

Linn County Public Health Annual Report



July 1, 2012 - June 30, 2013

LINN COUNTY BOARD OF SUPERVISORS



Pictured (left to right): Linda Langston, Brent Oleson, Lu Barron, Ben Rogers, John Harris

LINN COUNTY BOARD OF HEALTH



Pictured (left to right): Dr. Sharon Bertroche, Dan Marquardt, Brian Murphy, Rich Good. Not pictured: Linda Langston

LINN COUNTY BOARD OF HEALTH

Roles:

- Support the mission of public health
- Discuss health issues and concerns, solicit input and share plans for public health with business and community leaders
- Develop public health policy based on data and community input
- Assure compliance with legal responsibilities (Iowa Code/Iowa Administrative Code)
- Understand and support quality service provision and fiscal accountability

Board of Health Committees

Finance and Administrative Review

BOH Liaison: Brian Murphy and Rich Good

The Finance and Administrative Review Committee shall oversee the financial management of the Agency, and make recommendations for improvement to the Board as appropriate. Also, has responsibility for periodically reviewing the personnel policies of the Agency and making recommendations to the Board as appropriate. It advises the Health Director on personnel matters and recommends approval for all budgeted positions in the Agency. The Committee shall be advised by the Health Director of any personnel issues and grievances.

Community Health Collaboration

BOH Liaison: Dr. Sharon Bertroche and Dan Marquardt

The Community Health Collaboration Committee shall have the responsibility for reviewing the scope of community health activities ongoing or needed in the community, and for making recommendations to the Board and to the Health Director for opportunities for community collaborations in the general public health system or for programs and services under the purview of the Linn County Public Health Department.

Policy and Government Relations

BOH Liaison: Linda Langston

The Policy and Government Relations Committee shall have the responsibility for reviewing the annual work program and making recommendations to the Board as appropriate. It shall be responsible for evaluating all programs and services and recommending changes to the Board as appropriate. It shall oversee the Agency's quality assurance measures. The committee shall be responsible for seeing that the Board develops an annual strategic plan. It shall review proposed Agency policies and make recommendations to the full Board. It shall consider the enactment of any Board policy or ordinance regulating the public's health and make recommendations to the full Board.

Message from the Director

Welcome to 2013 Annual Report of Linn County Public Health!

Linn County Public Health has completed another productive year of service to our community. This annual report reflects the hard work and dedication of my colleagues. I trust you will take a few minutes to look at the work that we have done during fiscal year 2013.

We are in the process of obtaining public health accreditation for the first time (and first in Iowa)! Accreditation means quality improvement of our services, focus on our customers, community engagement and workforce development. LCPH is integrating a culture of performance management (through accreditation process) which can be tracked and monitored to improve and enhance our public health services.



Pramod Dwivedi
Health Director

Linn County Public Health established much needed epidemiologic capacity in the Department. We also developed our data sharing agreement with the Iowa Department Public Health, which now allows us to receive all secondary data from the state to assess the health status of Linn County. Public health data are also needed to fulfill the three core public health functions: assessment, policy development and assurance.

Linn County Public Health forged significant partnerships with community organizations and stake-holders, and completed the following activities and services this past fiscal year:

- We extended our work associated with chronic diseases such as screening of breast, cervical and colorectal cancer to three more counties- Johnson, Iowa and Cedar. LCPH now serves a total of six counties.
- LCPH was awarded a grant from IDPH to develop health insurance billing infrastructure. We also secured electronic medical record software (EMR) with minimal financial impact to LCPH.
- Since the establishment of the Travel Clinic services last fall, LCPH offered over 350 vaccinations to international travelers.
- We increased our immunization outreach to every school district in Linn County and to most registered child day care centers by providing onsite tetanus, diphtheria, and pertussis.
- This year St. Luke's Hospital joined our effort in the Infant Cocooning Program (ICP). Mercy Medical Center has already been participating in ICP. ICP enables every family delivering a baby the opportunity to protect their newborn from acquiring pertussis.
- LCPH partnered with the Linn County Child Death Review Team in the successful Safe Sleep campaign.
- A partnership between Linn County Public Health (LCPH) and the City of Cedar Rapids resulted in a \$2.5 million federal grant from the Housing and Urban Development (HUD) to protect children and families from the hazards of lead-based paint and from other home health and safety hazards.
- Environmental Public Health (EPH) continued its work with local industry and business to ensure compliance with federal, state, and local environmental health rules. In 2013, this included working with over 1,300 retail food establishments and 300 hundred industrial and commercial sources of air pollution.

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- Fifty-four businesses applied for the Worksite Wellness Award and participated in the worksite wellness assessment process. The wellness award ceremony was sponsored by the Corridor Business Journal and was attended by over 300 people.
- Three apartment complexes have gone smoke-free with the assistance of the LCPH staff. More than 250 owners and/or managers were contacted about going smoke-free in their complexes.
- An epidemiologist position was created and a trained epidemiologist was hired in this position.
- A new air data collection system (software and hardware) was added to our ambient air monitoring program network to provide our agency with digital connectivity, improved diagnostics tracking, automated data notifications and real time Quality Assurance capabilities.

Although our core public health programs will continue to be our priority, we will increase LCPH’s emphasis on prevention by focusing on public health programs, policies and education in the years to come.

We welcome your comments and questions either by calling us at 319-892-6000, or by writing to us at health@linncounty.org.

Public Health Structure

Linn County Public Health is divided into the following five divisions:

Assessment and Health Promotion (AHP) Division

AHP helps keep LCPH connected to the community, engaged with partner organizations. AHP has three main functions:

1. Promote healthy behaviors through education, facilitating community collaboration, and implementation of best practices
2. Use data for the purposes of assessing community health needs and identifying strategies for health improvement
3. Assist with public information and health communication

Clinical Services Division

The Clinical Services Division provides services that support the 10 essential functions of public health. Assessment functions are seen in clinical activities that prevent and control communicable disease and identify and reduce the health risks associated with chronic illness or conditions. Policy development support is evidenced through the building of new community provider partnerships and linkages that provide assurance to the public for access to needed health care. Specific clinical activities include the provision of immunizations, education, appropriate referrals, and some treatments.

Environmental Public Health Division

The Environmental Public Health Division is the primary line of defense to many environmental hazards in our community. We implement environmental policies that prevent or control the release of chemical toxins and pathogens into the environment to levels that are considered protective of human health. This includes environmental media such as air, water, land, home, and food. While the Environmental Public Health programs have a wide variety of duties, much of what we do to protect public health can be summarized into these six activities: 1) Outreach and Education, 2) Monitoring, 3) Regulating, 4) Permitting & Licensing, 5) Inspecting & Assessment, 6) Enforcement

Laboratory Services Division

The Laboratory Services Division provides clinical diagnostic testing, disease surveillance, environmental testing, and emergency response support. Analytical and public health laboratory information is used to assess health outcomes by the other divisions in Linn County Public Health, governmental and non-profit agencies, as well as the private citizens of Linn County.

Administration and Preparedness Division

The Administrative Services Division of Linn County Public Health consists of the Offices of the Health Director and Deputy Director, Budget and Financial monitoring functions of the agency, Human Resources coordination (in conjunction with Linn County Human Resources Department), Public Health Preparedness and limited Information Technology support. Linn County Public Health is an autonomous agency directed by the Board of Health. Linn County Public Health employs a Medical Director to provide physician and clinical expertise and the County provides legal counsel to the Board of Health.

ASSESSMENT & HEALTH PROMOTION DIVISION

Community Health Needs Assessment (CHNA)

LCPH was commissioned by regional not-for-profit hospitals to conduct a CHNA of Linn County and the seven surrounding counties. AHP facilitated the process in order to assist the not-for-profit hospitals satisfy one of four new federal requirements in the Patient Protection and Affordable Care Act. Not-for-profit hospitals must conduct a CHNA every three years and then adopt strategies to meet needs identified within the assessment. The following priority areas were identified in the CHNA:

Cancer	Health Care Access	Mental Health
Oral Health	Sexual Health	Substance Abuse
Obesity and Chronic Disease		

Community Transformation Grant

AHP worked with the NewBo City Market and officials from the cities of Ely and Mount Vernon to conduct walkability and bikeability assessments. From these assessments, areas for improvement were identified and CTG funds were used to purchase bike racks and trail signage to make areas more pedestrian or cyclist-friendly. Bike racks for 50 bikes were recently purchased for NewBo City Market using CTG funds.

Another CTG priority is to make homes smoke-free in multi-unit residential buildings. AHP partnered with the Area Substance Abuse Council (ASAC) to reach property owners, managers, and tenants to encourage more buildings to go smoke-free. As a result of these efforts, three landlords or managers adopted smoke-free policies for their buildings. Additional funding support for this project was provided to AHP by ASAC from the Community Partnership grant.

Corridor Worksite Wellness Awards

Linn County Public Health, Linn County Board of Health, and the Corridor Worksite Wellness Committee joined forces with Johnson County Public Health and the Corridor Business Journal (CBJ) to host the Corridor Worksite Wellness Awards. Over 300 people attended the awards ceremony and 54 worksites participated, 20 more worksites than last year. A comparison of the worksites that participated in the 2012 and 2013 assessments revealed that, on average, worksites' scores improved by 11%, 32 positive systems-level changes and 27 environmental changes occurred in the worksites.

Coalitions

AHP is involved with the Blue Zones Project. Cedar Rapids was selected as a Blue Zones demonstration site this year, and Marion will be a demonstration site beginning next year.

Internal Support for LCPH

AHP helps manage the LCPH Facebook and Twitter pages, updates the website, writes news releases, expands outreach efforts, collects data, and creates educational materials. Over the

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Public Health Activities

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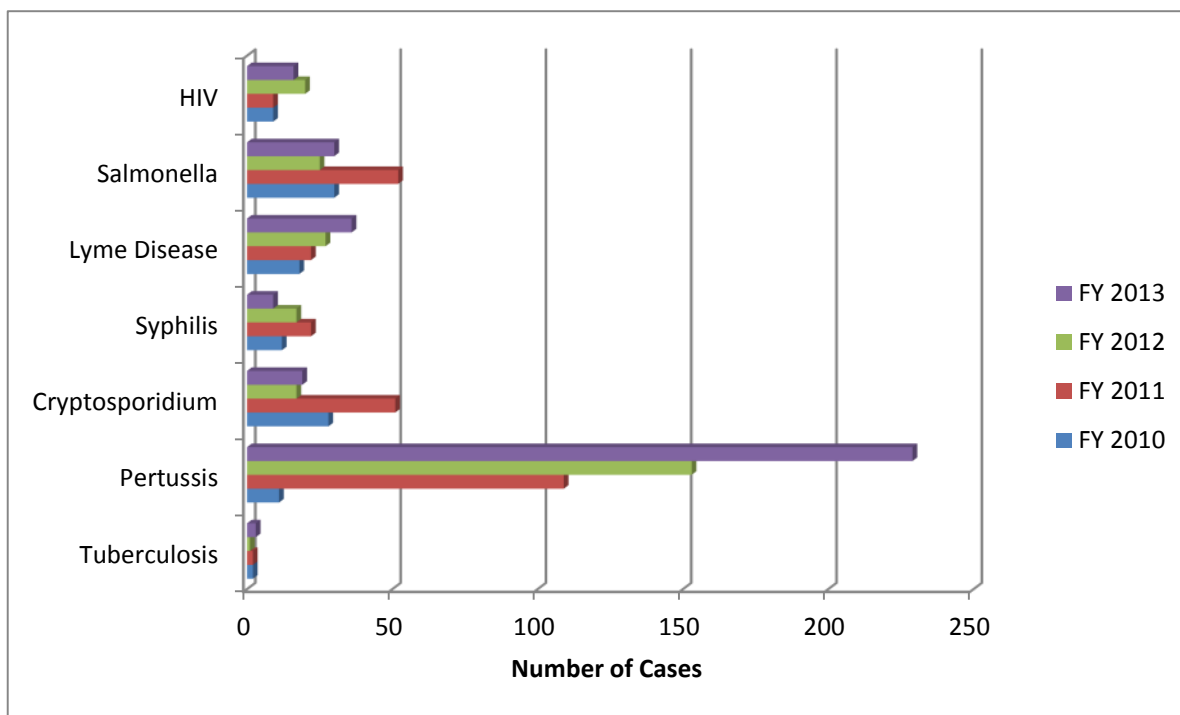
past year, LCPH's Facebook page went from 181 to 275 likes. AHP also plans to grow its ability to critically analyze data through the new epidemiologist position.

CLINICAL SERVICES DIVISION

Reportable Communicable Diseases

An essential core public health function is to investigate all reportable communicable diseases. Currently in Iowa, there are 51 reportable diseases. Figure 1 illustrates the most common diseases reported and investigated in fiscal year 2013.

Figure 1 – Reportable Communicable Diseases



It will be noted in Figure 2 that 454 Direct Observed Therapy home visits were provided by the

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Figure 2 – TB Home Visits

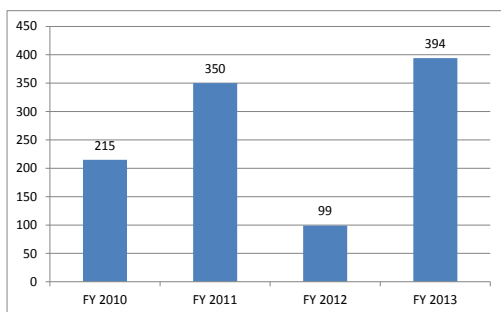
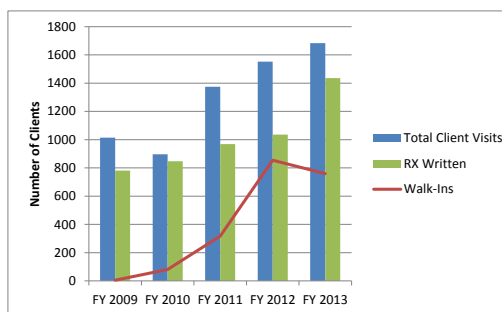


Figure 3 – Sexually Transmitted Infections



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three clinical nurses for three infectious TB patients as well as several latent TB patients.

In response to the pertussis outbreak in 2012, LCPH partnered with the two local hospital birthing units to provide free or low cost Tdap vaccine to the families of newborns. Additionally, LCPH provided free Tdap to all school-age adolescents in every Linn County school.

Sexually Transmitted Infections

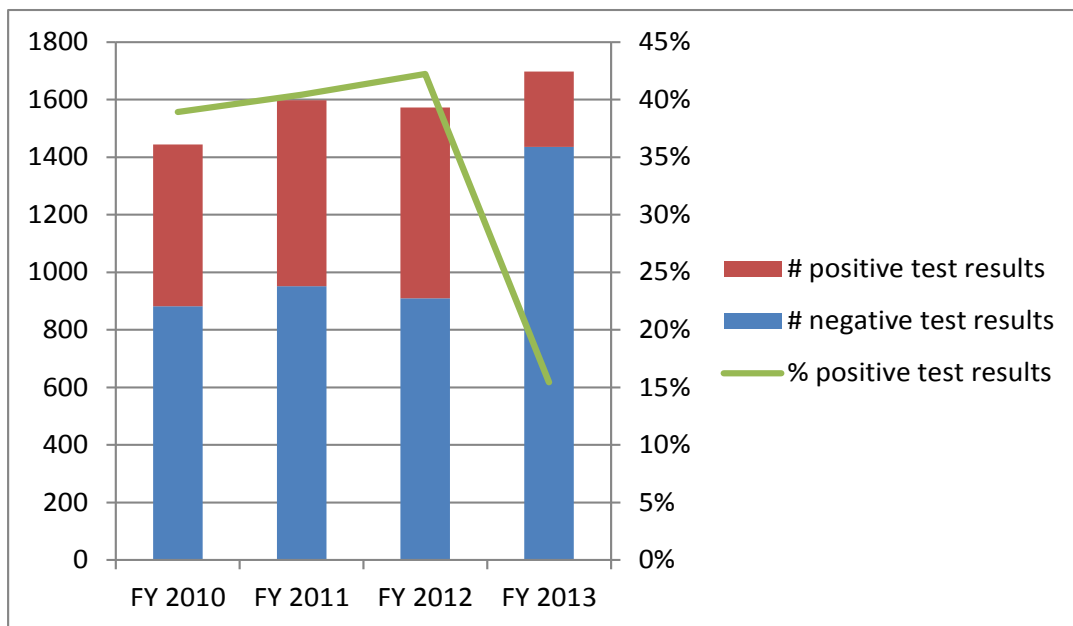
Increased community outreach for testing and treatment was achieved with clinics held at area college campuses, the Community Health Free Clinic, and the work release programs at the Gerald R. Hinzman Center and the Lary A. Nelson Center. These efforts have helped LCPH further reach at-risk populations. Increased accessibility to care is evident by the growing number of walk-ins, as shown in Figure 3. Walk-in clients comprised 45% of clinic visits in fiscal year 2013.

In Figure 4 it is noted that Linn County infection rates for gonorrhea and chlamydia continue to rise, exceeding national and state rates. LCPH participates as an active member of the Sexual Health Alliance of Linn and Johnson Counties coalition in response to this growing need for intervention.

The number of prescriptions written (Figure 3) parallels the number of targeted individuals having active STI infections or a known exposure (Figure 4). Over the last two years, the criteria for STI testing has become more inclusive, resulting in testing of more individuals

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Figure 4 – FY12 Gonorrhea and Chlamydia Test Results



Public Health Activities

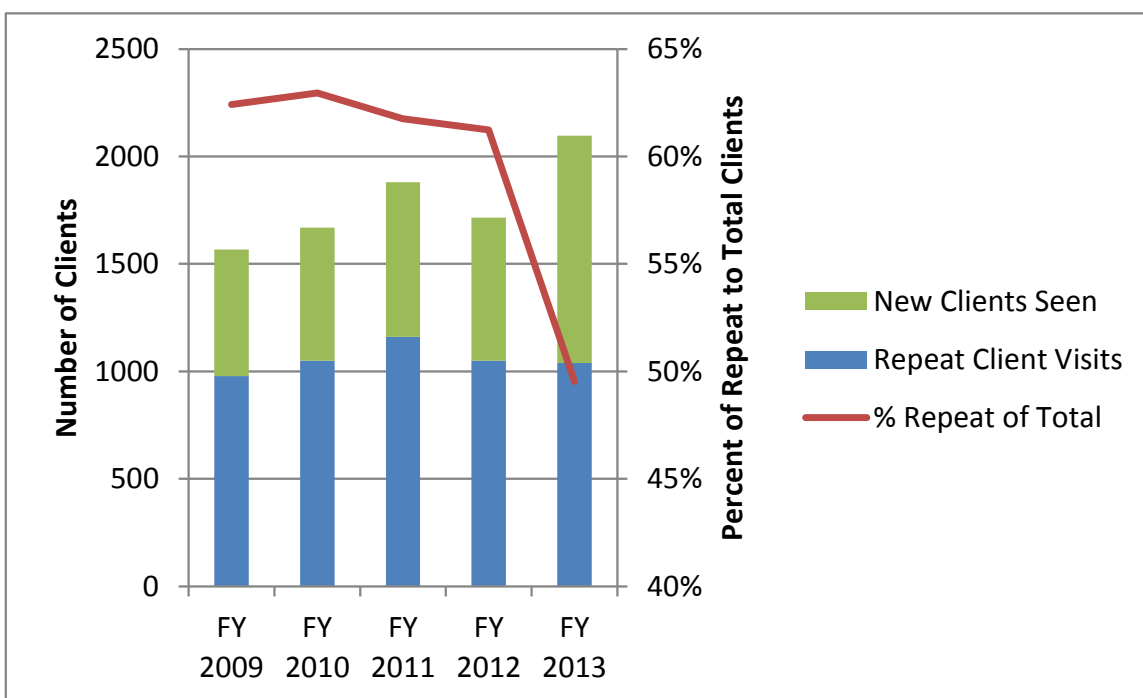
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rather than just testing known high-risk behavior groups. With increasing numbers of tests for lower-risk populations, the positivity percent decreases.

Immunizations

In fiscal year 2013, LCPH saw a significant increase in all indicators of the Immunization Services program. Data for total number of new patients and repeat patients seen is shown in Figure 5. This significant increase in immunizations can be attributed to the expanded travel vaccine clinic program and an enhanced public awareness campaign regarding the need for vaccines to prevent certain communicable diseases. This campaign included on-going conversations with community partners and their roles in a county-wide immunization program.

Figure 5 – FY13 Client Immunizations



The Tdap vaccine program for families of newborns which includes both Linn County hospitals and all registered day care centers and preschool programs is not included in the data presented in Figure 5. A total of 680 Tdap vaccines were provided through this program, either at very reduced cost or free to these community partners and families. The Tdap outreach to area daycare centers has been adopted by the Iowa Department of Public Health for state-wide adoption for all registered day care and preschool programs.

Chronic Disease Management and Prevention

The Clinical Services Division administers two chronic disease management programs: Care for Yourself (CFY) and Iowa Get Screened (IGS). CFY services are part of a Centers for Disease Control and Prevention (CDC) program that helps provide screening women for breast and cervical cancer and health screenings for common chronic conditions such as diabetes and

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hypertension. The IGS program provides education and at-home screening for colorectal cancer and encourages system changes in order to increase screening rates.

In FY13, IDPH transferred the Johnson County CFY contract to Linn County. This expanded the LCPH program target population area to include Johnson, Cedar and Iowa Counties. Some highlights of program outcomes include:

- 51 (22 in FY2012) women received comprehensive health screenings
- 277 (226 in FY2012) women received limited screening services
- 75 (22 in FY2012) women received lifestyle intervention support to help prevent or manage chronic conditions
- \$41,460 (\$34,134 in FY2012) revenue through vouching for completed services

Through the IGS program, 60 (35 in FY2012) Eastern Iowa residents received colorectal cancer screenings and follow-up referrals as needed. LCPH was awarded a grant from the Iowa Cancer Consortium for \$22,000 that promoted community educations and awareness of colorectal cancer screening services.

ENVIRONMENTAL PUBLIC HEALTH DIVISION

To perform Environmental Public Health duties, nineteen professional Environmental Public Health staff work in three environmental sections in the following fields:

- Air Quality – Administers federal, state, and local air quality rules for utilities, business, and industry.
- Environmental Quality - Administers state and local rules for food safety, private/semi-public wells, septic systems, public swimming pools, hotels, and tanning and tattoo parlors.
- Healthy Homes - Provides services to reduce or eliminate environmental hazards in your home, daycare, and school including lead, radon, asthma triggers, and pesticides use.

Activities and outcomes for Fiscal Year 2013 are reported in Table 1.

The Healthy Homes Section analyzed hospital and urgent care admission data and identified a notably high number of individuals in a Cedar Rapids neighborhood who were presenting with upper respiratory symptoms. Healthy Homes worked with the Air Quality Section to identify possible air pollution sources that may be contributing to those individuals' health condition. One source of possible particulate pollution was identified. In response, the Air Quality Section and Laboratory Division deployed our mobile monitoring equipment to measure particulate pollution levels in the neighborhood. In response, and before the monitoring study could be completed, the industrial source voluntarily committed to implement numerous engineering controls for particulate pollution. We are currently working to determine the impact these controls have in improving the respiratory health of the neighborhood residents.

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Public Health Activities

Table 1—Environmental Outcomes for 2013

	FY 13 Actual
Permits and Licenses Issued	
Open Burning Permits	1110
Public Pools and Spas	113
Retail Food Licenses	1146
Septic Permits	152
Temporary & Mobile Food Units	320
Well Permits	62
Inspections & Assessments (Outputs)	
Air Quality Inspections (Industry)	69
Food Inspections	2013
Public Health Nuisance Inspections	284
Blood Lead Screens Managed (all inputed data included LO & LC)	6437
EBL tested children (not confirmed)	65
Healthy Homes Assessments	79
Hotels	24
Radon Analysis in Linn County	1068
Water Samples Collected	332
Enforcement	
Air Nuisances	45
Food Nuisances	116
Housing Nuisances	52
Notice of Violations Issued (Air)	34
Outreach / Education (Output)	
Number of Adults Educated through Healthy Homes Assessment	42
Number of Healthy Homes Trainings	14
Number of Food Establishments Receiving Quarterly Newsletter	1120
Number of Community Outreach Presentations	13
Number of Vists to Environmental Websites	87967
Outcomes / Health Data	
Environmental Related Disease	
Cryptosporidosis	19
E. Coli	11
Salmonella	30
Environmental Related Chronic Conditions	
Air Quality	
Number of Days AQI exceeded 100 (Orange)	1
Number of Days AQI 50 smf 100 (Yellow)	89
Number of Days AQI below 50 (Green)	276
Lead Poisoning	
Percent of Elevated Blood Lead Levels in Children	2.5%
Number Homes That Have Tested and Met Iowa Lead Dust Clearance	1

(Continued from page 11)

Environmental Public Health (EPH) continually works with local industry and business to ensure compliance with federal, state, and local environmental health rules. In 2013, this included working with over 1300 retail food establishments and 300 hundred industrial and commercial sources of air pollution. Some notable grand openings and expansion included:

- Cedar Rapids Convention Center
- Forever Health, the first BlueZones restaurant in Cedar Rapids
- Jefferson High School Cafeteria
- James W Bell relocation to the former Cedarapids, Inc. plant
- Expansions at Diamond V Mills, Genencor and LL Pelling

A partnership between Linn County Public Health (LCPH) and the City of Cedar Rapids resulted in a \$2.5 million federal grant from the Housing and Urban Development (HUD) to protect children and families from the hazards of lead-based paint and from other home health and safety hazards. The Lead Hazard Control grant funding will be used to perform healthy homes assessments and address lead hazards in 125 housing units providing safer homes for low and very low-income families with children in Cedar Rapids. The City of Cedar Rapids and Linn County Public Health will collaborate with the Affordable Housing Network and Hawkeye Area Community Action Agency for this project. The success in obtaining this grant is due in large part to the work done by the LCPH Healthy Homes staff.

LABORATORY SERVICES DIVISION

Figure 6 shows the number of tests analyzed. Testing conducted by the laboratory include:

Environmental Monitoring and Analysis

- Ambient Air Monitoring & Analysis
- Drinking Water Analysis
- Public Access Pool and Spa Water Analysis
- Septic Discharge Analysis

Clinical Analysis

- Blood Lead Analysis
- Sexually Transmitted Infections
- Point of Care
 - Pregnancy
 - HIV
 - Hepatitis C
 - Urinalysis

Ambient Air Monitoring Services

The Linn County Public Health ambient air monitoring program is in place to ensure that the regulatory permitting policies that are currently in force are sufficient in maintaining the air quality standards set by the Environmental Protection Agency. The results from the monitoring data are used in the regulatory policy. LCPH ambient air monitoring program is in place to ensure that the regulatory permitting policies that are currently in force are sufficient to

(Continued on page 14)


Public Health Activities

(Continued from page 13)

maintain the air quality standards set by the Environmental Protection Agency (EPA). This collected data is used to:

- Determine compliance or progress towards meeting the ambient air quality standards
- To observe pollution trends over time in Linn County and throughout the state
- To provide real-time and emergency public notification of current air quality conditions

An Air Quality Index (AQI) value of 100 generally corresponds to the national air quality standard for the pollutant, which is the level EPA has set to protect public health. AQI values below 100 are generally thought of as satisfactory. When AQI values are above 100, air quality is considered to be unhealthy-at first for certain sensitive groups of people, then for everyone as AQI values get higher. The table to the right is a summary of the Air Quality in Linn County for calendar year 2012.

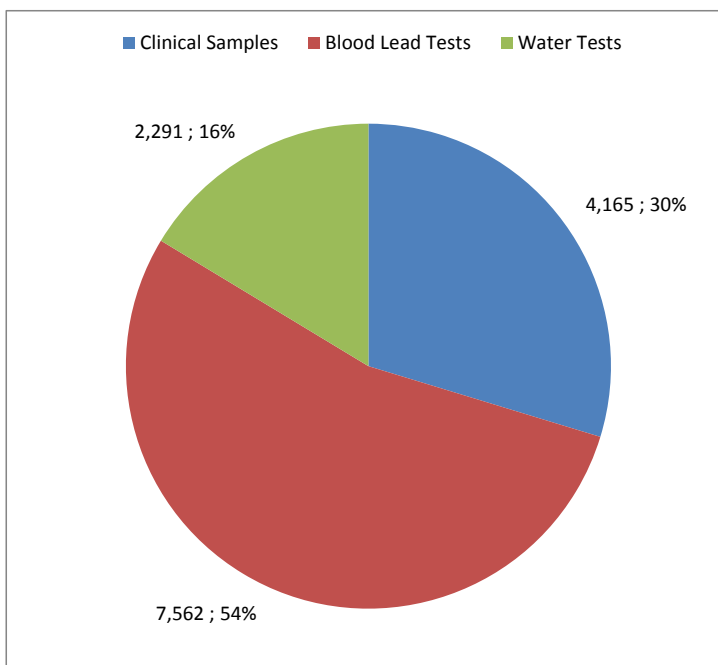
 <p>..air quality conditions are:</p>	Linn County AQI Values for 2012
Good	276 Days
Moderate	89 Days
Unhealthy for Sensitive Groups	1 Days
Unhealthy	0 Days
Very Unhealthy	0 Days

Water Quality Services

The Linn County Public Health water quality monitoring program is in place to ensure that the drinking and public waters for recreation are safe. Drinking water analysis is performed for bacterial and nitrate contaminants. Corrective action information is provided for LCPH, Linn

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Figure 6 – Laboratory Analyses Completed for FY2013



(Continued from page 14)

County Conservation and county residents of private and public water systems.

Public Health Laboratory Services

Linn County Public Health provides extended point of care testing for clients visiting the LCPH clinic. This service enables quicker results, often allowing for results to be available on the same day or during the client visit.

Special Studies Services

In FY 2013, the Laboratory Services Division provided mobile air monitoring services in two locations in response to citizen complaints. This mobile monitoring platform allows the Laboratory Services Division to provide real-time air quality assessments for citizens.

In addition, the Laboratory Services Division is in the second year of an EPA Community Scale Air Toxics (CSAT) grant awarded in FY 2012 to assess acetaldehyde levels in the county. The basic objectives of this acetaldehyde monitoring project are:

- To determine spatial representation and concentration trends of acetaldehyde and other carbonyl compounds in the monitoring area due to industrial expansion
- To determine the level of reduction on the ambient levels by the voluntary industrial efforts
- To determine short term ambient levels of acetaldehyde near an industrial point source and to compare results against computer modeling levels

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ADMINISTRATION AND PREPAREDNESS DIVISION

The Public Health Preparedness program works closely with the sections of Linn County Public Health to protect the public and their environment by quick response to disaster and other matters impacting the public.

Linn Area Partners Active in Disaster (LAP AID)

LAP AID is a group committed to disaster preparedness that was created by members of the Linn Area Long Term Recovery Coalition. The coalition was formed in response to the 2008 floods and brought together more than 30 community organizations working to help Linn County area families recover. LAP AID launched their website in January 2013 (www.linndisasterinfo.com). The website is a resource available daily, but can be adjusted for emergency specific response.

Currently there are 14 LAP AID discipline specific teams. Teams set their own planning and preparedness meeting schedule and determine relevant projects. Representatives come together for quarterly meetings. Linn County Public Health participates on the following teams:

Communications	Leadership	Mass Care
Medical Services	Mental Health	Needs Assessment
Older Adults/Special Needs		

LAP AID can be activated by Linn County Emergency Management to assist in a disaster. A multi-team activation drill took place in March 2013.

Linn Healthcare Coalition

The Linn Healthcare Coalition is involved with community planning and response networks. A notable example involved the limited fit testing equipment for county fire entities. Capability 14 – Responder Safety and Health called for coordinated risk specific safety and health training. LCPH was able to secure preparedness funding to purchase fit testing equipment. Training was also provided by the vendor. Responders that attended the training expressed gratitude for the equipment.

Hazard Vulnerability and Risk Assessment (HVA)

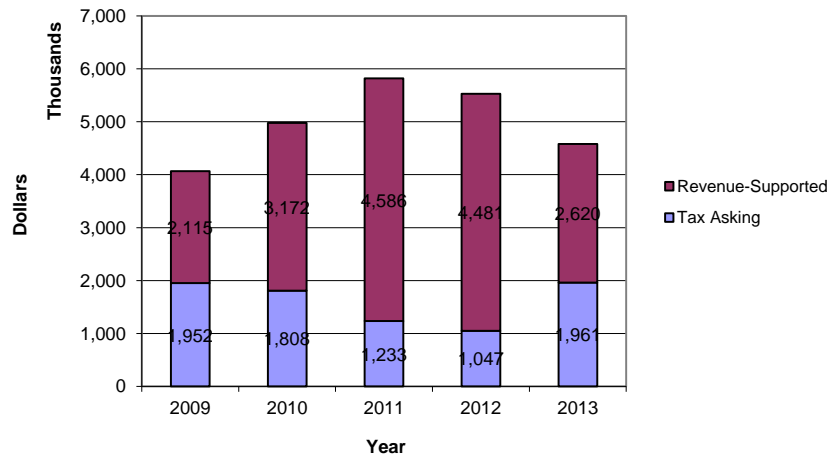
Linn County Emergency Management Agency completes a HVA for the county every five years. Hospitals complete an annual version and public health completed a similar assessment in the fall 2012. The public health, hospital, and EMA versions were compared in 2012. Slight differences surfaced in the HVAs. For example, disease outbreak ranked higher on the public health version than the EMA version.

The top five hazards are:

Hazardous Materials Incident	Flash Flooding
Severe Storm	Thunder and Lightning
Hail Storm	

Financial reports for FY13 are shown below. The year-end budget was \$4,581,651.87 which includes \$1,961,314.28 in tax dollars.

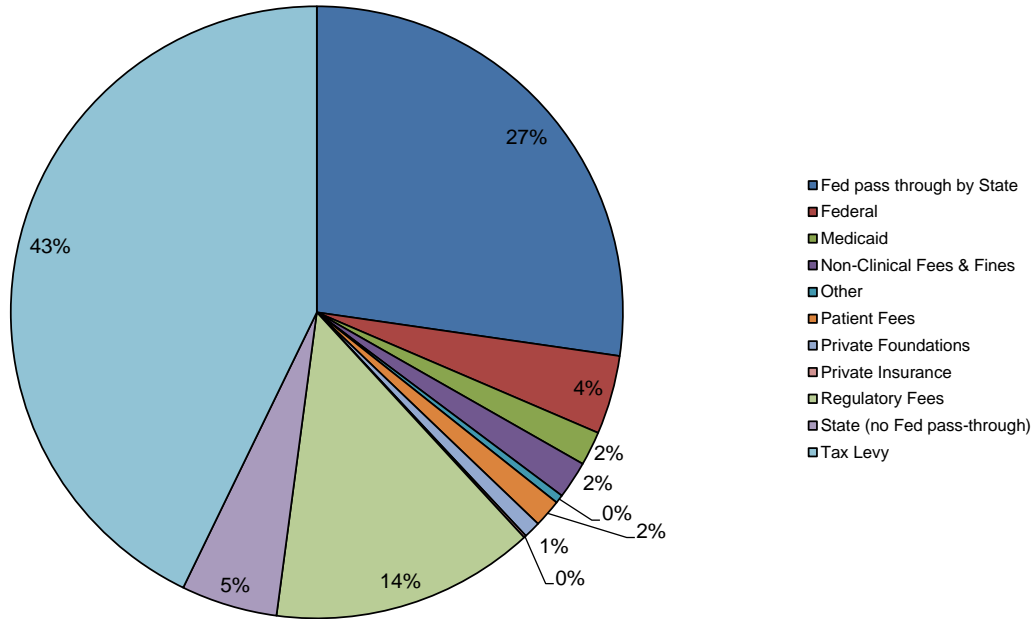
Five Year Actual Budget History



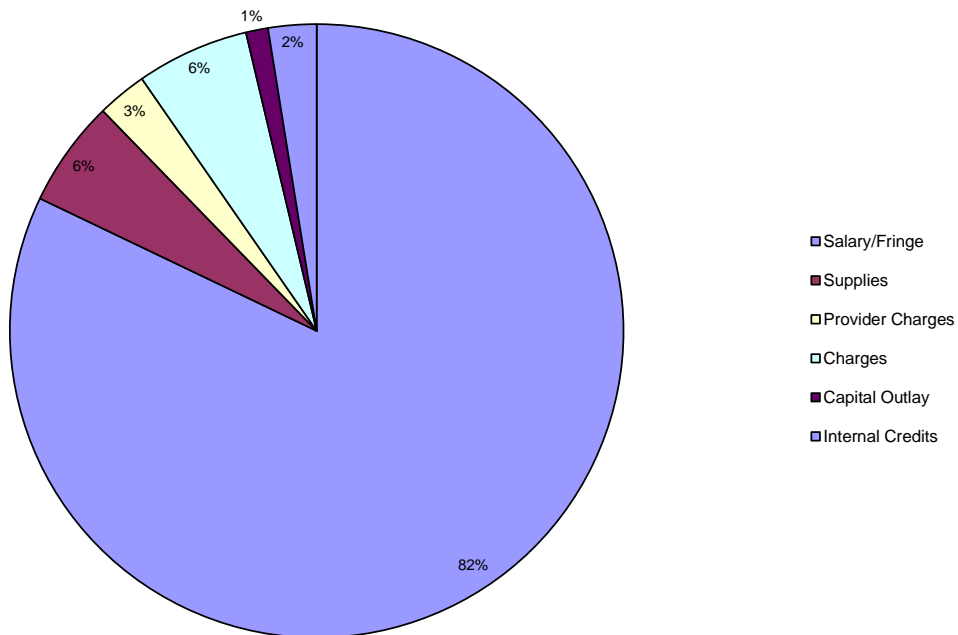
Category	Expenditure	Earned Revenue	Linn County Tax Dollars	% of Budget
Administration & Preparedness	\$739,892.97	-\$153,523.94	\$586,369.03	16%
Assessment & Health	\$287,694.88	-\$221,578.72	66,116.16	6%
Clinical Services	\$963,227.35	-\$419,712.26	543,515.09	21%
Env Public Health Services	\$2,337,739.88	-\$1,718,931.90	618,807.98	51%
Laboratory Services	\$253,096.79	-\$106,590.77	\$146,506.02	6%
TOTAL	\$4,581,651.87	-\$2,620,337.59	\$1,961,314.28	100%

Revenues By Source		Expenditures By Category	
	Dollars		Dollars
Fed pass through by State	\$1,249,962	Salary/Fringe	\$3,761,682
Federal	\$190,672	Supplies	\$257,782
Medicaid	\$82,506	Provider Charges	\$120,154
Non-Clinical Fees & Fines	\$90,781	Charges	\$272,230
Other	\$20,444	Capital Outlay	\$53,448
Patient Fees	\$67,356	Internal Credits	\$116,356
Private Foundations	\$40,839		\$4,581,652
Private Insurance	\$5,652		
Regulatory Fees	\$639,110		
State (no Fed pass-through)	\$233,016		
Tax Levy	\$1,961,314		
TOTAL	\$4,581,652		

Revenue Percentage By Source



Expenditure Percentage By Category



Public Health Staffing

Linn County Public Health would like to recognize the staff who have worked to make Linn County a better place to work and live.

Lynne Abbott	Healthy Homes Program Nurse	Jeff Lake	Environmental Chemist
Kendra Abel	Health Planner and Resource Development Coordinator	Carole Lamphier	Environmental Chemist
Megan Begley	AmeriCorps	Kyle Lundberg	Laboratory Manager
Robin Beining	Epidemiologist	Sharon McCullough	Sample Collection Clerk
Kasandra Bilyeu	Environmental Health Specialist	Heather Meador	Public Health Nurse
Sharon Blackford	Senior Clerk Typist	Chase Moffitt	Environmental Health Specialist
Amanda Bolton	Grants Specialist	Katie Montague	Licensed Practical Nurse
David Burns	Environmental Chemist	Stephanie Neff	Deputy Director
Shelby Burns	Secretary	Robin Nyberg	Environmental Chemist
Jordan Carr	Intern/Community Health Outreach Coordinator	Margaret Oberreuter	Environmental Health Specialist
Barbara Chadwick	Clinical Services Manager	Ann Olson	Lead Coordinator
Anthony Daugherty	Senior AP Control Specialist	Jon Otto	Environmental Chemist
Diane Davis	Environmental Health Specialist	Jennifer Palmer	Community Health Outreach Coordinator
Kathleen Davis	Public Health Nurse	Heidi Peck	Environmental Services Section Supervisor
Arona DeVore-Schultz	Environmental Health Specialist	Ruby Perin	Healthy Homes Section Supervisor
Shane Dodge	Air Quality Section Supervisor	Deb Riley	Environmental Health Specialist
Amy Drahos	Senior AP Control Specialist	Jill Roeder	Healthy Behaviors Assistant Supervisor
Pramod Dwivedi	Health Director	Sherry Schuchmann	Public Health Nurse
Cindy Fiester	Chronic Disease Program Coordinator	Cynthia Shubatt	Secretary
Carissa Griffin	Public Health Nurse	Tim Slothower	Environmental Health Technician
Hayley Hegland	Health Education Specialist	Lori Smith	Medical Assistant
Larry Hlavacek	Administrative Services Manager	Diana Stanford	Account Technician
James Hodina	Environmental Public Health Manager	Julie Stephens	Emergency Preparedness & Disaster Recovery Specialist
Kim Honn	Administrative Assistant	Joe Strahan	Air Permitting Engineer
Sue Ellen Hosch	Environmental Health Specialist	Jia Sun	Environmental Health Specialist
Katherine Jones	Health Education Specialist	Kayla Sweeney	Environmental Health Specialist
Cierra Katzmann	AmeriCorps-HealthCorps	Julia VonAlexander	CDC Associate
Mary Keiller	Secretary	Janell White	Air Quality Scientist
Theresa Keller	Nurse Practitioner	Lori Winborn	Intern
Teresa Krone	Nurse Practitioner		



Public Health
Prevent. Promote. Protect.

Linn County, Iowa

ROLE OF PUBLIC HEALTH

Mission:

To prevent disease and injuries, promote healthy living, protect the environment and ensure public health preparedness.

Vision:

Build a healthier Linn County

Linn County Public Health Core Values:

1. Create a Supportive, Positive Work Environment
2. Demonstrate Personal Integrity and Respect for Others
3. Be Accountable for Our Actions and Decisions
4. Communicate Openly and Effectively
5. Recognize Valued Contributions
6. Empower Teams to Develop Innovative Solutions
7. Achieve High Levels of Personal and Professional Excellence

Linn County Public Health
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