

Iowa FFY 2024 PHHS Block Grant Executive Summary

The Preventive Health & Health Services (PHHS) Block Grant allows Iowa to use dollars where and when we need them to protect the public’s health. The grant gives Iowa HHS the flexibility and control to address the state’s priority health needs. Iowa’s PHHS Block Grant program designs and implements a variety of projects that address innovative approaches to meeting emerging, critical and current public health needs, supporting infrastructure and capacity-building needs, providing gap-filling support in essential services, and identifying innovative strategies for addressing Iowa’s health disparities. All project activities supported by the PHHS Block Grant must be related to achieving Healthy People 2030 objectives.

Summary of FFY 2024 PHHS Block Grant Allocations	
Iowa HHS Program Title	FFY 2024 Funding
Emergency and Trauma Services (+ Stroke Registry Licensing Fee)	\$744,613
Sexual Violence Prevention (<i>mandatory set-aside</i>)	\$66,603
Infant Sleep-Related Death Prevention	\$120,000
Health Equity Implementation Plan	\$50,000
Cancer Prevention	\$471,273
Child Mortality & Coordinated IA HHS Mortality Review Teams	\$309,958
Title V Community-based Doula Project for African American Women	\$60,000
Administrative Costs	\$133,144
TOTAL AWARD	\$1,955,591

PROGRAM PURPOSE STATEMENTS

EMERGENCY AND TRAUMA SERVICES

The Iowa HHS Bureau of Emergency Medical and Trauma Services (BEMTS) will use PHHS Block Grant funds for regional field staff to provide education, ongoing technical assistance, monitoring and support to the state’s 897 EMS service programs and 120 trauma centers. System development initiatives will include the implementation of minimum standards for EMS systems, quality improvement initiatives and support of the State Stroke Registry from agency-specific recommendations from the Trauma System Advisory Council, data collection and submission, EMS regulation and the EMS Advisory Council.

SEXUAL VIOLENCE PREVENTION

Funds will be used by the Iowa Coalition Against Sexual Assault (IowaCASA) to support the coordination of sexual assault services, prevention and resources in Iowa. IowaCASA will use Block Grant funds to provide prevention activities to key impacted communities by providing services and education to mitigate the health impact of sexual violence, while increasing the capacity of local service providers to better link services with prevention efforts for programs across the state. Applying data to practice, these funds will enable IowaCASA to address health equity by partnering with youth-serving organizations to increase protective factors which protect against the perpetration of violence. IowaCASA will conduct environmental scans and/or policy/protocol audits for the organizations to identify opportunities for ingraining sex offense prevention practices at an organizational level.

INFANT SLEEP-RELATED DEATH PREVENTION

This new Iowa HHS Division of Community Access initiative aims to increase safe sleep practices among caregivers of infants in Iowa. The project will engage other divisions across Iowa HHS along with the Iowa SIDS Foundation, Des Moines University, and the Iowa Chapter of the American Academy of Pediatrics to create new, improved programmatic materials with uniform, consistent messaging for safe sleep promotion, conduct a safe sleep public awareness campaign, provide enhanced safe sleep educational opportunities for medical students and healthcare professionals thereby engaging them to increase education to patients about safe sleep and provide safe sleep risk reduction items (e.g. pack 'n plays, sleep sacks) to Iowa families who are unable to access or obtain them through other means.

HEALTH EQUITY IMPLEMENTATION PLAN

The Iowa HHS Bureau of Health Equity will use the results of the agency-wide Health Equity Assessment to develop and execute an agency Health Equity Implementation Plan. This plan will build workforce capacity to address Iowa's most pressing health disparities. The implementation plan will provide an actionable roadmap for agency staff to embed health equity strategies and practices into program operations and service delivery. To equip staff with the necessary knowledge, resources and tools, the implementation plan will include the establishment of new workforce development activities like training, certifications and capacity building opportunities that foster agency staff learning, engagement and collaboration.

CANCER PREVENTION

The Iowa HHS Public Health Division will initiate a new cancer prevention project with a focus on lowering the overall cancer incidence rate in Iowa. This new initiative will increase the capacity of the Iowa Comprehensive Cancer Control Program (CCCP) to coordinate strategies and activities within Iowa HHS that focus on cancer risk factors. A new Cancer Prevention Consultant, in collaboration with the CCCP Manager, will engage IA HHS programs in development of an agency-wide Cancer Risk Reduction Plan, which will include a catalog of comprehensive, coordinated cancer prevention activities. The initiative will also implement focused primary and secondary cancer prevention and risk-reduction strategies related to alcohol use, lung cancer screening, and obesity. The project will implement two risk-reduction activities - one within Quitline Iowa focusing on assessment of eligibility for lung cancer screening, and another focused on alcohol use awareness and education. Embracing a Data-to-Action framework, Iowa HHS will contract with the Iowa Cancer Registry to provide actionable data through the additional analysis of collected data related to Iowa's high cancer incidence rate and potential causative factors. This analysis will be shared through a series of reports and informational briefs. Five questions will be added to the 2025 Iowa HHS Behavioral Risk Factor Surveillance System (BRFSS) survey to assess cancer prevention knowledge and behaviors. Data collected from the survey will inform future cancer prevention and risk-reduction strategies.

CHILD MORTALITY & COORDINATED MORTALITY REVIEW TEAMS

Iowa HHS will use funds across the agency to equip Iowa's Child Death Review Team (CDRT), and the other Iowa HHS Mortality Review Teams, with the resources, tools and processes needed to provide high quality recommendations for child death and mortality prevention. This initiative will increase staffing capacity for coordination and support of the CDRT and other agency death review teams, enabling improvements for the teams as well as supporting learning, collaboration, and coordination across all of the mortality review teams (Child Mortality, Maternal Mortality, Domestic Abuse Deaths, and Opioid Deaths). An enhanced CDRT report with high quality data analysis, trend spotting and evidence-based recommendations will be developed. Coordination among Iowa HHS' mortality review teams will streamline review processes, align with best practices, and ensure all four teams are using consistent, HIPAA compliant, evidence-based processes for conducting case record analysis and death review. To strengthen moving Data-to-Action, Iowa HHS will create a Community Action Team with Iowa families as members to enhance the health equity and family engagement work of the mortality review teams. An Iowa Mortality Report that brings together the findings of the four death review teams into a comprehensive picture of the current landscape, as well as evidence-based actionable recommendations, will be developed.

COMMUNITY-BASED DOULA PROJECT FOR AFRICAN AMERICAN WOMEN

Working in collaboration with local community experts, funds will support access to culturally congruent, community-based certified doula services as an additional service at four (4) Title V MCH agency sites with a high proportion of African-American/Black-identified clients. Doulas in this program will assist in training additional community members to become certified doulas with a specific focus on breastfeeding supports. Program goals are to improve maternal morbidity and mortality rates, increase early initiation of prenatal care, and improve rates of breastfeeding initiation among African-American/Black women in participating service areas.