

Iowa FFY 2026 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 Department of Health and Human Services (Iowa HHS) 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 Federal Fiscal Year (FFY) 2026 PHHS Block Grant Allocations	
Iowa HHS Program Title	FFY 2026 Funding
Emergency and Trauma Services (+ Stroke Registry Licensing Fee)	\$770,435
Sexual Violence Prevention (<i>mandatory allocation</i>)	\$66,603
Infant Sleep-Related Death Prevention	\$50,000
Child Mortality Review & Coordination	\$250,000
Obesity and Cancer Prevention	\$425,000
Administrative Costs + Block Grant Administrator	\$252,759
Total FFY26 Award	\$1,814,797

Purpose Statements

Emergency and Trauma Services

Iowa HHS Bureau of Emergency Medical and Trauma Services (BEMTS) will use PHHS Block Grant funds to support regional field staff who provide education, ongoing technical assistance, monitoring and system support to the state’s 905 EMS service program locations and 121 trauma centers. Key system development priorities include implementing minimum EMS system standards, advancing trauma quality improvement initiatives and supporting the State Stroke Registry. Additional efforts include carrying out agency-specific recommendations from the Trauma System Advisory Council, enhancing data collection and submission processes, and supporting EMS regulation and the EMS Advisory Council.

Sexual Violence Prevention

The Iowa HHS Sexual Violence Prevention (SVP) Program will partner with the University of Northern Iowa's Patricia A. Tomson Center for Violence Prevention (UNI PATCVP), the Iowa Coalition Against Domestic Violence and their local member programs, and the Iowa Attorney General's Office Victim Assistance Section to support the facilitation and coordination of sexual assault services, prevention and resources in Iowa. The program will provide prevention services and education to key impacted communities to mitigate the health impact of sexual violence in these communities. Evidence-based programs will be implemented including Mentors in Violence Prevention (MVP) administered by UNI PATCVP and curriculum from the Adult Responsibility Project from Prevent Child Abuse Vermont which focuses on adult responsibility in preventing child and adolescent sexual abuse. The SVP program will facilitate sexual assault response provider trainings to increase the number of 'qualified providers' in the state, including Sexual Assault Nurse Examiners. Qualified Providers meet and adhere to specific educational and clinical training standards set by the Iowa Attorney General. Lastly, Iowa HHS will develop and disseminate a new SVP program evaluation measure/data indicator that identifies the impact of sexual violence prevention programming on personal responsibility to prevent sexual harm and sexual coercion.

Infant Sleep-Related Death Prevention

The Iowa HHS Infant Sleep-Related Death Prevention Initiative aims to increase safe sleep practices among caregivers of infants in Iowa. The project will engage multiple divisions within Iowa HHS and partner with the Iowa SIDS Foundation. Using the findings of the 2025 University of Iowa Infant Safe Sleep Study examining caregiver decision-making and behaviors related to infant sleep environments, new, improved Iowa HHS programmatic outreach materials with updated and uniform, consistent messaging for safe sleep promotion will be created. Additionally, a tailored package of training, outreach and educational materials for infant caregivers, with targeted messages for childcare providers will be developed. Safe sleep risk reduction items (e.g. pack 'n plays, sleep sacks) will also be provided to Iowa families who are unable to access or obtain them through other means.

Child Mortality Review & Coordination

Iowa HHS will provide staffing capacity for the Child Mortality Review & Coordination (CMRC) Initiative to include a 1.0 FTE Child Death Review (CDR) Coordinator and a 1.0 FTE CDR Abstractor. The CDR Coordinator and the CDR Abstractor will coordinate and support the CDR Subcommittee of the State Mortality Review Committee (SMRC) for review and analysis of child deaths in

Iowa. The CMRC Initiative will ensure Iowa’s SMRC CDR Subcommittee has the capacity to acquire, prepare and review child fatalities in Iowa. The CMRC Initiative will convene the SMRC CDR Subcommittee to complete case reviews of all child deaths in Iowa from 2022 – 2024. Based on case review findings, informed recommendations for mortality prevention will be developed and shared. The CMRC Initiative will also complete entry of cases reviewed by the CDR Subcommittee into the National Center for Fatality Review and Prevention (NCFRP) Case Registry. Best practice, and the CMRC Initiative’s goal, is to review cases within 24 months of death and enter cases into NCFRP within 30 days of case review.

Obesity and Cancer Prevention

Iowa HHS will strengthen the partnership between the agency’s Healthy Eating and Active Living (HEAL) and Cancer Prevention teams to improve coordination of data-to-action obesity prevention and cancer prevention efforts. New, integrated obesity and cancer prevention strategies will be identified or developed for implementation at the local level. Iowa HHS will partner with four current HEAL Coalitions to establish additional community/clinical linkages, conduct asset mapping activities and implement integrated obesity and cancer prevention risk-reduction interventions, including policy, systems and environmental (PSE) strategies in local communities. PSE efforts will focus on building local capacity to increase communities’ ability to support families in healthy eating, engaging in active living environments and reducing modifiable cancer risk factors.