOARD. In this event, the DEPARTMENT shall deliver to the BOARD written notice specifying the nature of the BOARD'S default. The DEPARTMENT may make termination of the Agreement effective immediately. If the notice of default does not indicate that the Agreement shall be terminated immediately, the BOARD shall have a thirty-day notice period to correct the problem that resulted in the default notice.
- ii. <u>The Convenience of the DEPARTMENT</u>. The DEPARTMENT may terminate this Agreement in whole or in part without the payment of any penalty or incurring any further obligation to the BOARD whenever, for any reason, the DEPARTMENT shall determine that such termination is in the best interest of the State. In this event, the DEPARTMENT shall issue a termination notice to the BOARD at least ten (10) days prior to the effective termination date.
- iii. <u>Change in Law</u>. The DEPARTMENT shall have the right to terminate this Agreement without penalty by providing ten (10) days written notice to the BOARD if any of the following conditions exist
  - 1. The DEPARTMENT's authorization to operate is withdrawn or there is a material alteration in the programs administered by the DEPARTMENT;
  - 2. The DEPARTMENT'S duties are substantially modified.

IN WITNESS WHEREOF, the parties have signed the maines offert we the day and year first above written.

Iowa Dept. of Inspections, Appeals, & Licensing

XXX Insert health department XXX

BY:

Joe Mullen, Division Administrator Building and Construction Division BY:

XXX Insert health department XXX