# TITLE V

Snapshots of the States Maternal and Child Health

FY 2007 Annual Report Data

Welcome to the PDF version of the Title V State Snapshots.

This document contains a quick overview of the Maternal and Child Health (MCH) programs of the 59 States and jurisdictions that receive funding from the Title V Maternal and Child Health Services Block Grant, based on the data that the States submitted in the Title V Information System. This version of the State Snapshots is based on data reported for the fiscal year 2007 annual report.

Each snapshot presents basic information about the State, such as the MCH program description, population, number of lives birth, Maternal and Child Health Bureau (MCHB) partnership funding, hotline data, and contact information for the MCH and Children with Special Health Care Needs directors. Additionally, breakdowns of the expenditures by population served, source of funds and category of service are shown as graphics. The 2007 results and 2012 goals for the national outcome and performance measures, as well as the State performance measures, are displayed. Finally, a list of MCHB discretionary grants awarded to both public and private organizations in the State are listed, which demonstrates the extent of MCHB funding in helping to address the health issues of maternal and child health populations.

I hope you will find this to be an informative and useful tool in understanding the health issues facing mothers and children and the programs that are in place within each State to address them.

Cassie B. Lauver, A.C.S.W.
Director, Division of State and Community Health
Maternal and Child Health Bureau

### **Data Sources**

Unless otherwise listed below, all data noted are reported by the States in the Title V Information System for the Title V Block Grant 2009 Application and 2007 Annual Report.

#### Other data sources:

**Population Data:** For the 50 states, the District of Columbia, and Puerto Rico: Population estimates (July 1, 2007), U.S. Bureau of the Census, for the remaining seven jurisdictions: 2007 CIA World Factbook; Washington, DC.

**Live Births:** National Vital Statistics Reports, Vol. 56, No. 7 (December 5, 2007), Centers for Disease Control. 2006 Live Birth data for Guam was not available, therefore 2005 data was used from the National Vital Statistics Reports, Vol.55, No. 11 (December 28, 2006), Centers for Disease Control. 2005 data for the Pacific Islands was retrieved from Pacific Regional Information System (PRISM). 2005 Live Birth data was obtained directly from the Federated States of Micronesia.

**FY 2007 MCH Partnership Funds and Listing of Title V and MCHB Discretionary Grants:** This MCH Partnership total includes other MCHB and HRSA grant programs. These data are from HRSA's Electronic Handbooks (EHBs) for Fiscal Year 2007.

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The Title V Program is administratively located within the Bureau of Family Health Services (FHS), a major unit within the Alabama Department of Public Health (ADPH). Through FHS, ADPH administers all aspects of the Title V Program except services for children and youth with special health care needs (CYSHCN). Children's Rehabilitation Service (CRS), administered by the Alabama Department of Rehabilitation Services (ADRS), is the lead agency for services to CYSHCN. This arrangement requires close collaboration between ADPH and CRS. In addition to the Title V Program, FHS administers the Title X Family Planning Grant; the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC); and the State Dental Program. In addition to administering CRS, ADRS administers the Alabama Hemophilia Program.

State Population: 4,627,851

Live Births: **63,235** 

#### MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$76,686,463 Other MCHB Grant Programs: \$3,995,159

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$80,681,622

#### **CONTACT INFORMATION**

#### For More Information on Title V:

#### **Title V Program, Contact:**

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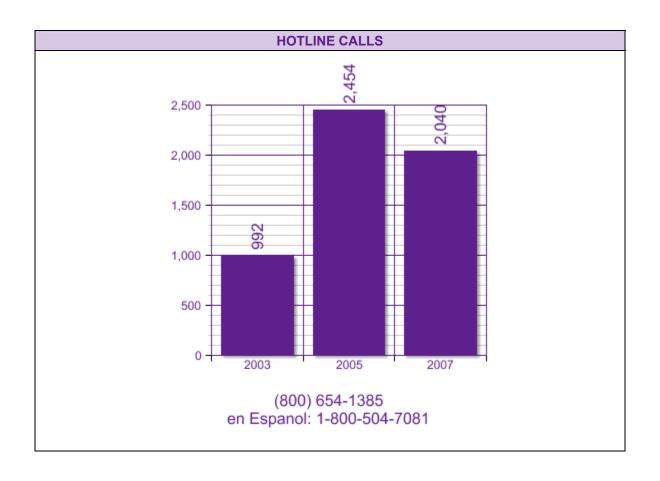
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### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

		rved and Population Gro	oup
Populations Served	Number of Individuals Served	Expenditure	s FY 2007
Pregnant Women	1,389	\$2,034,994	2.7%
Infants < 1 year old	60,117	\$8,256,011	10.8%
Children 1 to 22 years old	34,235	\$38,125,132	49.7%
Children with Special Healthcare Needs	16,346	\$26,028,718	33.9%
Others	102,692	\$0	0%
Administration		\$2,241,608	2.9%
Totals	214,779	\$76,686,463	100%
	0 (0%) Unobligated Balance 44% 0 (0%)		5%
	Program Income 33,851,693 (44.1%) Other Funds 3,794,909 (4.9%)		
	33,851,693 (44.1%) . Other Funds	of Services	



#### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	2
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	2
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	3
FY 2007 Total:	16
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	10.0	8.5
The ratio of the black infant mortality rate to the white infant mortality rate.	1.8	1.9
The neonatal mortality rate per 1,000 live births.	6.3	5.2
The postneonatal mortality rate per 1,000 live births.	3.6	3.3
The perinatal mortality rate per 1,000 live births plus fetal deaths.	8.6	8.4
The child death rate per 100,000 children aged 1 through 14.	*	*
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Of 0-9 year-old children enrolled in Alabama Medicaid's Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program, the percentage who received care coordination in the reporting year.	6.1%	6.2%
Of children and youth enrolled in Alabama Medicaid's Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program, the percentage who received any dental service in the reporting year.	45.0%	45%
The pregnancy rate (per 1,000) for adolescents aged 15-17 years.	*	34
The percentage of white male high school students who chewed tobacco or snuff on 1 or more of the 30 days preceding their participation in the Youth Risk Behavior Survey (YRBS).	*	27.9%
The degree to which the State CSHCN Program assures that all CYSHCN have adequate access to primary and specialty care and allied health and other related services.	13.0	15
The degree to which the State CSHCN Program collaborates with schools, advocacy groups, and families to enhance inclusive participation by CYSHCN in their schools and communities.	12.0	15
The degree to which the Bureau of Family Health Services (Bureau) collects, analyzes, and disseminates findings from data pertinent to ongoing maternal and child health (MCH) needs assessment.	14.0	18

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	59.9%	59.9%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	50%	50%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	65%	65%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	91.7%	91.7%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	38.3%	38.3%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	81.9%	89%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	28.3	23.9
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	26.4%	27.7%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	*	5.7
The percent of mothers who breastfeed their infants at 6 months of age.	*	30.5%
Percentage of newborns who have been screened for hearing before hospital discharge.	95.9%	95.7%
Percent of children without health insurance.	*	6.6%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	*	29.4%
Percentage of women who smoke in the last three months of pregnancy.	*	13.3%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	*	7.7
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	84.1%	85.6%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	79.2%	85.1%

#### 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
ALABAMA DEPARTMENT OF PUBLIC HEALTH
Montgomery, AL
\$115,000
(EMSC Partnership Grants)

#### **Healthy Start**

ELIMINATING DISPARITIES IN PERINATAL HEALTH MOBILE COUNTY HEALTH DEPARTMENT Mobile, AL \$1,500,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

HSI FOR ELIMINATING DISPARITIES IN PERINATAL HEALTH JEFFERSON COUNTY DEPARTMENT OF HEALTH Birmingham, AL \$875,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### Research

The Impact of Caregiver's (Parent) Health Literacy on Pediatric Outcomes UNIVERSITY OF ALABAMA AT BIRMINGHAM Birmingham, AL \$287,581 (MCH Research)

#### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
ALABAMA DEPARTMENT OF PUBLIC HEALTH
Montgomery, AL
\$140,000
(Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

ALABAMA'S SYSTEMS DEVELOPMENT INITIATIVE ALABAMA DEPARTMENT OF PUBLIC HEALTH Montgomery, AL \$94,644 (State Systems Development Initiative) MCH Pipeline Training Program ALABAMA STATE UNIVERSITY MONTGOMERY, AL \$169,934 (MCH Pipeline Training Program)

LEADERSHIP EDUCATION EXCELLENCE IN PEDIATRIC NUTRITION UNIVERSITY OF ALABAMA AT BIRMINGHAM Birmingham, AL \$175,000 (Leadership Training in Pediatric Nutrition)

Sickle Cell Treatment Demonstration Program HEALTH SERVICES, INC. Montgomery, AL \$320,000 (Sickle Cell Treatment Demonstration Program)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation ALABAMA DEPT. OF REHABILITATION SERVICES MONTGOMERY, AL \$118,000 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy UNIVERSITY OF ALABAMA IN TUSCALOOSA Tuscaloosa, AL \$50,000 (Traumatic Brain Injury Protection and Advocacy)

#### **Universal Newborn Hearing Screening**

Universal Newborn Hearing Screening and Intervention AL ST DEPARTMENT OF PUBLIC HEALTH Montgomery, AL \$150,000 (Universal Newborn Hearing Screening and Intervention)

The Section of Women's, Children's and Family Health within the Division of Public Health, Alaska Department of Health and Social Services, administers the MCH Title V program. Services included within Title V administrative control include: 1. CSHCN related programs cover Specialty Clinics (Cleft Lip and Palate Clinic and Neurodevelopmental/Autism Clinics, Birth Defects, Genetics and Metabolic Clinics, Newborn Metabolic Screening, and Early Hearing Detection and Intervention (EHDI) Program/Universal Newborn Hearing screening 2. Direct and Enabling services for women and children through grants or contracts include Breast and Cervical Cancer Screening Outreach, parent navigation services for CSHCN, and Family Planning and Reproductive Health Services offered through Public Health nursing centers, community health centers and federally qualified health centers and partnerships serving adolescent populations 3. Data collection and surveillance activities include the Alaska Birth Defects/ FAS Registry, the Alaska Maternal and Infant Mortality Review/Child Death Review, PRAMS, Toddler Survey (CuBS), Alaska Surveillance of Child Abuse and Neglect, and special research and data analysis projects. Other programs that are not administered by Title V, but collaborate closely with Title V include programs influencing the health and safety of young children and adolescents including Early Intervention/Infant Learning program, EPSDT, Alaska Immunization Program, Women, Infants and Children (WIC) Nutrition program, Family Violence Prevention, Childhood and Adolescent Injury Prevention, Family Nutrition, and the Early Comprehensive Care Systems (ECCS), Strengthening Families Initiative, Assuring Better Child Development Screening Academy, Early Childhood Mental Health, Several of these aforementioned programs receive Title V funding in support of their outcome objectives.

State Population: **683,478** Live Births: **10,991** 

#### MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$10,591,867 Other MCHB Grant Programs: \$925,350

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$11,517,217

#### **CONTACT INFORMATION**

#### For More Information on Title V:

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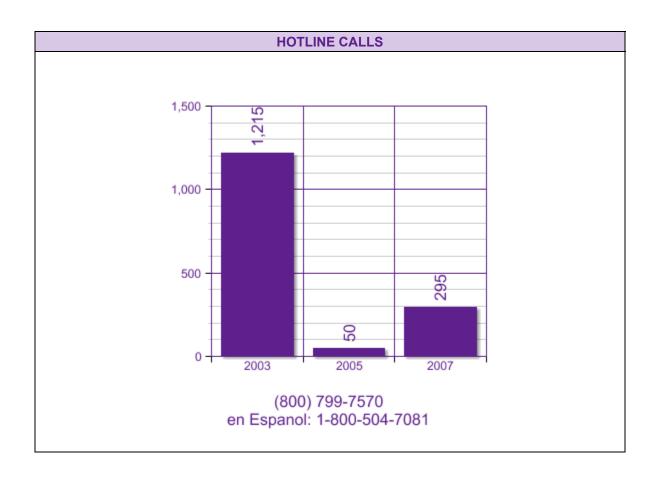
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#### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By N	umber of Individuals Se	rved and Population Gro	oup
Populations Served	Number of Individuals Served	Expenditures	s FY 2007
Pregnant Women	12,515	\$339,931	3.2%
Infants < 1 year old	11,110	\$964,953	9.1%
Children 1 to 22 years old	6,097	\$1,524,528	14.4%
Children with Special Healthcare Needs	4,250	\$6,374,653	60.2%
Others	0	\$555,110	5.2%
Administration		\$832,692	7.9%
Totals	33,972	\$10,591,867	100%
3	State Funds 9,378,903 (88.5%)  Local MCH Funds 0 (0%)  Unobligated Balance 25,000 (0.2%)  Program Income 57,598 (0.5%)		% 9%
6	. Other Funds 0 (0%)		
	By Category	of Services	
2. 3. 4.	Direct Health Care rivices \$512,408 (4.8%)  Enabling Services \$4,183,326 (39.5%)  Population-Based Services \$1,764,600 (16.7%)  Infrastructure-Building rivices \$4,131,533 (39%)	39.5% 16.7% 39%	



#### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	2
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	3
FY 2007 Total:	17
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

## MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	*	6
The ratio of the black infant mortality rate to the white infant mortality rate.	*	*
The neonatal mortality rate per 1,000 live births.	*	2.7
The postneonatal mortality rate per 1,000 live births.	*	*
The perinatal mortality rate per 1,000 live births plus fetal deaths.	*	6.5
The child death rate per 100,000 children aged 1 through 14.	*	34
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percentage of mothers of newborns who say their physician or health plan would not start prenatal care as early as they wanted or they could not get an appointment as early as they wanted.	*	15%
Percent of women who smoked during the last 3 months of pregnancy among women who smoked 3 months prior to pregnancy and were talked to about the effects of smoking by a prenatal health care provider.	*	60%
Percentage of children ages 10-11 who are at-risk for being overweight.	40.1%	35%
Rate (per 1,000) of substantiated reports of harm children ages 0 through 18.	14.8	12
Percentage of women who recently had a live-born infant who reported their prenatal health care provider advised them not to drink alcohol during their pregnancy.	*	99%
Prevalence (per 100) of unintended pregnancies that resulted in a live birth among women who reported having a controlling partner during the 12 months prior to getting pregnant.	*	35%
Percentage of women who recently had a live-born infant who reported that they always or often felt down, depressed, or hopeless since their new baby was born.	*	8%
Prevalence at birth (per 1,000) of Fetal Alcohol Spectrum Disorders (FASD).	19.1	17
Percentage of infants who are reported to have a Cleft Lip/Palate defect who access the Title V sponsored Cleft Lip and Palate Specialty Clinic within the first year of life.	*	30%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	51.8%	65%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	39.3%	45%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	62.2%	70%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	85.1%	90%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	42.2%	50%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	*	90%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	*	18
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	52.4%	55%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	*	4.5
The percent of mothers who breastfeed their infants at 6 months of age.	*	70%
Percentage of newborns who have been screened for hearing before hospital discharge.	92.5%	100%
Percent of children without health insurance.	*	8.5%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	21.6%	20%
Percentage of women who smoke in the last three months of pregnancy.	*	13.5%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	*	27
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	*	90%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	*	85%

#### 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants STATE OF ALASKA DEPT OF HEALTH & SOCIAL SVCS Juneau, AK \$115,000 (EMSC Partnership Grants)

#### **Title V - Community Integrated Service Systems (CISS)**

Community-Based Integrated Service Systems (Local/State) STATE OF ALASKA DEPT OF HEALTH & SOCIAL SVCS Anchorage, AK \$140,000 (Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

BUILDING DATA CAPACITY IN ALASKA STATE OF ALASKA DEPT OF HEALTH & SOCIAL SVCS Juneau, AK \$94,644 (State Systems Development Initiative)

Children's Oral Healthcare Access Program State of Alaska, Dept of Health & Social Services Anchorage, AK \$159,516 (Childrens Oral Healthcare Access Program)

Healthy Behaviors in Women SOUTHEAST ALASKA REGIONAL HEALTH CONSORT Juneau, AK \$141,190 (Healthy Behaviors in Women)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation STATE OF ALASKA DEPT OF HEALTH & SOCIAL SVCS Anchorage, AK \$100,000 (Traumatic Brain Injury Implementation) Traumatic Brain Injury Protection and Advocacy DISABILITY LAW CENTER OF ALASKA ANCHORAGE, AK \$50,000 (Traumatic Brain Injury Protection and Advocacy)

### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING STATE OF ALASKA DEPT OF HEALTH & SOCIAL SVCS Juneau, AK \$125,000 (Universal Newborn Hearing Screening and Intervention)

The MCH Block Grant funds come directly to the Arkansas Department of Health, and 34% of those funds are made available to the DHS Division of Developmental Disabilities Services, Children's Medical Services Program. The process of completing and submitting this application is a partnership with Ms. Nancy Holder and her CSHCN Staff.

State Population: 2,834,797

Live Births: 40,973

### MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$24,275,824 Other MCHB Grant Programs: \$1,280,203

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$25,556,027

#### **CONTACT INFORMATION**

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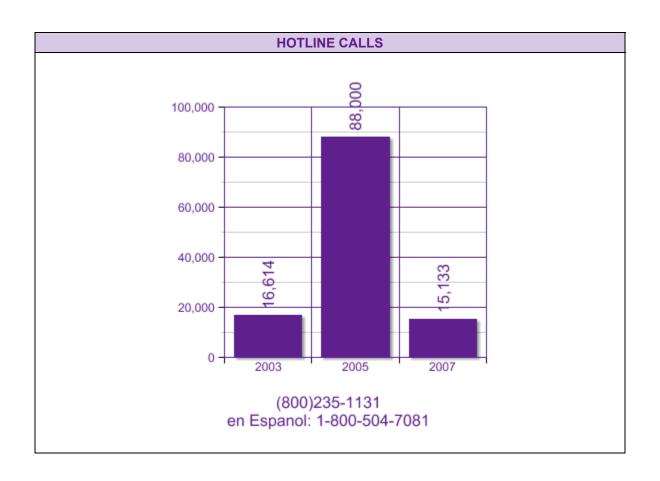
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#### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By N	umber of Individuals Se	erved and Population Gr	oup
Populations Served	Number of Individuals Served	Expenditure	es FY 2007
Pregnant Women	53,555	\$3,062,131	12.6%
Infants < 1 year old	40,166	\$1,243,726	5.1%
Children 1 to 22 years old	483,261	\$2,965,990	12.2%
Children with Special Healthcare Needs	16,059	\$6,231,976	25.7%
Others	0	\$10,335,523	42.6%
Administration		\$436,478	1.8%
Totals	593,041	\$24,275,824	100%
<b>■</b> 1	. Federal Allocation 7,277,379 (30%)		
	4,321,591 (17.8%)		30%
■ <sup>3</sup>	<ol> <li>Local MCH Funds 0 (0%)</li> </ol>		70
■ 4	. Unobligated Balance 529 140,483 (0.6%)	6 —	
5	. Program Income 12,536,371 (51.6%)	1	8%
<b>6</b>	Other Funds 0 (0%)	1	%
	By Category	of Services	
	Direct Health Care ervices \$15,281,631 (62.9%)	$\wedge$	
2.	Enabling Services \$4,845,454 (20%)		
3.	Population-Based Services \$1,505,102 (6.2%)	62.9%	
	Infrastructure-Building ervices \$2,643,637 (10.9%)	20% 6.2% 10.9%	



#### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	1
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	1
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	1
Family members are involved in service training of CSHCN staff and providers.	1
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	1
Family members of diverse cultures are involved in all of the above activities.	1
FY 2007 Total:	6
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

## MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	7.5	8.2
The ratio of the black infant mortality rate to the white infant mortality rate.	2.0	1.3
The neonatal mortality rate per 1,000 live births.	4.3	4.9
The postneonatal mortality rate per 1,000 live births.	3.3	3
The perinatal mortality rate per 1,000 live births plus fetal deaths.	8.9	9.6
The child death rate per 100,000 children aged 1 through 14.	27.9	30
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The percent of Arkansas high school students who have engaged in sexual intercourse.	54.9%	55%
The percentage of children through age 18 and below 200 percent of poverty enrolled in ARKids First child health insurance program.	30.5%	36%
The percent of pregnant women counseled for HIV testing.	67.0%	72%
Percentage of children receiving WIC services who are above the 95th percentile on the National Center for Health Statistic weight for height growth charts.	11.2%	10.8%
To improve the percent of 14 to 15 year olds on Children's Medical Services (CMS) who state that CMS transition services have helped improve their knowledge and ability to transition into adult life.	21.7%	26%
Improve percent of parents responding to the question on Children's Medical Services (CMS) Parent Satisfaction Survey that CMS service coordination teams told them about other services available.	55.7%	58%
The percent of public school students overweight greater than 95th percentile.	20.6%	19.6%
The percentage of at-risk for overweight children in Arkansas public schools.	17.2%	16.6%
The percent of women smoking during pregnancy.	15.7%	13.5%
To increase the percentage of ADH Family Planning clients receiving nutritional counseling during an initial or annual visit in the Family Planning clinics.	84.0%	90%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	61.7%	66%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	50.2%	68%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	66.5%	70%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	89.1%	90%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	33.1%	38%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	84.0%	95%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	30.3	34
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	15.0%	20%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	4.9	5.8
The percent of mothers who breastfeed their infants at 6 months of age.	23.4%	29%
Percentage of newborns who have been screened for hearing before hospital discharge.	98.2%	98.6%
Percent of children without health insurance.	9.3%	10.6%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	15.8%	12%
Percentage of women who smoke in the last three months of pregnancy.	19.4%	20.2%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	8.1	6
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	62.2%	68%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	76.4%	82%

#### 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
Arkansas Children's Hospital Research Institute
Little Rock, AR
\$114,914
(EMSC Partnership Grants)

EMSC Targeted Issue Grants Arkansas Children's Hospital Research Institute Little Rock, AR \$196,849 (EMSC Targeted Issue Grants)

#### **Healthy Start**

HEALTHY START INTIATIVE
MISSISSIPPI COUNTY ARKANSAS EOC, INC
Blytheville, AR
\$270,000
(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### **Title V - Community Integrated Service Systems (CISS)**

CISS - SECCS (PLANNING)
ARKANSAS DEPARTMENT OF HEALTH
Little Rock, AR
\$140,000
(Community-Based Integrated Service Systems (Local/State))

### Title V - Special Projects of Regional and National Significance (SPRANS)

ARKANSAS STATE SYSTEMS DEVELOPMENT INITIATIVE ARKANSAS DEPARTMENT OF HEALTH Little Rock, AR \$94,644 (State Systems Development Initiative)

Genetic Services Project University of Arkansas for Medical Sciences-Cancer Research Center Little Rock, AR \$185,000 (Genetic Services Project)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation Arkansas Department of Health Little Rock, AR \$99,155 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy DISABILITY RIGHTS CENTER INC LITTLE ROCK, AR \$50,000 (Traumatic Brain Injury Protection and Advocacy)

#### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING ARKANSAS DEPARTMENT OF HEALTH Little Rock, AR \$129,641 (Universal Newborn Hearing Screening and Intervention)

# AMERICAN SAMOA

The MCH Programs are administered directly by the Deputy Director of Health, in the same organizational branch as all of the other federally funded programs in the Department of Health.

State Population: **57,663** Live Births: **1,442** 

### MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: **\$911,345**Other MCHB Grant Programs: **\$229,644** 

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$1,140,989

#### **CONTACT INFORMATION**

#### For More Information on Title V:

#### **Title V Program, Contact:**

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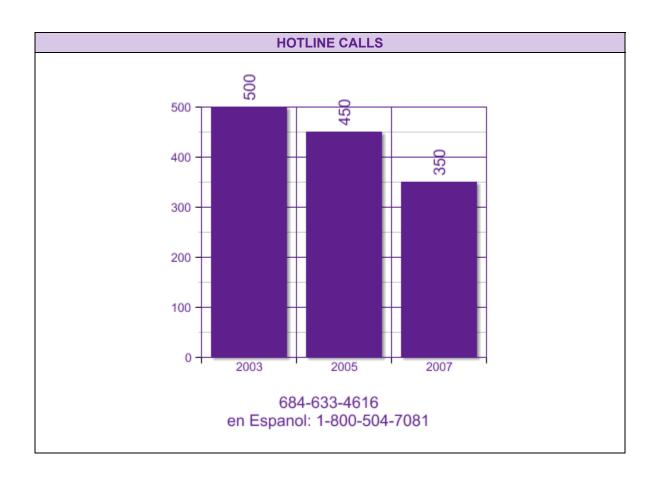
doh-mch.net

#### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group			
Populations Served	Number of Individuals Served	Expenditure	es FY 2007
Pregnant Women	1,291	\$142,029	15.6%
Infants < 1 year old	1,326	\$142,029	15.6%
Children 1 to 22 years old	3,267	\$264,058	29%
Children with Special Healthcare Needs	140	\$268,541	29.5%
Others	360	\$36,526	4%
Administration		\$58,162	6.4%
Totals	6,384	\$911,345	100%
3 3 4	Federal Allocation 505,547 (55.5%)     State Funds 405,798 (44.5%)     Local MCH Funds 0 (0%)     Unobligated Balance 0 (0%)     Program Income 0 (0%)	6/-	55%
<b>6</b>	i. Other Funds 0 (0%)		
By Category of Services			
Se	Direct Health Care ervices \$407,150 (44.7%) Enabling Services \$121,497 (13.3%)	44.7%	
3.	Population-Based Services \$231,715 (25.4%)		

4. Infrastructure-Building Services \$150,983 (16.6%) 13.3%

25.4% 16.6%



# AMERICAN SAMOA

#### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	1
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	1
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	1
Family members are involved in service training of CSHCN staff and providers.	1
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	0
Family members of diverse cultures are involved in all of the above activities.	3
FY 2007 Total:	7
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# AMERICAN SAMOA

## MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	8.5	8
The ratio of the black infant mortality rate to the white infant mortality rate.	0.0	*
The neonatal mortality rate per 1,000 live births.	5.4	3
The postneonatal mortality rate per 1,000 live births.	3.1	2
The perinatal mortality rate per 1,000 live births plus fetal deaths.	11.6	*
The child death rate per 100,000 children aged 1 through 14.	15.9	50
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percent of infants born to women receiving adequate Prenatal Care according to the Kotelchuk Index.	22.1%	15%
Percentage of annual re-evaluation of Children with Special Health Care Needs (CSHCN) by the Interdisciplinary Team.	87.9%	90%
Percent of 2, 3, and 4 year old children who are seen in the in the MCH Well Child Clinics who access dental health services.	14.9%	22%
Percentage of 4 month olds in Well Baby Clinics who are exclusively breastfed.	31.2%	32%
Percent of 14-17 year olds attending school who admitted to smoking in the last 30 days.	24.2%	20%
To decrease the percentage of 1 year olds with low hemoglobin (less than 11)	10.9%	27%
Percent of children among the children with special needs who are known to the CSN Program who receive an annual dental assessment.	87.9%	68%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	0.0%	0%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	89.3%	100%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	89.3%	93%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	100.0%	100%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	42.9%	50%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	21.4%	25%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	69.7%	76%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	14.8	8
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	44.1%	52%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	3.8	2
The percent of mothers who breastfeed their infants at 6 months of age.	*	*
Percentage of newborns who have been screened for hearing before hospital discharge.	0.0%	0%
Percent of children without health insurance.	0.0%	*
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	14.0%	12%
Percentage of women who smoke in the last three months of pregnancy.	3.3%	2%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	0.0	28
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	0.0%	0%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	22.1%	16%

# AMERICAN SAMOA

# 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

# **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants LBJ Tropical Medical Center Pago Pago, AS \$115,000 (EMSC Partnership Grants)

## Title V - Special Projects of Regional and National Significance (SPRANS)

MCH PROGRAMS INFORMATION SYSTEMS DEPARTMENT OF HEALTH AMERICAN SAMOA GOVERNMENT DEPT OF HEALTH PAGO PAGO, AS \$94,644 (State Systems Development Initiative)

## **Traumatic Brain Injury**

Traumatic Brain Injury Protection and Advocacy AMERICAN SAMOA GOVERNMENT Pago Pago, AS \$20,000 (Traumatic Brain Injury Protection and Advocacy)

The Arizona Department of Health Services was established as the State Public Health Agency in 1973 under A.R.S. Title 36 and is designated as Arizona's Title V Agency. The Bureau of Women's and Children's Health (BWCH) and the Office for Children with Special Health Care Needs (OCSHCN) provide policies and standards development, comprehensive planning, community organization and development, training and technical assistance, and direct provision of screening, preventive and curative services and service coordination. Services provided through the Title V program include, but are not limited to, the statewide Newborn Screening, Universal Newborn Hearing Screening, High Risk Perinatal Services, community development, Community Grants Initiative, Family Planning, Hotline, Health Start, Medical Home Project, and Traumatic Brain Injury Project.

State Population: 6,338,755

Live Births: 102,475

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$51,221,075 Other MCHB Grant Programs: \$2,545,411

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$53,766,486

#### **CONTACT INFORMATION**

#### For More Information on Title V:

#### **Title V Program, Contact:**

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# Title V Program's Services for Children with Special Health Care Needs, contact:

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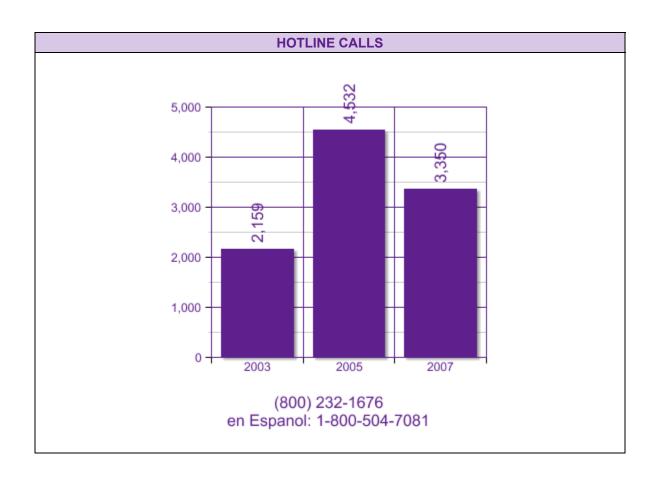
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## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group			
Populations Served	Number of Individuals Served	Expenditure	
Pregnant Women	24,135	\$3,004,656	5.9%
Infants < 1 year old	108,908	\$8,648,465	16.9%
Children 1 to 22 years old	569,980	\$8,548,907	16.7%
Children with Special Healthcare Needs	32,631	\$30,621,095	59.8%
Others	9,642	\$0	0%
Administration		\$397,952	.8%
Totals	745,296	\$51,221,075	100%
3 4	7,021,943 (13.7%)  State Funds 17,239,432 (33.7%)  Local MCH Funds 0 (0%)  Unobligated Balance 685,986 (1.3%)  Program Income 0 (0%)	6-34	4% 4%
<b>6</b>	Other Funds 26,273,714 (51.3%)	19	76
	By Category	of Services	
2. 3. 4.	Direct Health Care rvices \$31,363,124 (61.2%)  Enabling Services \$1,509,017 (2.9%)  Population-Based Services \$10,744,971 (21%)  Infrastructure-Building rvices \$7,603,963 (14.8%)	2.9% 21% 14.8%	



## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	2
FY 2007 Total:	17
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	6.3	6.1
The ratio of the black infant mortality rate to the white infant mortality rate.	3.1	1.8
The neonatal mortality rate per 1,000 live births.	4.3	4
The postneonatal mortality rate per 1,000 live births.	2	2
The perinatal mortality rate per 1,000 live births plus fetal deaths.	5.9	5.8
The child death rate per 100,000 children aged 1 through 14.	21.5	22
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Proportion of low-income women who receive reproductive health/family planning services.	49.2%	51%
The percent of high school students who are overweight or at-risk for overweight.	25.9	24
The percent of preventable fetal and infant deaths out of all fetal and infant deaths.	25.0	31
Emergency department visits for unintentional injuries per 100,000 children age 1-14.	6902.9	7476
The percent of women entering prenatal care during their first trimester in underserved primary care areas.	50%	46%
Percent of Medicaid enrollees age 1-18 who received at least one preventive dental service within the last year.	34.0%	44.5%
Percent of children and youth with special health care needs who have access to service.	0.1%	0.3%
Percentage of state MCH programs that formally incorporate screening for behavioral health issues.	33.3%	50%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	53.6%	58%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	40.4%	43%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	58.1%	59%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	86.5%	89%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	39.4%	43%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	76.2%	80%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	34	32
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	36.2%	37%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	4	3.5
The percent of mothers who breastfeed their infants at 6 months of age.	46.5%	50%
Percentage of newborns who have been screened for hearing before hospital discharge.	95.5%	99%
Percent of children without health insurance.	17%	15.7%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	36.9%	34%
Percentage of women who smoke in the last three months of pregnancy.	4.7%	4%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	13	10
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	77.5%	84%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	77.7%	80%

# 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
ARIZONA DEPARTMENT OF HEALTH SERVICES
Phoenix, AZ
\$114,702
(EMSC Partnership Grants)

#### **Healthy Start**

HSI: ELIMINATING DISPARITIES IN PERINATAL HEALTH MARICOPA COUNTY DEPARTMENT OF HEALTH Tempe, AZ \$400,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

Disparities in Perinatal Health-Border Initiatives MARIPOSA COMMUNITY HEALTH CENTER, INC Nogales, AZ \$255,664 (Disparities in Perinatal Health-Border Initiatives)

#### Research

MCH Research Tuba City Regional Health Care Corporation Tuba City, AZ \$235,151 (MCH Research)

# Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
ARIZONA DEPARTMENT OF HEALTH SERVICES
Phoenix, AZ
\$140,000
(Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

State Implementation Grants for Integrated Community Systems for CSHCN ARIZONA DEPARTMENT OF HEALTH SERVICES
Phoenix, AZ
\$275,000
(State Implementation Grants for Integrated Community Systems for CSHCN)

State Implementation Grants for Integrated Community Systems for CSHCN NAVAJO Nation
Window Rock, AZ
\$295,500
(State Implementation Grants for Integrated Community Systems for CSHCN)

ARIZONA STATE SYSTEMS DEVELOPMENT INITIATIVE Arizona Department of Health Services Phoenix, AZ \$94,644 (State Systems Development Initiative)

Healthy Behaviors in Women WHITE MOUNTAIN APACHE TRIBE Whiteriver, AZ \$141,186 (Healthy Behaviors in Women)

Family Professional Partnership/CSHCN Raising Special Kids Phoenix, AZ \$95,700 (Family Professional Partnership/CSHCN)

ROCKY MOUNTAIN MCH WORKFORCE ENHANCEMENT PROGRAM UNIVERSITY OF ARIZONA Tucson, AZ \$179,091 (Certificate in MCH Public Health)

# Traumatic Brain Injury

Traumatic Brain Injury Implementation
Arizona State Department of Economic Security
Phoenix, AZ
\$118,069
(Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy ARIZONA CENTER FOR DISABILITY LAW Phoenix, AZ \$50,734 (Traumatic Brain Injury Protection and Advocacy)

### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING Arizona Department of Health Services Phoenix, AZ \$149,970 (Universal Newborn Hearing Screening and Intervention)

Title V funds are administered by the MCAH Program and the Children's Medical Services (CMS) Branch in the State of California. The CMS Branch is part of the Department of Health Care Services and the MCAH Program is part of the California Department of Public Health in the Center for Family Health, which also includes the Women, Infants and Children Program and the Genetic Disease Screening Program. The MCAH Program conducts statewide assessment of needs, develops policies, plans and programs to improve the health of women, infants, adolescents, and families in California utilizing the core public health functions. The CMS Branch is responsible for the Child Health and Disability Prevention Program (CHDP), California Children's Services (CCS) program, and the Genetically Handicapped Persons Program (GHPP). CCS is the Children with Special Health Care Needs program.

State Population: 36,553,215

Live Births: **562,431** 

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$1,384,412,247

Other MCHB Grant Programs: \$13,007,290

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$1,397,419,537

#### **CONTACT INFORMATION**

#### For More Information on Title V:

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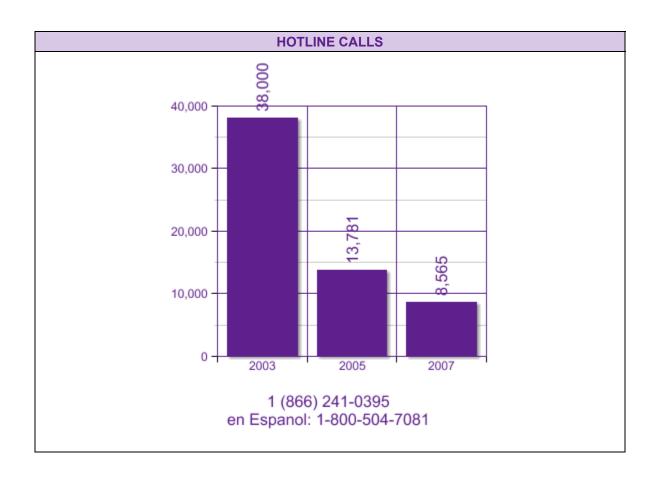
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## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By N	umber of Individuals	Served and Population Gro	up
Populations Served	Number of Individuals Served	Expenditures	s FY 2007
Pregnant Women	562,157	\$48,729,499	3.5%
Infants < 1 year old	615,204	\$33,838,896	2.4%
Children 1 to 22 years old	1,477,901	\$125,461,651	9.1%
Children with Special Healthcare Needs	182,800	\$1,172,913,144	84.7%
Others	*	\$0	0%
Administration		\$3,469,057	.3%
Totals	2,838,062	\$1,384,412,247	100%
= <sup>4</sup>	683,976,881 (49.4%)  Local MCH Funds 0 (0%)  Unobligated Balance 0 (0%)  Program Income 657,526,453 (47.5%)	7% — ——————————————————————————————————	%
<b>■</b> <sup>6</sup>	Other Funds 0 (0%)		
	By Categor	ry of Services	
2. 3. 4.	Direct Health Care Prices \$1,076,294,212 (77.7%)  Enabling Services \$210,987,701 (15.2%)  Population-Based Service \$50,531,316 (3.7%)  Infrastructure-Building Prices \$46,599,018 (3.4%)	5 77.7% 15.2% 3.7%	



## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	2
Family members of diverse cultures are involved in all of the above activities.	3
FY 2007 Total:	16
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	5	4.9
The ratio of the black infant mortality rate to the white infant mortality rate.	2.6	2.3
The neonatal mortality rate per 1,000 live births.	3.5	3.3
The postneonatal mortality rate per 1,000 live births.	1.6	1.5
The perinatal mortality rate per 1,000 live births plus fetal deaths.	5.4	5.2
The child death rate per 100,000 children aged 1 through 14.	15.9	15.9
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The percent of children birth to 21 years enrolled in the CCS program who have a designated medical home.	84.2%	84.2%
The ratio of pediatric cardiologists authorized by the CCS program to children birth through 14 years of age receiving cardiology services from these pediatric cardiologists.	0.0	0
The percent of women, aged 18-44 years, who reported 14 or more "not good" mental health days in the past 30 days ("frequent mental distress").	13.4%	12.4%
The percent of women who reported drinking any alcohol in the first or last trimester of pregnancy.	15.8%	16%
The rate of deaths per 100,000 adolescents aged 15 through 19 years caused by motor vehicle injuries.	16.9	15.8
The incidence of neural tube defects (NTDs) per 10,000 live births plus fetal deaths among counties participating in the California Birth Defects Monitoring System.	7	5.6
The percent of newly referred clients to the CCS program whose cases are opened within 30 days of referral.	76.2%	79%
The percent of births resulting from an unintended pregnancy.	43.2%	39.3%
The percent of 9th grade students who are not within the Healthy Fitness Zone for Body Composition.	32%	31.9%
The percent of women, aged 18 years or older, reporting intimate partner physical, sexual or psychological abuse in the past 12 months.	7.6%	7.9%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	46.6%	52.5%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	42.2%	51%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	59.6%	65.5%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	85.3%	87%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	37.1%	38%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	80.3%	80.9%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	20.0	18.5
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	*	30.1%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	2.6	2.7
The percent of mothers who breastfeed their infants at 6 months of age.	69.4%	73.5%
Percentage of newborns who have been screened for hearing before hospital discharge.	76%	95%
Percent of children without health insurance.	13.9%	12.7%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	33.2%	33.4%
Percentage of women who smoke in the last three months of pregnancy.	3%	3.2%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	5.2	4.4
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	66.9%	68.4%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	85.9%	87.5%

# 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

# **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants State of California Sacramento, CA \$114,997 (EMSC Partnership Grants)

EMSC Targeted Issue Grants
REGENTS OF THE U OF CALIFORNIA
Davis, CA
\$199,893
(EMSC Targeted Issue Grants)

EMSC Targeted Issue Grants
Los Angeles Biomedical Research Institute at Harbor-UCLA Med
Torrance, CA
\$198,729
(EMSC Targeted Issue Grants)

Emergency Medical Service for Children Network Development
REGENTS OF THE U OF CALIFORNIA
Davis, CA
\$742,630
(Emergency Medical Services for Children: Network Development Demonstration Project)

# Healthy Start

ELIMINATING DISPARITIES IN PERINATAL HEALTH SHIELDS FOR FAMILIES PROJECT INC. Los Angeles, CA \$750,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

HEALTHY START INITIATIVE
ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY
San Leandro, CA
\$2,000,000
(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELINIMINATING DISPARITIES IN PERINATAL HEALTH FRESNO COUNTY HUMAN SERVICES SYSTEM Fresno, CA \$1,150,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

Disparities in Perinatal Health-Border Initiatives Project Concern International San Diego, CA \$596,922 (Disparities in Perinatal Health-Border Initiatives)

#### Research

MCH Research REGENTS OF THE U OF CALIFORNIA SACRAMENTO, CA \$377,368 (MCH Research)

MCH Research THE REGENTS OF THE UNIV OF CALIFORNIA LOS ANGELES, CA \$254,997 (MCH Research)

Birth Outcomes And Early Health Trajectories SAN DIEGO STATE UNIVERSITY FOUNDATION SAN DIEGO, CA \$119,573 (MCH Research)

Using The National Survey Of Children's Health To Examine Medical Home Effects On Asthma Hospitalizations For Vulnerable Children UNIVERSITY OF SOUTHERN CALIFORNIA Los Angeles, CA \$100,000 (MCH Research)

Leveraging Technology as a Clinician Extender to Screen Culturally Diverse Young Women for Chlamydia During Urgent Care
THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, SAN FRANCISCO
San Francisco, CA
\$291,472
(MCH Research)

Increasing Access and Improving the Care Delivered to Abused Children in Rural, Underserved Hospitals with Telemedicine Regents of the University of California Davis, CA \$298,703 (MCH Research)

Neighborhood Effects on Children's Health & Access to Care THE REGENTS OF THE UNIV OF CALIFORNIA LOS ANGELES, CA \$229,488 (MCH Research)

### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
California Department of Public Health
Sacramento, CA
\$140,000
(Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

State Implementation Grants for Integrated Community Systems for CSHCN CHILDRENS HOSPITAL LOS ANGELES Los Angeles, CA \$299,670 (State Implementation Grants for Integrated Community Systems for CSHCN)

Healthy Tomorrows Partnership for Children Program Little Company of Mary Health Services Torrance, CA \$50,000 (Healthy Tomorrows Partnership for Children Program)

Health Families Expansion Program
Pediatric Dental Initative of the North Coast, Inc
Santa Rosa, CA
\$50,000
(Healthy Tomorrows Partnership for Children Program)

Healthy Tomorrows Partnership for Children Program Community Action Partnership of Sonoma County Santa Rosa, CA \$50,000 (Healthy Tomorrows Partnership for Children Program)

Healthy Tomorrows Partnership for Children Program
CENTRO DE SALUD DE LA COMUNIDAD SAN YSIDRO
San Ysidro, CA
\$50,000
(Healthy Tomorrows Partnership for Children Program)

CMS NET (CSHCN DATA SYSTEM) AS AN INFO., NEEDS ASSESS., AND PERF. MEASURE TOOL
CA ST DEPARTMENT OF HEALTH SERVICES

SACRAMENTO, CA

\$94,644

(State Systems Development Initiative)

REGION IX COMPREHENSIVE HEMOPHILIA CARE PROGRAM CHILDREN'S HOSPITAL OF ORANGE COUNTY Orange, CA \$779,864 (Hemophilia Treatment Centers (SPRANS))

GENETICS SERVICES SICKLE CELL DISEASE FOUNDATION OF CALIFORNIA Culver City, CA \$183,000 (Genetic Services Project)

GENETICS SERVICES Children's Hospital & Research Center of Oakland Oakland, CA \$183,000 (Genetic Services Project)

Children's Oral Healthcare Access Program
DENTAL HEALTH FOUNDATION
Oakland, CA
\$160,000
(Childrens Oral Healthcare Access Program)

Healthy Behaviors in Women FAMILY HEALTH CENTERS OF SAN DIEGO, INC. San Diego, CA \$145,773 (Healthy Behaviors in Women)

Family Professional Partnership/CSHCN SUPPORT FOR FAMILIES OF CHILDREN W/DISABILITIES San Francisco, CA \$95,700 (Family Professional Partnership/CSHCN)

GENETICS SERVICES
Children's Hospital & Research Center of Oakland
Oakland, CA
\$175,000
(Thalassemia)

Awareness and Access to Care for Children and Youths with Epilepsy CHILDRENS HOSPITAL LOS ANGELES Los Angeles, CA \$495,000 (Awareness and Access to Care for Children and Youths with Epilepsy)

Epidemiological MCH/SPH Institute
THE REGENTS OF THE UNIV OF CALIFORNIA
LOS ANGELES, CA
\$26,000
(Epidemiological MCH/SPH Institute)

MCH Pipeline Training Program
THE REGENTS OF THE UNIV OF CALIFORNIA
LOS ANGELES, CA
\$170,000
(MCH Pipeline Training Program)

Leadership Training in Pediatric Dentistry
THE REGENTS OF THE UNIV OF CALIFORNIA
LOS ANGELES, CA
\$210,000
(Leadership Training in Pediatric Dentistry)

MCH Knowledge to Practice
The Regents of the University of California
Berkeley, CA
\$30,000
(MCH Continuing Education)

LEADERSHIP TRAINING IN ADOLESCENT HEALTH
The Regents of the University of California, San Francisco
San Francisco, CA
\$449,000
(Leadership Education in Adolescent Health)

ORAL HEALTH POLICY CENTER
THE REGENTS OF THE UNIV OF CALIFORNIA
LOS ANGELES, CA
\$310,000
(Oral Health)

NATIONAL ADOLESCENT HEALTH INFORMATION CENTER The Regents of the University of California, San Francisco San Francisco, CA \$200,000 (Adolescent Health/School-Based Health)

POLICY INFORMATION & ANALYSIS CENTER CHILDHOOD/ADOLESCENT The Regents of the University of California, San Francisco San Francisco, CA \$250,000 (Adolescent Health/School-Based Health)

TRAINING & TECHNICAL ASSIST CTR FOR MENTAL HEALTH IN SCH THE REGENTS OF THE UNIV OF CALIFORNIA LOS ANGELES, CA \$300,000 (Adolescent Health/School-Based Health)

Adolescent Health/School-Based Health THE REGENTS OF THE UNIV OF CALIFORNIA LOS ANGELES, CA \$300,000 (Adolescent Health/School-Based Health)

#### Traumatic Brain Injury

Traumatic Brain Injury Implementation CALIFORNIA DEPARTMENT OF MENTAL HEALTH SACRAMENTO, CA \$118,600 (Traumatic Brain Injury Implementation) Traumatic Brain Injury Protection and Advocacy Disability Rights California SACRAMENTO, CA \$117,267 (Traumatic Brain Injury Protection and Advocacy)

# **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING CALIFORNIA DEPARTMENT OF EDUCATION SACRAMENTO, CA \$150,000 (Universal Newborn Hearing Screening and Intervention)

# COLORADO

The Colorado Department of Public Health and Environment administers the state Title V grant within the Prevention Services Division as part of the Center for Healthy Families and Communities. Most of the programs associated with the Title V grant are housed in this Center that includes the Special Supplemental Nutrition Program for Women, Infants and Children; the Child and Adult Care Food Program housed with WIC; the Women's Health Unit (Family Planning, Prenatal, Prenatal Plus and Nurse Home Visitor programs); the Child, Adolescent & School Health (CASH) Unit (Early Childhood Systems Development, Adolescent Health Promotion, School-Based Health Centers and the Tony Grampsas Youth Services program); the Children with Special Health Care Needs Unit; the Injury, Suicide and Violence Prevention Unit; and a fiscal and administrative services unit. There is also access to a Evaluation. Planning and Epidemiology Branch.

State Population: 4,861,515

Live Births: **70,750** 

# MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$12,822,656 Other MCHB Grant Programs: \$3,026,405

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$15,849,061

#### **CONTACT INFORMATION**

#### For More Information on Title V:

#### Title V Program, Contact:

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Denver, Colorado 80246

303 692-2481

303 782-5576

karen.trierweiler@state.co.us

#### Title V Program's Services for Children with Special Health Care Needs, contact:

Kathy Watters

Director, Children with Special Health Care Needs Section

CDPHE, 4300 Cherry Creek Drive South

Denver, Colorado 80246

303 692-2418

303 782-5576

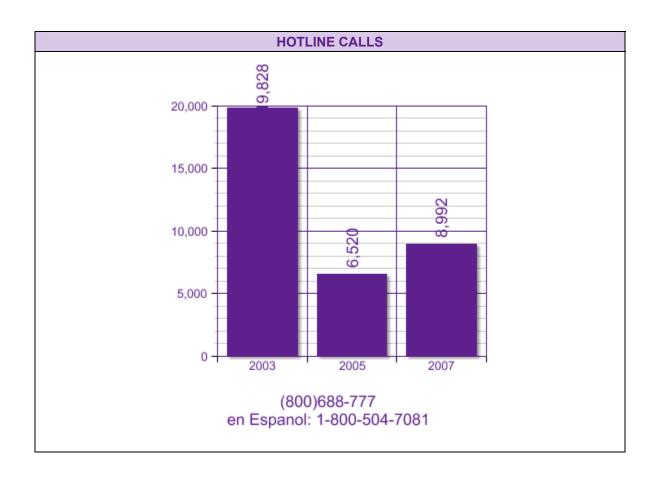
kathy.watters@state.co.us

## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group			
Populations Served	Number of Individuals Served	Expenditure	s FY 2007
Pregnant Women	13,680	\$2,481,784	19.4%
Infants < 1 year old	68,282	\$0	0%
Children 1 to 22 years old	151,029	\$4,166,942	32.5%
Children with Special Healthcare Needs	11,559	\$5,195,335	40.5%
Others	27,610	\$0	0%
Administration		\$978,595	7.6%
Totals	272,160	\$12,822,656	100%
3 4 5	State Funds 4,736,061 (36.9%)  Local MCH Funds 759,363 (5.9%)  Unobligated Balance 0 (0%)  Program Income 0 (0%)	* /	7%
6	Other Funds 0 (0%)		
	By Category	of Services	
Se	Direct Health Care rvices \$474,269 (3.7%) Enabling Services \$3,521,122 (27.5%)	27.5%	
3.	Population-Based Services \$3,520,910 (27.5%)	27.5%	
	Infrastructure-Building		

41.4%

Services \$5,306,355 (41.4%)



# COLORADO

## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	3
FY 2007 Total:	18
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# COLORADO

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	5.7	5.3
The ratio of the black infant mortality rate to the white infant mortality rate.	2.3	1.8
The neonatal mortality rate per 1,000 live births.	4.4	4.2
The postneonatal mortality rate per 1,000 live births.	1.3	1.1
The perinatal mortality rate per 1,000 live births plus fetal deaths.	9.9	9.6
The child death rate per 100,000 children aged 1 through 14.	18.2	15
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The proportion of children and adolescents attending public schools who have access to basic preventive and primary, physical and behavioral health services through school-based health centers	22.2%	15%
Percent of Medicaid-eligible children who receive dental services as part of their comprehensive services	36.0%	38%
The percentage of women with inadequate weight gain during pregnancy	27.5%	18%
The rate of birth (per 1,000) for Latina teenagers age 15-17	69.6	64
The motor vehicle death rate for teens 15-19 years old.	19.0	13
Percent of mothers smoking during the 3 months before pregnancy.	20.3%	18%
The proportion of all children 2-14 whose BMI is at or above 85% of normal weight for height.	25.8%	24%
Percent of children who have difficulty with emotions, concentration, or behavior.	28.2%	25%
Percent of center-based child care programs using a child care nurse consultant.	90.0%	98%
The proportion of high school students reporting binge drinking in the past month.	30.6%	27%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	59.1%	65%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	48.2%	51.7%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	59.1%	60%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	87.8%	89%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	47%	49%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	80%	90%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	23.7	20
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	35%	41.5%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	3.2	2.3
The percent of mothers who breastfeed their infants at 6 months of age.	42%	50%
Percentage of newborns who have been screened for hearing before hospital discharge.	97.6%	98%
Percent of children without health insurance.	10.3%	7%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	24.3%	22%
Percentage of women who smoke in the last three months of pregnancy.	10.4%	7%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	10.8	8.5
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	81.4%	90%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	79.7%	85%

# 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
COLORADO STATE DEPT/PUB HLTH & ENVIRONMENT
DENVER, CO
\$115,000
(EMSC Partnership Grants)

#### **Healthy Start**

ELIMINATING DISPARITIES IN PERINATAL HEALTH METRO COMMUNITY PROVIDER NETWORK Englewood, CO \$700,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### Research

WRAPAROUND CARE COORDINATION FOR PART C CHILDREN UNIVERSITY OF COLORADO AT DENVER AND HEALTH SCIENCES CENTER Aurora, CO \$254,740 (MCH Research)

#### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
COLORADO STATE DEPT/PUB HLTH & ENVIRONMENT
DENVER, CO
\$140,000
(Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

Improving Understanding of Maternal and Child Health and Health Care Issues NATIONAL CONFERENCE OF STATE LEGISLATURES
Denver, CO
\$200,000
(Improving Understanding of Maternal and Child Health and Health Care Issues)

Improving Understanding of Maternal and Child Health and Health Care Issues NATIONAL CONFERENCE OF STATE LEGISLATURES Denver, CO \$200,000

(Improving Understanding of Maternal and Child Health and Health Care Issues)

Healthy Tomorrows Partnership for Children Program DENVER HEALTH & HOSPITAL AUTHORITY Denver, CO \$50,000 (Healthy Tomorrows Partnership for Children Program)

MCHB STATE SYSTEMS DEVELOPMENT INITIATIVE COLORADO STATE DEPT/PUB HLTH & ENVIRONMENT DENVER, CO \$94,644 (State Systems Development Initiative)

HEMOPHILIA DIAGNOSTIC AND TREATMENT CENTERS REGION VIII UNIVERSITY OF COLORADO DENVER Aurora, CO \$351,207 (Hemophilia Treatment Centers (SPRANS))

Children's Oral Healthcare Access Program
COLORADO STATE DEPT/PUB HLTH & ENVIRONMENT
DENVER, CO
\$159,714
(Childrens Oral Healthcare Access Program)

LEADERSHIP OPTION: CARE OF CHILDREN WITH SPECIAL HEALTH NEEDS UNIVERSITY OF COLORADO DENVER
Denver, CO
\$180,000
(Leadership Training in Nursing)

Adolescent Health/School-Based Health
NATIONAL CONFERENCE OF STATE LEGISLATURES
Denver, CO
\$100,000
(Adolescent Health/School-Based Health)

NATIONAL RESOURCE CENTER FOR HEALTH AND SAFETY IN CHILD CARE UNIVERSITY OF COLORADO DENVER
Aurora, CO
\$312,500
(Child Care)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation CO DEPARTMENT OF HUMAN SERVICES Denver, CO \$118,600 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy CENTER FOR LEGAL ADVOCACY DENVER, CO \$50,000 (Traumatic Brain Injury Protection and Advocacy)

# CONNECTICUT

1. State MCH Administration: (max 2500 characters)

The CT Department of Public Health (DPH), the state's leader in public health policy and advocacy, is the agency which administers Connecticut's Title V Maternal and Child Health Services Block Grant. Title V funding allows the state to address the health concerns of the Maternal and Child population (including women during the interconceptional period, and men) throughout the state through community-based programs and interventions. These programs include Perinatal Case Management Programs (i.e., state Healthy Start), Early Hearing, Detection and InterventionUniversal (Newborn Hearing Screening), Children and Youth with Special Health Care Needs (CYSHCN) and School Based Health Centers (SBHC). These programs address the health needs of the three maternal and child population groups. Additionally, state capacity supported by Title V funding allows for ongoing assessment, planning, evaluation and policymaking activities regarding the state's MCH population, whether it be within the department, between state agencies, or in collaboration with other MCH organizations and community partners.

State Population: 3,502,309

Live Births: 41,807

# MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$11,992,357 Other MCHB Grant Programs: \$1,843,212

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$13,835,569

### **CONTACT INFORMATION**

#### For More Information on Title V:

### **Title V Program, Contact:**

Lisa Davis

Title V MCH Director, Section Chief, FHS

410 Capitol Avenue PO Box 340308

Hartford, CT 06016

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(860) 509-7720

Lisa.Davis@ct.gov

# Title V Program's Services for Children with Special Health Care Needs, contact:

Mark Keenan

**CYSHCN** Director

410 Capitol Avenue PO Box 340308

Hartford, CT 06016

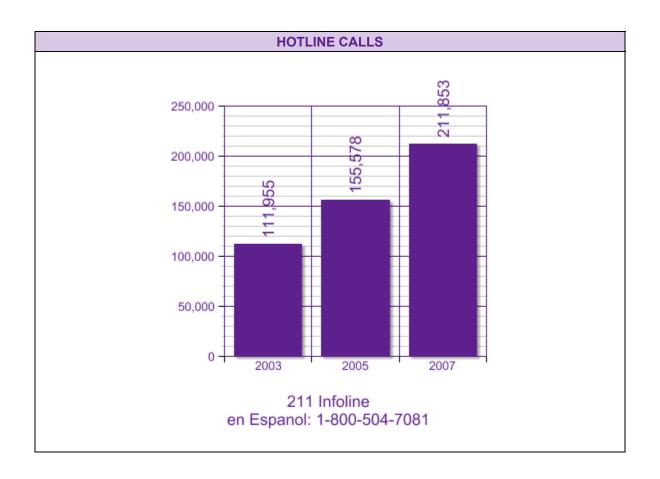
(860) 509-8074

(860) 509-7720

Mark.Keenan@ct.gov

## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group						
Populations Served	Number of Individuals Served	Expenditures FY 2007				
Pregnant Women	7,556	\$1,170,177	9.8%			
Infants < 1 year old	41,722	\$1,402,907	11.7%			
Children 1 to 22 years old	142,752	\$5,923,150	49.4%			
Children with Special Healthcare Needs	33,140	\$3,064,382	25.6%			
Others	178,477	\$246,147	2.1%			
Administration		\$185,594	1.5%			
Totals	403,647	\$11,992,357	100%			
■ <sup>4</sup>	7,095,000 (59.2%)  Local MCH Funds 0 (0%)  Unobligated Balance 627,488 (5.2%)  Program Income 0 (0%)  Other Funds		9%			
-	By Category of Services					
2. 3. 4.	Direct Health Care ervices \$4,503,618 (37.6%)  Enabling Services \$2,382,064 (19.9%)  Population-Based Services \$666,226 (5.6%)  Infrastructure-Building	37.6% 19.9% 5.6%				



# CONNECTICUT

## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	3
FY 2007 Total:	18
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	*	5.1
The ratio of the black infant mortality rate to the white infant mortality rate.	*	2.5
The neonatal mortality rate per 1,000 live births.	*	3.5
The postneonatal mortality rate per 1,000 live births.	*	1.2
The perinatal mortality rate per 1,000 live births plus fetal deaths.	*	8
The child death rate per 100,000 children aged 1 through 14.	*	13
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Cumulative number of datasets incorporated into integrated warehouse (called HIP-KIDS).	2.0	7
Cumulative number of formal agreements, in the format of Memoranda of Agreements (MOA's) and collaborative agreements, that serve the needs of the three MCH populations.	20	25
Percent of 9-12 graders who reported being in a fight within the past 12 months.	31.4%	32.3%
Percent increase in the number of adolescents 10-20 years old who receive services in school based health centers.	15.6%	40%
Percent of schools that have used a program to reduce obesity through physical exercise and nutrition education programs.	*	9.5%
Percent of infants born to women under 20 years of age receiving prenatal care in the first trimester	*	71.4%
Percent of CYSHCN who receive family- centered,community-based, culturally- competent,comprehensive, coordinated family/caregiver support svcs incl. respite in the Regional Medical Home System of Care	86.4%	93.2%
Percent of licensed child care centers serving children age birth to five who have on-site health consultation, as defined by the standards in "Caring for Our Children".	*	0%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	57.8%	59.8%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	48.5%	48.5%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	61.7%	61.7%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	89.4%	89.4%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	43.4%	43.3%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	*	90.2%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	*	12
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	38.0%	38%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	*	0.9
The percent of mothers who breastfeed their infants at 6 months of age.	*	52%
Percentage of newborns who have been screened for hearing before hospital discharge.	*	99.6%
Percent of children without health insurance.	6%	5.5%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	32.2%	31.7%
Percentage of women who smoke in the last three months of pregnancy.	*	0.1%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	*	6
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	*	87.8%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	*	88.5%

#### 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
CONNECTICUT DEPARTMENT OF PUBLIC HEALTH
Hartford, CT
\$115,000
(EMSC Partnership Grants)

#### **Healthy Start**

ELIMINATING DISPARITIES IN PERINATAL HEALTH COMMUNITY FOUNDATION OF GREATER NEW HAVEN New Haven, CT \$900,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### Title V - Community Integrated Service Systems (CISS)

Community-Based Integrated Service Systems (Local/State) STATE OF CONNECTICUT HARTFORD, CT \$140,000 (Community-Based Integrated Service Systems (Local/State))

#### **Title V - Special Projects of Regional and National Significance (SPRANS)**

State Agency Partnerships for Promoting Child and Adolescent Mental Health State of Connecticut Department of Public Health Hartford, CT \$85,000 (State Agency Partnerships for Promoting Child and Adolescent Mental Health)

Healthy Tomorrows Partnership for Children Program COMMUNITY HEALTH CENTER, INC. MIDDLETOWN, CT \$50,000 (Healthy Tomorrows Partnership for Children Program)

LINKAGE OF WIC ELIGIBILITY FILES AND BIRTH RECORDS CONNECTICUT DEPARTMENT OF PUBLIC HEALTH Hartford, CT \$94,644 (State Systems Development Initiative)

Children's Oral Healthcare Access Program State of Connecticut Department of Public Health Hartford, CT \$160,000 (Childrens Oral Healthcare Access Program)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation Connecticut Department of Social Services Hartford, CT \$100,000 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy
STATE OF CONNECTICUT OFFICE OF PROTECTION AND ADVOCACY FOR PERSONS
WITH DISABLITIES
Hartford, CT
\$50,000
(Traumatic Brain Injury Protection and Advocacy)

#### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING STATE OF CONNECTICUT HARTFORD, CT \$148,568 (Universal Newborn Hearing Screening and Intervention)

This year the DOH experienced two major organizational events. Under the direction of the Director of Health, Dr. Gregg Pane, DOH was realigned to form seven administrations. The realignment reduced the number of DOH administrations from 11 to seven, reallocated staff to a new procurement and grants management function, and created a new focus on performance accountability. The new DOH operational structure incorporates many of the recommendations from DC Mayor Adrian Fenty's Pre-Transition Health Team. The primary changes included 1) the integration of the Bureau of Epidemiology and Health Risk Assessment with the State Center for Health Statistics and the State Health Planning and Development Agency to create a Center for Policy, Planning and Epidemiology. 2) Changing the name of the Maternal and Primary Care Administration to the Community Health Administration (CHA). This Administration is responsible for the Office of Grants Management and Program Planning, Perinatal and Infant Health Bureau, CSHCN Bureau, CASH Bureau, and the Nutrition and Physical Fitness Bureau. A copy of CHA's organizational chart is enclosed as an attachment. In October 2008 the Lead Program moves to the District Department of the Environment.

In March 2008 Mayor Fenty named Pierre N.D. Vigilance, MD, MPH as Director of DOH. Dr. Viligance served as the director and health officer of the Baltimore County Department of Health since 2005.

Other significant staff changes within the Community Health Administration include assignment of Charles Nichols, MPP, Chief, Grants Monitoring and Evaluation and Nathaniel Beers, MD, Deputy Director of Policy and Planning. Brief biographical sketches of Mr. Nichols and Dr. Beers are enclosed as an attachment.

Dr. Cano continues as the Senior Deputy Director of the CHA and fully supports and advocates CHA's overarching goal to improve the health and well being of residents by reporting, investigating and controlling communicable diseases, prevention of chronic diseases and their complication, and engaging in health care system planning to meet the service needs of the population. CHA focuses on carrying out the Mayor's initiatives to reorient the health care system toward community-based prevention, primary care, and keeping citizens healthy.

State Population: 588,292

Live Births: 8,529

#### MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$13,678,400 Other MCHB Grant Programs: \$14,622,580

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$28,300,980

#### **CONTACT INFORMATION**

#### For More Information on Title V:

#### **Title V Program, Contact:**

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202-442-4947

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#### Title V Program's Services for Children with Special Health Care Needs, contact:

Joyce Brooks, MSW

Chief, Special Health Care Needs bureau

825 N. Capitol St. NE, 3rd Floor

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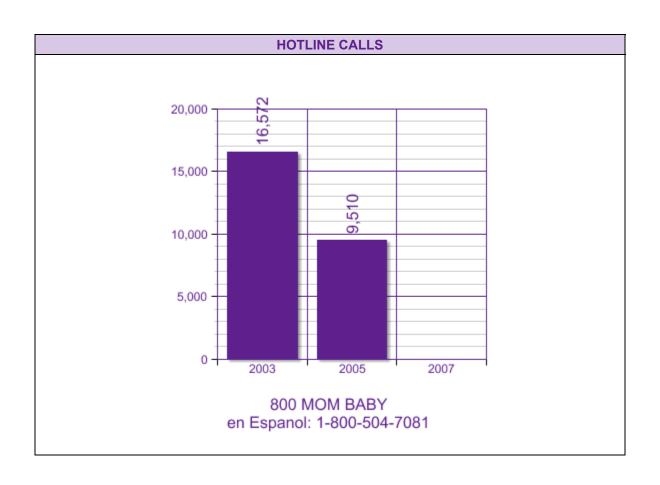
202-442-5894

202-442-4947

joyce.brooks@dc.gov

#### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group					
Populations Served	Number of Individuals Served	Expenditures FY 2007			
Pregnant Women	7,339	\$1,300,000	9.5%		
Infants < 1 year old	14,760	\$1,300,000	9.5%		
Children 1 to 22 years old	71,194	\$8,005,447	58.5%		
Children with Special Healthcare Needs	19,166	\$2,289,994	16.7%		
Others	0	\$499,295	3.7%		
Administration		\$283,664	2.1%		
Totals	112,459	\$13,678,400	100%		
1	. Federal Allocation	e of Funds			
•	6,691,955 (48.9%)				
■ <sup>2</sup>	2. State Funds 6,986,445 (51.1%)				
3. Local MCH Funds 0 (0%)					
4. Unobligated Balance 0 (0%) 51%					
<sub>11</sub> 5	5. Program Income 0 (0%)				
<b>■</b> 6	Other Funds 0 (0%)				
	By Category	y of Services			
Se	Direct Health Care ervices \$2,148,536 (15.7%) Enabling Services	15.7%			
4.	\$2,500,000 (18.3%)  Population-Based Services \$6,358,715 (46.5%)  Infrastructure-Building	18.3%			
Se	ervices \$2,671,149 (19.5%)	19.5%			



#### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	2
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	1
Family members of diverse cultures are involved in all of the above activities.	1
FY 2007 Total:	12
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

#### MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	11.3	*
The ratio of the black infant mortality rate to the white infant mortality rate.	6.7	4.5
The neonatal mortality rate per 1,000 live births.	6.9	*
The postneonatal mortality rate per 1,000 live births.	44.1	*
The perinatal mortality rate per 1,000 live births plus fetal deaths.	8.6	*
The child death rate per 100,000 children aged 1 through 14.	34.4	*
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percent of Medicaid enrolles receiving EPSDT screening	73.6%	80%
Prevalence of lead levels > 10 ug/dL among children through age 6	1.3%	1.9%
Prevalence of tobacco use among pregnant women	3.7%	1.7%
Percent of resident women who give birth with no prenatal care or entry into prenatal care in 3rd trimester	6.4%	5%
Incidence of repeat births for teens less than 19 years of age	12.1%	18%
Percentage of high school students who were in a physical fight one or more times during the past 12 months	19.8%	25%
Percent of preterm births	13.4%	10%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	98%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	53.1%	58%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	36.9%	45%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	62.7%	*
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	88.8%	73%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	24%	*
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	83.4%	83%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	38.8	32
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	57.6%	65%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	4.2	2
The percent of mothers who breastfeed their infants at 6 months of age.	20.9%	44%
Percentage of newborns who have been screened for hearing before hospital discharge.	25.3%	90%
Percent of children without health insurance.	7.8%	6%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	14.6%	12%
Percentage of women who smoke in the last three months of pregnancy.	*	*
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	0.0	5
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	74.7%	85%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	75.0%	80%

#### 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
CHILDREN'S NATIONAL MEDICAL CENTER
WASHINGTON, DC
\$115,000
(EMSC Partnership Grants)

CHESAPEAKE APPLIED RESEARCH NETWORK FOR EMSC
CHILDREN'S RESEARCH INSTITUTE
WASHINGTON, DC
\$742,630
(Emergency Medical Services for Children: Network Development Demonstration Project)

#### **Healthy Start**

Healthy Start Leadership Institute National Healthy Start Association, Inc. Washington, DC \$291,758 (Healthy Start Leadership Training Institute)

HEALTHY START INITIATIVE:ELIMINATING DISPARATIES IN PERINATAL HEALTH MARY'S CENTER FOR MATERNAL & CHILD CARE INC WASHINGTON, DC \$750,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH DC DEPARTMENT OF HUMAN SERVICES WASHINGTON, DC \$1,350,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH DC DEPARTMENT OF HUMAN SERVICES WASHINGTON, DC \$2,350,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### Research

MCH Research GEORGE WASHINGTON UNIVERSITY Washington, DC \$229,306 (MCH Research)

Maternal and Child Health Research Network on Pregnancy-Related Care AMERICAN COLLEGE OF OB/GYN WASHINGTON, DC \$250,000 (MCH Special Projects Research)

#### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING) DISTRICT OF COLUMBIA/DEPARTMENT OF HEALTH Washington, DC \$140,000 (Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

Improving Understanding of Maternal and Child Health and Health Care Issues NATIONAL INST FOR HEALTH CARE MANAGEMENT WASHINGTON, DC

\$200.000

(Improving Understanding of Maternal and Child Health and Health Care Issues)

Improving Understanding of Maternal and Child Health and Health Care Issues National Business Group on Health

Washington, DC

\$200,000

(Improving Understanding of Maternal and Child Health and Health Care Issues)

Improving Understanding of Maternal and Child Health and Health Care Issues GRANTMAKERS IN HEALTH

Washington, DC

\$200.000

(Improving Understanding of Maternal and Child Health and Health Care Issues)

Improving Understanding of Maternal and Child Health and Health Care Issues NATIONAL ASSN. OF COUNTY & CITY HLTH. OFFICIALS

Washington, DC

\$200,000

(Improving Understanding of Maternal and Child Health and Health Care Issues)

Improving Understanding of Maternal and Child Health and Health Care Issues NATIONAL GOVERNORS ASSOCIATION

WASHINGTON, DC

\$200.000

(Improving Understanding of Maternal and Child Health and Health Care Issues)

Improving Understanding of Maternal and Child Health and Health Care Issues AMERICAN BAR ASSOCIATION WASHINGTON, DC \$200,000 (Improving Understanding of Maternal and Child Health and Health Care Issues)

Partnerships to Promote Maternal and Child Health National Healthy Start Association, Inc. Washington, DC \$200,000 (Partnerships to Promote Maternal and Child Health)

DISTRICT OF COLUMBIA STATE SYSTEMS DEVELOPMENT DISTRICT OF COLUMBIA/DEPARTMENT OF HEALTH Washington, DC \$94,644 (State Systems Development Initiative)

Genetic Services Project HOWARD UNIVERSITY Washington, DC \$185,000 (Genetic Services Project)

CISS: CENTER FOR MATERNAL AND CHILD HEALTH GEORGETOWN UNIVERSITY Washington, DC \$400,000 (Childrens Oral Healthcare Access Program)

Children's Oral Healthcare Access Program GEORGETOWN UNIVERSITY Washington, DC \$160,000 (Childrens Oral Healthcare Access Program)

Family Professional Partnership/CSHCN Family Voices of District of Columbia, Inc. Washington, DC \$95,700 (Family Professional Partnership/CSHCN)

Continuing Education/Distance Learning GEORGETOWN UNIVERSITY Washington, DC \$100,000 (MCH Distance Learning)

MCH Pipeline Training Program HOWARD UNIVERSITY Washington, DC \$176,042 (MCH Pipeline Training Program)

#### PARTNERSHIP FOR STATE TITLE V MCH LEADERSHIP COMMUNITY COOPERATIVE **AGREEMENT**

ASSOC. OF MATERNAL & CHILD HLTH PROGRAMS

WASHINGTON, DC

\$1.312.500

(Partnership for State Title V MCH Leadership Community)

MCH LIBRARY SERVICES **GEORGETOWN UNIVERSITY** Washington, DC \$550,000 (MCH Advanced Education Policy)

NATIONAL FIMRRESOURCE CENTER AMERICAN COLLEGE OF OB/GYN WASHINGTON, DC

\$360,000

(National Fetal and Infant Mortality Review (FIMR) Resource Center)

Consumer Initiatives for Genetic Resources and Services

GENETIC ALLIANCE

Washington, DC

\$600,000

(Consumer Initiatives for Genetic Resources and Services)

Consumer Initiatives for Genetic Resources and Services

GENETIC ALLIANCE

Washington, DC

\$500,000

(Consumer Initiatives for Genetic Resources and Services)

Consumer Initiatives for Genetic Resources and Services

GENETIC ALLIANCE

Washington, DC

\$250,000

(Consumer Initiatives for Genetic Resources and Services)

Consumer Initiatives for Genetic Resources and Services

GENETIC ALLIANCE

Washington, DC

\$350,000

(Consumer Initiatives for Genetic Resources and Services)

NATIONAL CENTER FOR CULTURAL COMPETENCE

GEORGETOWN UNIVERSITY

Washington, DC

\$520,000

(Family/Professional Partnership/CSHCN)

PIPPAH - PARTNERS IN PROG PLANNING FOR ADOLESCENT HLTH

AMERICAN COLLEGE OF PREVENTIVE MEDICINE

WASHINGTON, DC

\$100.000

(Adolescent Health/School-Based Health)

MCHB COOPERATIVE AGREEMENT- PIPPAH AMERICAN BAR ASSOCIATION Washington, DC \$100,000 (Adolescent Health/School-Based Health)

MCH COOPERATIVE AGREEMENT FOR A CENTER FOR SCHOOL-BASED HEALTH CARE NATIONAL ASSEMBLY ON SCHOOL-BASED HLTH CARE Washington, DC \$200,000 (Adolescent Health/School-Based Health)

Adolescent Health/School-Based Health ASSOC. OF MATERNAL & CHILD HLTH PROGRAMS WASHINGTON, DC \$100,000 (Adolescent Health/School-Based Health)

Adolescent Health/School-Based Health Healthy Teen Network Washington, DC \$100,000 (Adolescent Health/School-Based Health)

Adolescent Health/School-Based Health
NATIONAL INST FOR HEALTH CARE MANAGEMENT
WASHINGTON, DC
\$100,000
(Adolescent Health/School-Based Health)

Adolescent Health/School-Based Health
NATIONAL ASSN. OF COUNTY & CITY HLTH. OFFICIALS
Washington, DC
\$100,000
(Adolescent Health/School-Based Health)

Sudden Infant Death Syndrome GEORGETOWN UNIVERSITY Washington, DC \$350,000 (Sudden Infant Death Syndrome)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Protection and Advocacy UNIVERSITY LEGAL SERVICES Washington, DC \$50,000 (Traumatic Brain Injury Protection and Advocacy)

#### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING DISTRICT OF COLUMBIA/DEPARTMENT OF HEALTH Washington, DC \$150,000 (Universal Newborn Hearing Screening and Intervention)

The Delaware Department of Health and Human Services, Division of Public Health is the state agency responsible for administration of the Title V Maternal and Child Health program. Included under the Title V are public health clinic based programs - Smart Start, Kids Kare, Child Development Watch, and Oral Health - and initiatives under the Infant Mortality Elimination Program - Family Practice Team Model, Preconception Health Care, Fetal Infant Morality Review, and the Pregnancy Risk Assessment and Monitoring Surveillance (PRAMS) survey. Other associated programs include Newborn Metabolic Screening, Universal Newborn Hearing, the Early Comprehensive Childhood Systems Initiative, and the State Systems Development Initiative.

State Population: **864,764** Live Births: **11,988** 

#### MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$12,458,136

Other MCHB Grant Programs: \$799,077

Bioterrorism Grant Program: **\$0** 

Total MCH Partnership Funds: \$13,257,213

#### **CONTACT INFORMATION**

#### For More Information on Title V:

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302-739-3313

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http://www.dhss.delaware.gov/dhss/dph/chca/dphmchhome.html

#### Title V Program's Services for Children with Special Health Care Needs, contact:

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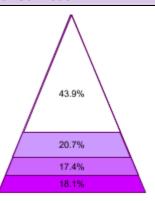
http://www.dhss.delaware.gov/dhss/dph/chca/dphmchhome.html

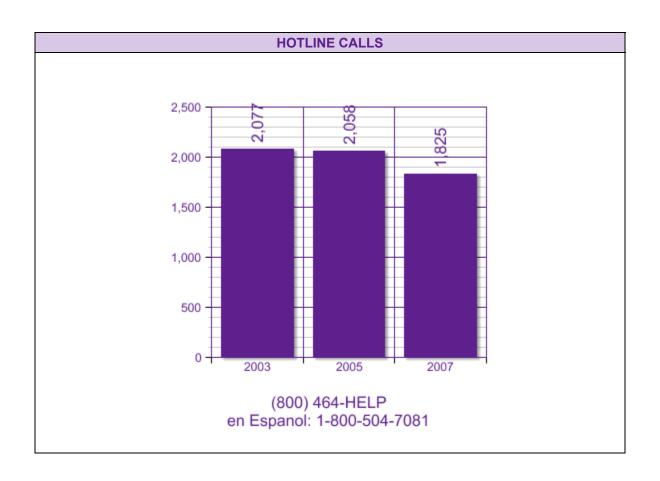
#### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group				
Populations Served	Number of Individuals Serve	Expenditures FY 2007		
Pregnant Women	2,460	\$3,072,573	24.7%	
Infants < 1 year old	12,666	\$810,152	6.5%	
Children 1 to 22 years old	2,533	\$4,405,349	35.4%	
Children with Special Healthcare Needs	908	\$2,346,380	18.8%	
Others	4,768	\$1,784,523	14.3%	
Administration		\$39,159	.3%	
Totals	23,335	\$12,458,136	100%	
By Source of Funds				
	. Federal Allocation 1,981,459 (15.9%)			
■ <sup>2</sup>	. State Funds 9,718,619 (78%)	3	%	
■ <sup>3</sup>	. Local MCH Funds 0 (0%)	16%		
■ 4	. Unobligated Balance 403,058 (3.2%)	3%		
5	. Program Income 0 (0%)	78%		
<b>6</b>	. Other Funds 355,000 (2.8%)			

#### **By Category of Services**

- 1. Direct Health Care Services \$5,464,809 (43.9%)
- 2. Enabling Services \$2,576,920 (20.7%)
- Population-Based Services \$2,166,340 (17.4%)
- Infrastructure-Building Services \$2,250,067 (18.1%)





#### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	2
Family members of diverse cultures are involved in all of the above activities.	2
FY 2007 Total:	16
Total Possible:	18

Scale: 0 = Not Met

> 1 = Partially Met 2 = Mostly Met

3 = Completely Met

#### MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	8.3	6.9
The ratio of the black infant mortality rate to the white infant mortality rate.	2.5	2.1
The neonatal mortality rate per 1,000 live births.	6.1	5
The postneonatal mortality rate per 1,000 live births.	2.3	2.2
The perinatal mortality rate per 1,000 live births plus fetal deaths.	8.0	7.8
The child death rate per 100,000 children aged 1 through 14.	12.8	12
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percent of women delivering live-born infants reporting any cigarette smoking during pregnancy	6.8	10
Percent of live births to women who have another birth in less than 18 months	11.0	9
The percent of extremely low birth weight black infants among all live births to black women	3.1	1.4
The rate of children under age 1 who die as a result of Sudden Infant Death Syndrome	72.0	65
The percent of youth reporting any use of alcohol in the last 30 days.	45.6	43
Percent of youth during the last 12 months who feel so sad or hopeless almost every day for two weeks or more in a row that they stopped doing usual activities	26.6	23
The percent of Medicaid children, including children with special health care needs, under age 21 who receive coordinated, ongoing, comprehensive care within a medical home.	94.2	95
Hospital discharge rate for children from five through 17 years with asthma	18.5	17
The percent of young adults with special health care needs cared for in Delaware who transition appropriately to adult health and social services when they reach their 18th bi	42	0
Decrease the rate of deaths from 33 to 30 to children ages 14 years through age 21 caused by motor vehicle crashes.	*	0

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	61.1%	65%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	48.1%	50%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	63.2%	65%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	88.1%	90%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	42.4%	50%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	76%	80%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	22.0	20
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	34%	40%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	1.8	1.7
The percent of mothers who breastfeed their infants at 6 months of age.	35.7%	36%
Percentage of newborns who have been screened for hearing before hospital discharge.	93.7%	100%
Percent of children without health insurance.	12.3%	10%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	20.2%	17%
Percentage of women who smoke in the last three months of pregnancy.	6.8%	5.5%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	5.8	5.4
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	79.3%	82%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	73.9%	80%

#### 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
Delaware Department of Health & Social Services, Dover, DE
Dover, DE
\$115,000
(EMSC Partnership Grants)

#### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
Delaware Department of Health & Social Services, Dover, DE
Dover, DE
\$140,000
(Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

DELAWARE STATE SYSTEMS DEVELOPMENT INITIATIVE Delaware Department of Health & Social Services, Dover, DE Dover, DE \$94,644 (State Systems Development Initiative)

Children's Oral Healthcare Access Program
DE ST DEPARTMENT OF HEALTH & SOCIAL SERVICES
DOVER, DE
\$160,000
(Childrens Oral Healthcare Access Program)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation
Delaware Department of Health & Social Services, Dover, DE
Dover, DE
\$118,600
(Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy COMMUNITY LEGAL AID SOCIETY, INC Wilmington, DE \$50,000 (Traumatic Brain Injury Protection and Advocacy)

#### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING
Delaware Department of Health & Social Services, Dover, DE
Dover, DE
\$120,833
(Universal Newborn Hearing Screening and Intervention)

The Department of Health is the agency responsible for the administration of the Title V program in Florida. Maternal and child health responsibilities are divided between Family Health Services (pregnant women and children) and Children's Medical Services (children with special health care needs). The Department of Health administers health programs through its county health departments and Children's Medical Services offices. Healthy Start continues to be our priority maternal and child health initiative in Florida. Healthy Start is designed to ensure access to maternal and child health services to all women and children in Florida. Other efforts to improving maternal and child health include services to substance exposed newborns, Fetal and Infant Mortality Review projects, improving pregnancy outcomes, prenatal smoking cessation, and pregnancy associated mortality review. Services for children with special health care needs include the Early Intervention Program, high risk obstetrical satellite clinics, Regional Perinatal Intensive Care Centers and clinic-based medical and therapeutic care.

State Population: **18,251,243** 

Live Births: 236,882

#### MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$329,263,015

Other MCHB Grant Programs: \$6,843,373

Bioterrorism Grant Program: **\$0** 

Total MCH Partnership Funds: \$336,106,388

#### **CONTACT INFORMATION**

#### For More Information on Title V:

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Phyllis J. Sloyer, R.N., Ph.D

**Division Director** 

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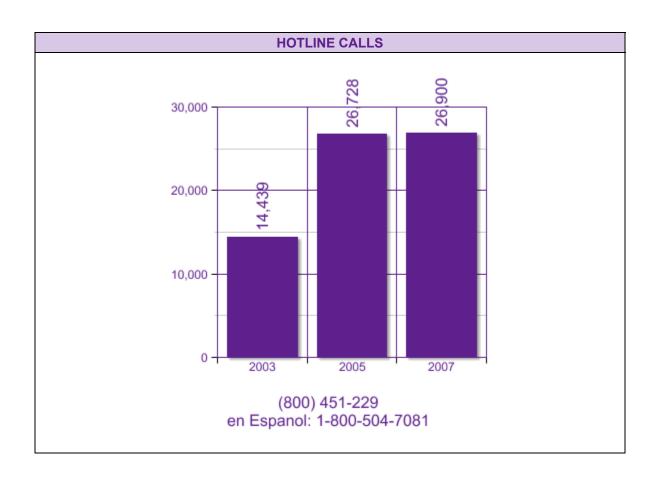
(850) 245-4218

(850) 488-3813

Phyllis Sloyer@doh.state.fl.us

#### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group			
Populations Served	Number of Individuals Served	Expenditure	s FY 2007
Pregnant Women	112,833	\$39,873,752	12.1%
Infants < 1 year old	61,257	\$13,993,679	4.3%
Children 1 to 22 years old	187,154	\$112,311,614	34.1%
Children with Special Healthcare Needs	62,150	\$134,306,383	40.8%
Others	*	\$0	0%
Administration		\$28,777,587	8.7%
Totals	423,394	\$329,263,015	100%
	By Source	of Funds	
2 3 4	Federal Allocation 19,563,685 (5.9%)  State Funds 282,275,828 (85.7%)  Local MCH Funds 0 (0%)  Unobligated Balance 0 (0%)  Program Income 0 (0%)  Other Funds 27,423,502 (8.3%)		% 6%
	By Category	of Services	
2. 3. 4.	Direct Health Care strices \$59,925,867 (18.2%)  Enabling Services \$138,619,729 (42.1%)  Population-Based Services \$45,109,034 (13.7%)  Infrastructure-Building strices \$85,608,385 (26%)	18.2% 42.1% 13.7% 26%	



#### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	3
FY 2007 Total:	18
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

#### MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	7.0	6.3
The ratio of the black infant mortality rate to the white infant mortality rate.	2.6	1.6
The neonatal mortality rate per 1,000 live births.	4.4	3.8
The postneonatal mortality rate per 1,000 live births.	2.6	2
The perinatal mortality rate per 1,000 live births plus fetal deaths.	11.9	11.4
The child death rate per 100,000 children aged 1 through 14.	20.1	19.6
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The percentage of Part C eligible children receiving service	98.1%	98%
The percentage of subsequent births to teens age 15 to 19	16.3	14.2
The percentage of women reporting tobacco use during pregnancy	7.0	6.5
The percentage of low-income children who access dental care	*	25
The percentage of pregnant women screened by Healthy Start	67.4	72
The percentage of infants screened by Healthy Start	81.7	84
The rate per 1,000 of hospital discharges due to asthma in children 0-14	2.0	1.5
Excess feto-infant mortality attributed to the maternal health/prematurity category in the PPOR statewide analysis.	*	2.4

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	50.2%	60%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	41.9%	53%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	58%	70%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	85.9%	91%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	33.8%	42%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	84.8%	90%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	22.4	18.5
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	33.2%	42%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	3.1	2.8
The percent of mothers who breastfeed their infants at 6 months of age.	37.5%	40%
Percentage of newborns who have been screened for hearing before hospital discharge.	93.3%	99%
Percent of children without health insurance.	13.6%	12.4%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	30.9%	29.5%
Percentage of women who smoke in the last three months of pregnancy.	*	7.6%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	5.7	5.2
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	88.1%	90%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	76.0%	81.5%

#### 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants Florida Department of Health Tallahassee, FL \$115,000 (EMSC Partnership Grants)

#### **Healthy Start**

ELIMINATING DISPARITIES IN PERINATAL
Northeast Florida Healthy Start Coalition
Jacksonville, FL
\$925,000
(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

HEALTHY START INITIATIVE ELIMINATING DISPARITIES IN PERINATAL HEALTH Pinellas County Health Department Saint Petersburg, FL \$1,100,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH University of South Florida Tampa, FL \$1,500,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

WOMEN'S HEALTH INITIATIVE
Prevention Partnerships for Children, Inc
West Palm Beach, FL
\$875,000
(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH
The Center for Health Equity, Inc.
Tallahassee, FL
\$750,000
(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### Research

Health Plan Turnover And Disenrollment, Health Care Quality And Expenditures In State Children's Health Insurance Programs
University of Florida
Jacksonville, FL
\$99,995
(MCH Research)

#### Title V - Community Integrated Service Systems (CISS)

Community-Based Integrated Service Systems (Local/State)
FL ST DEPT OF HLTH
Tallahassee, FL
\$140,000
(Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

Integrated Services for Young Children with Special Health Care Needs University of Florida Gainesville, FL \$198,574 (Medical Home/CSHCN)

Health Families Expansion Program University of Florida Jacksonville, FL \$49,942 (Healthy Tomorrows Partnership for Children Program)

Healthy Tomorrows Partnership for Children Program
The Village South
Miami, FL
\$50,000
(Healthy Tomorrows Partnership for Children Program)

EXPANDING FLORIDA'S MCH CAPACITY FLORIDA DEPARTMENT OF HEALTH Tallahassee, FL \$94,644 (State Systems Development Initiative)

Genetic Services Project South Broward Hospital District Hollywood, FL \$183,000 (Genetic Services Project)

Children's Oral Healthcare Access Program Florida Department of Health Tallahassee, FL \$159,939 (Childrens Oral Healthcare Access Program)

Healthy Behaviors in Women Orange County Health Department Orlando, FL \$108,583 (Healthy Behaviors in Women)

HLTH CARE INFORMATION & EDUCATION FOR FAMILIES OF CHILDREN W/SPEICAL HLTH CARE N
FAMILY INSTITUTE FOR FAMILY INVOLVEMENT
Bartow, FL
\$95,700
(Family Professional Partnership/CSHCN)

Epidemiological MCH/SPH Institute University of South Florida Tampa, FL \$26,000 (Epidemiological MCH/SPH Institute)

TRAINING LONG TERM - NURSING FLORIDA INTERNATIONAL UNIVERSITY Miami, FL \$50,541 (Leadership Training in Nursing)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation Florida Department of Health Tallahassee, FL \$100,000 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy
THE ADV CNTR FOR PRSNS W/DISABILITIES INC
TALLAHASSEE, FL
\$75,855
(Traumatic Brain Injury Protection and Advocacy)

#### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING FL ST DEPT OF HLTH Tallahassee, FL \$145,600 (Universal Newborn Hearing Screening and Intervention)

The MCH Federal-State Partnership - 2007

## FEDERATED STATES OF MICRONESIA

As documented in the Statement of Assurances in Section III, Requirements for Application, the Fderated States of Micronesia assures the Secretary of DHHS that no more than 10% of the funds will be used for administrative costs of each program component. The FSM further assures the Secretary that it defines these administrative costs as the salary of the MCH Assistant Coordinator, fringe benefits, travel for the National MCH program staff and expendable supplies to support the administration of the Program at the FSM National Government.

State Population: 107,862

Live Births: 2,441

#### MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$973,633
Other MCHB Grant Programs: \$94,644

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$1,068,277

#### **CONTACT INFORMATION**

#### For More Information on Title V:

#### **Title V Program, Contact:**

Mr. Dionis E. Saimon Program Manager P.O. Box PS 70 Palikir, Pohnpei, FM 96941 691-320-2619

desaimon@fsmhealth.fm

691-320-5263

#### Title V Program's Services for Children with Special Health Care Needs, contact:

Mr. Dionis E. Saimon Program Manager P.O. Box PS 70 Palikir, Pohnpei, FM 96941 691-320-2619 691-320-5263

desaimon@fsmhealth.fm

# FEDERATED STATES OF MICRONESIA

#### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group				
Populations Served	Number of Individuals Served	Expenditures FY 2007		
Pregnant Women	3,206	\$143,781	14.8%	
Infants < 1 year old	1,768	\$147,700	15.2%	
Children 1 to 22 years old	8,863	\$205,625	21.1%	
Children with Special Healthcare Needs	1,320	\$275,943	28.3%	
Others	4,122	\$99,304	10.2%	
Administration		\$101,280	10.4%	
Totals	19,279	\$973,633	100%	
By Source of Funds  1. Federal Allocation				
1. Federal Allocation 533,633 (54.8%)				
2. State Funds 440,000 (45.2%)				
3. Local MCH Funds 0 (0%)  4. Unobligated Balance 0 (0%)  45%				
<b>6</b>	Other Funds 0 (0%)			
By Category of Services				
	Direct Health Care ervices \$480,743 (49.4%)	$\wedge$		
2. Enabling Services \$178,998 (18.4%)				
3. Population-Based Services \$201,131 (20.7%)				
	Infrastructure-Building ervices \$112,761 (11.6%)	18.4% 20.7% 11.6%		

#### HOTLINE CALLS

No hotline calls were reported by Federated States of Micronesia for this year.

en Espanol: 1-800-504-7081

The MCH Federal-State Partnership - 2007

# FEDERATED STATES OF MICRONESIA

#### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.		
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.		
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.		
Family members are involved in service training of CSHCN staff and providers.		
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).		
Family members of diverse cultures are involved in all of the above activities.	2	
FY 2007 Total:	12	
Total Possible:	18	

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# FEDERATED STATES OF MICRONESIA

#### MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	20.6	6
The ratio of the black infant mortality rate to the white infant mortality rate.	0.0	1
The neonatal mortality rate per 1,000 live births.	13.9	1
The postneonatal mortality rate per 1,000 live births.	5.5	1
The perinatal mortality rate per 1,000 live births plus fetal deaths.	42.7	10
The child death rate per 100,000 children aged 1 through 14.	151.1	10
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The percent of women receiving services in the MCH Programs who receive a Pap smear.	17.5%	95%
Percent of pregnant women who have been screened for Hepatitis B surface antigen.	80.2%	100%
Percent of children enrolled in Early Childhood Education Program (Head Start)surveyed to determine the rate of decayed, missing or filled teeth.	*	10
Percent of children with identified developmental problems who are admitted to the CSHCN Program.	19.7%	100%
Percent pregnant women attending prenatal care who are screened for low hemoglobin.	98.6%	100%
Percent infants who received at least six bottles (1 bottle/30 days) of fluoride in the first year of life	20.3%	90%
Percent of children with special needs who have a completed reevaluation by the CSN team within the last 12 months.	34.7%	90%
Percent of women of child-bearing age who attended workshops in the schools and communities during the reporting period.	34.5%	90%
The rate of maternal deaths in the reporting year.	*	1
The percent of one year old babies with anemia.	*	10%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	0.0%	80%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	0.0%	90%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	0.0%	90%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	0.0%	95%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	0.0%	90%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	0.0%	90%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	68.8%	100%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	21.1	20
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	64.4%	90%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	0.0	1
The percent of mothers who breastfeed their infants at 6 months of age.	74.9%	100%
Percentage of newborns who have been screened for hearing before hospital discharge.	0.0%	100%
Percent of children without health insurance.	90.6%	5%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	0.0%	90%
Percentage of women who smoke in the last three months of pregnancy.	2.0%	1%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	28.9	1
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	0.0%	0%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	30.3%	100%

# FEDERATED STATES OF MICRONESIA

# 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

**Title V - Special Projects of Regional and National Significance (SPRANS)** 

IMPROVING DATA CAPACITY IN THE FSM FEDERATED STATES/MICRONESIA DIV HLTH/SRV Palikir, Pohnpei, FM \$94,644 (State Systems Development Initiative)

The Office of Birth Outcomes (OBO), part of the Division of Public Health, Department of Human Resources is Georgia's Title V agency. The charge of OBO is promoting the health of the State's mothers and infants, women of childbearing age, children, adolescents, and children with special health care needs. OBO works toward: 1) early and comprehensive health services to women of childbearing age and their infants in an environment that fosters personal dignity; 2) timely and comprehensive health services to children which promote optimal attainment of their individual abilities; and 3) comprehensive health services to adolescents in an environment that fosters personal responsibility, encourages independence, and promotes positive behaviors. To carry out these responsibilities, OBO is involved in policy and planning activities, oversees the operations of various MCH programs in local health departments and other organizations, and provides technical assistance and training.

State Population: 9,544,750

Live Births: 148,619

#### MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$366,000,077
Other MCHB Grant Programs: \$6,537,392

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$372,537,469

#### **CONTACT INFORMATION**

#### For More Information on Title V:

#### **Title V Program, Contact:**

Roz Bacon Senior Director

2 Peachtree Street, 11th Floor

Atlanta, GA 30303

404-657-2850

404-657-7307

rkbacon@dhr.state.ga.us

#### Title V Program's Services for Children with Special Health Care Needs, contact:

Wendy Miller

Acting Program Coordinator

2 Peachtree Street, 11th Floor

Atlanta, GA 30303

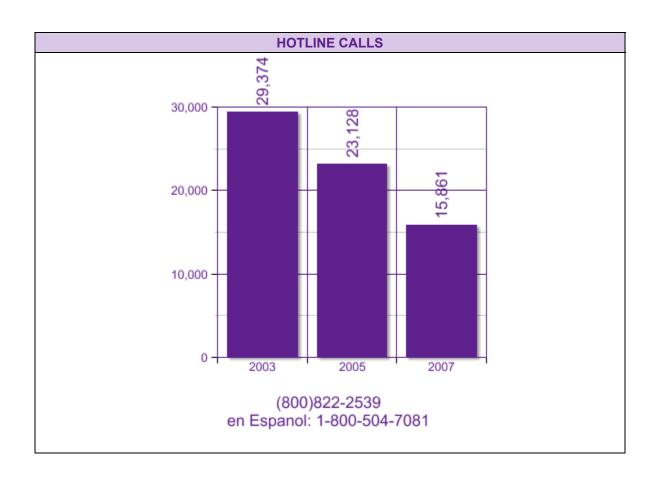
404-657-2878

404-657-2763

wmiller@dhr.state.ga.us

#### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By N	umber of Individuals Se	rved and Population Gro	up
Populations Served	Number of Individuals Served	Expenditures	s FY 2007
Pregnant Women	145,927	\$18,161,637	5%
Infants < 1 year old	145,632	\$93,351,178	25.5%
Children 1 to 22 years old	372,543	\$202,959,377	55.5%
Children with Special Healthcare Needs	13,074	\$33,270,660	9.1%
Others	0	\$15,946,031	4.4%
Administration		\$2,311,194	.6%
Totals	677,176	\$366,000,077	100%
■ <sup>4</sup>	125,240,059 (34.2%)  Local MCH Funds 0 (0%)  Unobligated Balance 0 (0%)  Program Income 18,316,838 (5%)	-34	1%
■ 6	Other Funds 205,924,790 (56.3%)	59	6
	By Category	of Services	
Se	Direct Health Care rvices \$128,183,862 (35%) Enabling Services		
3.	\$27,945,055 (7.6%)  Population-Based Services \$184,781,489 (50.5%)	7.6%	
	Infrastructure-Building rvices \$25,089,671 (6.9%)	50.5%	



#### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	1
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	1
Family members of diverse cultures are involved in all of the above activities.	3
FY 2007 Total:	14
Total Possible:	18

Scale: 0 = Not Met

> 1 = Partially Met 2 = Mostly Met

3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	8.1	7.9
The ratio of the black infant mortality rate to the white infant mortality rate.	2.1	1.7
The neonatal mortality rate per 1,000 live births.	5.2	5.5
The postneonatal mortality rate per 1,000 live births.	2.9	2.3
The perinatal mortality rate per 1,000 live births plus fetal deaths.	6.8	7.2
The child death rate per 100,000 children aged 1 through 14.	19.6	19
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percentage of very low birth weight babies enrolled in High Risk Infant Follow-Up (HRIFU)	16.7%	30%
Percentage of high school students who participated in physical activity for at least 20 minutes on 3 or more of the past 7 days	61%	71%
Rate of hospitalizations due to unintentional injuries among children ages one through age four.	201.1	171
Percent of Medicaid and PeachCare (S-CHIP) enrolled children who received preventive oral health services.	38.2%	34.7%
Percent of women of reproductive age who consume at least 400mcg of folic acid daily	43.3	50
Percent of repeat births among adolescents aged 15- 17-years-old	10.0%	10.4%
Rate of SIDS among African American infants.	1.6	1
Percentage of Medicaid children who have had a developmental screening	*	77%
The percent of MCH state and local public health staff that have completed the Public Health 101 course.	8.2%	11%
The extent to which partnerships that support Early Childhood Comprehensive Systems (ECCS) are effective.	68.6%	85%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	54%	59%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	47.3%	51%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	61.2%	62%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	91%	92%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	37%	38%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	81.3%	85%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	29.9	25
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	17.1%	17.6%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	4.2	4
The percent of mothers who breastfeed their infants at 6 months of age.	30%	35%
Percentage of newborns who have been screened for hearing before hospital discharge.	94.5%	99%
Percent of children without health insurance.	13.3%	13%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	30.9%	25%
Percentage of women who smoke in the last three months of pregnancy.	10.3%	9.8%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	5.5	5.2
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	73.3%	78.5%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	79.2%	87.3%

#### 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
GEORGIA DEPARTMENT OF HUMAN RESOURCES
ATLANTA, GA
\$115,000
(EMSC Partnership Grants)

#### **Healthy Start**

ELIMINATING DISPARITIES IN PERINATAL HEALTH CENTER FOR BLACK WOMEN'S WELLNESS, INC. Atlanta, GA \$575,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH LAURENS COUNTY BOARD OF HEALTH Dublin, GA \$925,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH MCG HEALTH, INC.
Augusta, GA
\$900,000
(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH Augusta Partnership For Children, Inc. Augusta, GA \$1,120,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
GEORGIA DEPARTMENT OF HUMAN RESOURCES
Atlanta, GA
\$140,000
(Community-Based Integrated Service Systems (Local/State))

#### **Title V - Special Projects of Regional and National Significance (SPRANS)**

GEORGIA STATE SYS DEVELOPMENT INITIATIVE GEORGIA DEPARTMENT OF HUMAN RESOURCES Atlanta, GA \$94,644 (State Systems Development Initiative)

REGION IV SOUTH REGIONAL HEMOPHILIA PROGRAM

HEMOPHILIA OF GEORGIA, INC.

Atlanta, GA \$249,673

(Hemophilia Treatment Centers (SPRANS))

Genetic Services Project SICKLE CELL FOUNDATION OF GEORGIA, INC Atlanta, GA \$183,000 (Genetic Services Project)

Family Professional Partnership/CSHCN Parent to Parent of Georgia, Inc. Atlanta, GA \$95,700 (Family Professional Partnership/CSHCN)

Epidemiological MCH/SPH Institute EMORY UNIVERSITY ATLANTA, GA \$26,000 (Epidemiological MCH/SPH Institute)

Heritable Disorders Emory University Atlanta, GA \$996,501 (Heritable Disorders)

Promoting Integration of State Health Information Systems and Newborn Screening Service Systems

Task Force for Child Survival and Development

Decatur, GA \$300.000

(Promoting integration of State Health Information Systems and Newborn Screening Service Systems)

Newborn Screening Informatics Practice Network Task Force for Child Survival and Development Decatur, GA \$490,466 (Newborn Screening Informatics Practice Network)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation Brain and Spinal Injury Trust Fund Commission Atlanta, GA \$118,600 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy GEORGIA ADVOCACY OFFICE Decatur, GA \$57,808 (Traumatic Brain Injury Protection and Advocacy)

#### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING GEORGIA DEPARTMENT OF HUMAN RESOURCES Atlanta, GA \$150,000 (Universal Newborn Hearing Screening and Intervention)

# **GUAM**

The Guam Title V Maternal and Child Health (MCH) and Children with Special Health Care Needs (CSHCN) Program is administered as one integrated program within the Bureau of Family Health & Nursing Services, Division of Public Health, Department of Public Health and Social Services (DPHSS). The DPHSS is headed by the Director of Public Health and Social Services. The Directors position is a cabinet-level position within the Governors Office. MCH/CSHCN Program is operated as a single organizational unit and serves as both the local and state agency. This single state agency is authorized to administer Title V funds and is responsible for both MCH and CSHCN services

State Population: 173,456

Live Births: 3,187

#### MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$1,349,134 Other MCHB Grant Programs: \$470,590

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$1,819,724

#### **CONTACT INFORMATION**

#### For More Information on Title V:

#### **Title V Program, Contact:**

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#### Title V Program's Services for Children with Special Health Care Needs, contact:

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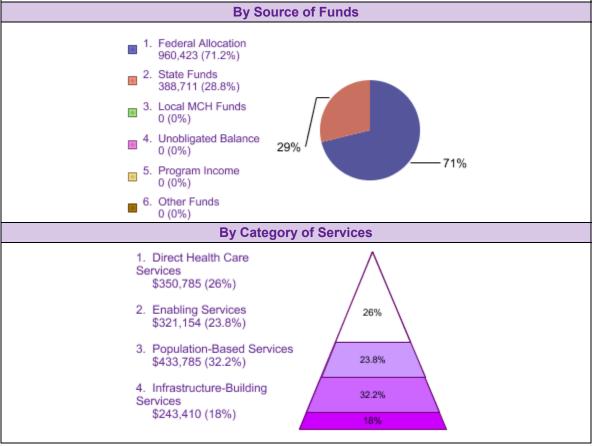
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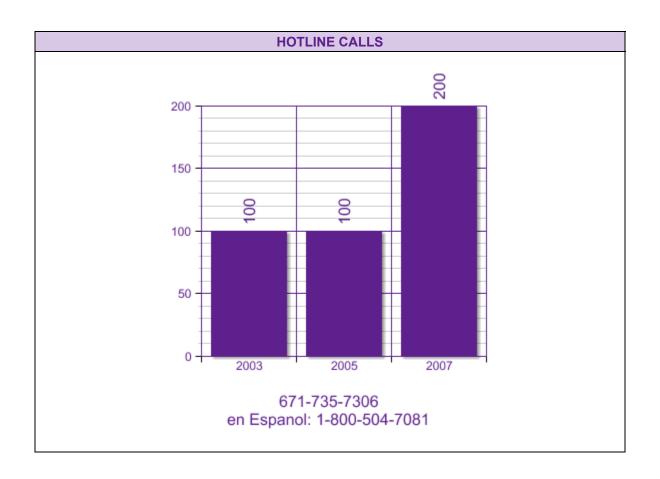
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#### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

Populations Served	Number of Individuals Served	Expenditures FY 2007	
Pregnant Women	1,750	\$225,214	16.7%
Infants < 1 year old	3,501	\$233,414	17.3%
Children 1 to 22 years old	3,301	\$316,107	23.4%
Children with Special Healthcare Needs	1,225	\$439,486	32.6%
Others	2,062	\$0	0%
Administration		\$134,913	10%
Totals	11,839	\$1,349,134	100%





#### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	2
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	0
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	2
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	0
Family members of diverse cultures are involved in all of the above activities.	3
FY 2007 Total:	9
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	10.3	4
The ratio of the black infant mortality rate to the white infant mortality rate.	*	*
The neonatal mortality rate per 1,000 live births.	6.3	4.1
The postneonatal mortality rate per 1,000 live births.	4.0	2.5
The perinatal mortality rate per 1,000 live births plus fetal deaths.	10.6	15
The child death rate per 100,000 children aged 1 through 14.	*	20
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
To reduce the percent of pregnant women who received no prenatal care	0.0%	0%
Proportion of low-income women who receive reproductive health/family planning services	7.1%	14%
Percent of women who use alcohol, tobacco and other drugs during pregnancy	0.0%	5%
Percent of children younger than 18 years maltreated/neglected.	2.9%	5%
The prevalence of partner violence in adolescent relationships	10.0%	0%
The percent of high school students who have engaged in sexual intercourse	0.0%	0%
The percent of high school students who are overweight	10.0%	5%
Percent of Children with Special Health Care Needs (CSHCN) who have age appropriate completed immunizations	81.6%	48%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	0.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	25.0%	100%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	53.5%	100%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	60.2%	74%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	60.2%	100%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	60.2%	*
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	23.5%	75%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	26.7	21
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	31.1%	49%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	0.0	2
The percent of mothers who breastfeed their infants at 6 months of age.	0.0%	90%
Percentage of newborns who have been screened for hearing before hospital discharge.	84.1%	78%
Percent of children without health insurance.	26.2%	13%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	10.3%	12%
Percentage of women who smoke in the last three months of pregnancy.	10.8%	10%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	6.6	20
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	0.0%	0%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	0.0%	75%

#### 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants GOVERNMENT OF GUAM Hagatna, GU \$115,000 (EMSC Partnership Grants)

#### **Title V - Community Integrated Service Systems (CISS)**

Community-Based Integrated Service Systems (Local/State)
Guam Department of Public Health & Social Services
Hagatna, GU
\$140,000
(Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

Health Families Expansion Program
GUAM DEPARTMENT OF PUBLIC HEALTH
Hagatna, GU
\$50,000
(Healthy Tomorrows Partnership for Children Program)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Protection and Advocacy GUAM LEGAL SERVICES CORPORATION Hagatna, GU \$20,000 (Traumatic Brain Injury Protection and Advocacy)

#### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING UNIVERSITY OF GUAM Mangilao, GU \$145,590 (Universal Newborn Hearing Screening and Intervention)

# HAWAII

The Title V program in the State of Hawaii is administered by the Family Health Services Division (FHSD), Hawaii State Department of Health (DOH). The Title V program administers the following programs: maternal and child health, children with special health care needs, IDEA Part C, and WIC programs.

State Population: 1,283,388

Live Births: 18,982

#### MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$45,934,449
Other MCHB Grant Programs: \$2,830,344

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$48,764,793

#### **CONTACT INFORMATION**

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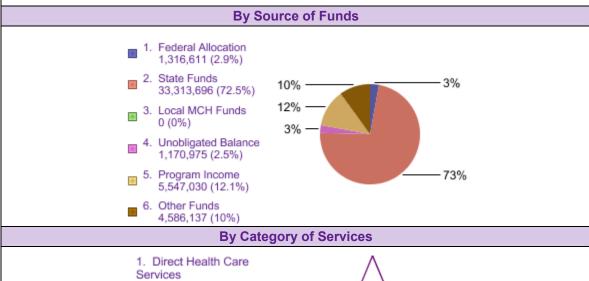
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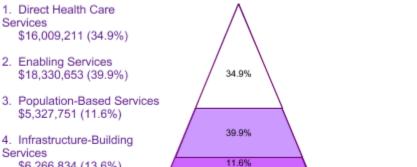
808-733-9068

pat.heu@doh.hawaii.gov

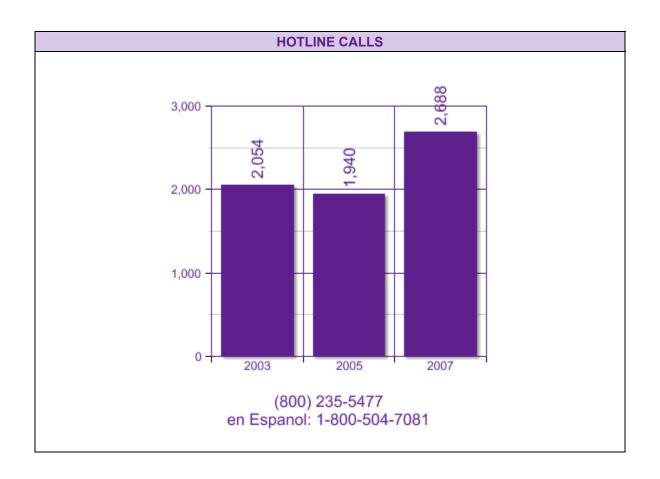
#### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

Populations Served	Number of Individuals Served	Expenditures FY 2007	
Pregnant Women	2,102	\$4,187,882	9.1%
Infants < 1 year old	19,051	\$10,049,717	21.9%
Children 1 to 22 years old	12,403	\$10,652,025	23.2%
Children with Special Healthcare Needs	17,847	\$13,596,973	29.6%
Others	44,819	\$6,291,608	13.7%
Administration		\$1,156,244	2.5%
Totals	96,222	\$45,934,449	100%





4. Infrastructure-Building Services \$6,266,834 (13.6%)



# HAWAII

#### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	2
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	2
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	2
Family members of diverse cultures are involved in all of the above activities.	3
FY 2007 Total:	14
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

# HAWAII

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	6.1	4.5
The ratio of the black infant mortality rate to the white infant mortality rate.	2.3	1
The neonatal mortality rate per 1,000 live births.	4.1	2.9
The postneonatal mortality rate per 1,000 live births.	1.9	1.5
The perinatal mortality rate per 1,000 live births plus fetal deaths.	4.9	4.5
The child death rate per 100,000 children aged 1 through 14.	19.6	10.5
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The percent of pregnancies (live births, fetal deaths, abortions) that are unintended.	52.3%	42%
Percent of infants with hearing loss who are receiving appropriate intervention services by age 6 months.	71.9%	80%
The percent of teenagers in grades 9 to 12 attending public schools who are overweight.	15.6%	11%
Percent of teenagers in grades 6 to 8 attending public schools who report drinking alcohol within the past 30 days.	12.3%	10%
Proportion of children aged 6 to 8 years with dental caries experience in their primary and permanent teeth.	72.1%	67.9%
The rate of women aged 15-19 years (per 1,000) with a reported case of chlamydia.	27.5	21.8
Percent of women who report smoking tobacco during pregnancy.	9.4%	5.9%
Percent of women who report use of alcohol during pregnancy.	6.0%	3.9%
Degree to which the action plan that supports or facilitates the transition of children & youth with special health care needs to adult life is implemented.	19.0	24

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	59.3%	59.3%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	45.2%	45.2%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	73.5%	73.5%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	88.8%	88.8%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	39.4%	39.4%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	83.7%	92.4%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	19.6	16
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	27.7%	28%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	2.7	2
The percent of mothers who breastfeed their infants at 6 months of age.	50.7%	52%
Percentage of newborns who have been screened for hearing before hospital discharge.	98.1%	98%
Percent of children without health insurance.	2.2%	0%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	22.4%	17%
Percentage of women who smoke in the last three months of pregnancy.	9.4%	5%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	8.2	7
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	88.7%	90%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	77.9%	86%

#### 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants State of Hawaii Department of Health Honolulu, HI \$115,000 (EMSC Partnership Grants)

#### **Healthy Start**

Disparities in Perinatal Health-Border Initiatives Hawai`i Department of Health Honolulu, HI \$925,000 (Disparities in Perinatal Health-Border Initiatives)

#### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
STATE OF HAWAII DEPARTMENT OF HEALTH
Honolulu, HI
\$140,000
(Community-Based Integrated Service Systems (Local/State))

#### **Title V - Special Projects of Regional and National Significance (SPRANS)**

State Implementation Grants for Integrated Community Systems for CSHCN STATE OF HAWAII DEPARTMENT OF HEALTH Honolulu, HI \$300,000 (State Implementation Grants for Integrated Community Systems for CSHCN)

Health Families Expansion Program
KALIHI-PALAMA HEALTH CENTER
Honolulu, HI
\$50,000
(Healthy Tomorrows Partnership for Children Program)

STATE SYSTEMS DEVELOPMENT INITIATIVE STATE OF HAWAII DEPARTMENT OF HEALTH Honolulu, HI \$94,644 (State Systems Development Initiative) Family Professional Partnership/CSHCN Hawaii Pediatric Association Research & Education Foudation Honolulu, HI \$95,700 (Family Professional Partnership/CSHCN)

PUBLIC HEALTH TRAINING IN MCH: A GRADUATE CERTIFICATE PROGRAM UNIVERSITY OF HAWAII AT MANOA Honolulu, HI \$180,000 (Certificate in MCH Public Health)

Heritable Disorders STATE OF HAWAII DEPARTMENT OF HEALTH Honolulu, HI \$500,000 (Heritable Disorders)

Consumer Initiatives for Genetic Resources and Services State of Hawaii Department of Health Honolulu, HI \$130,000 (Consumer Initiatives for Genetic Resources and Services)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation STATE OF HAWAII DEPARTMENT OF HEALTH Honolulu, HI \$100,000 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy HAWAII DISABILITY RIGHTS CENTER HONOLULU, HI \$50,000 (Traumatic Brain Injury Protection and Advocacy)

#### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING STATE OF HAWAII DEPARTMENT OF HEALTH Honolulu, HI \$150,000 (Universal Newborn Hearing Screening and Intervention)

# **IOWA**

The Iowa Title V Maternal and Child Health Services Block Grant Program- Administered by the Bureau of Family Helath; Division of Health Promotion and Chronic Disease Prevention, Iowa Department of Public Health. The bureau's responsibilities include: 1) conducting a statewide needs assessment; 2) developing policies, plans, and programs to improve the health of women, infants, children, adolescents, and families; and 3) administering family planing programs. The bureau is administratively responsible for coordinating Title V servcies for children and youth with special health care needs through a contract with the University of Iowa, Department of Pediatrics, Child Health Specialty Clinics (CHSC).

State Population: 2,988,046

Live Births: 40,610

#### MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$16,809,478 Other MCHB Grant Programs: \$2,321,581

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$19,131,059

#### **CONTACT INFORMATION**

#### For More Information on Title V:

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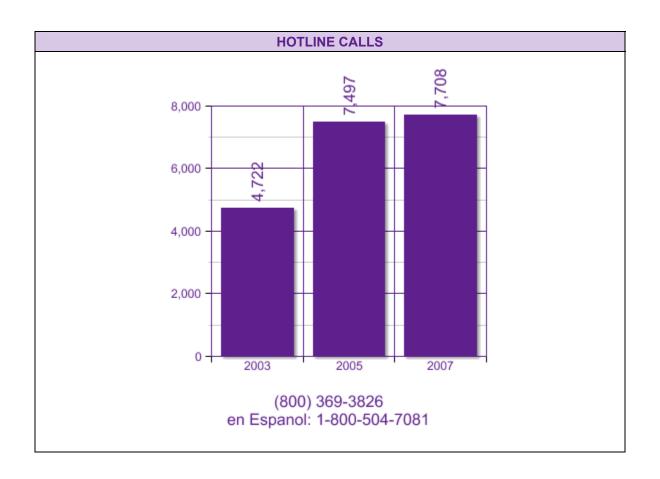
brian-wilkes@uiowa.edu

http://www.uihealthcare.com/CHSC

#### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By N		ls Served and Population Gr	oup
Populations Served	Number of Individuals Serve	ed Expenditure	es FY 2007
Pregnant Women	10,810	\$1,936,580	11.5%
Infants < 1 year old	38,552	\$295,055	1.8%
Children 1 to 22 years old	122,351	\$7,551,603	44.9%
Children with Special Healthcare Needs	6,598	\$6,552,534	39%
Others	64	\$0	0%
Administration		\$473,706	2.8%
Totals	178,375	\$16,809,478	100%
-	State Funds 5,699,923 (33.9%) Local MCH Funds 0 (0%)	18% — 3% —	15%
■ <sup>4</sup>	0 (0%) Unobligated Balance 0 (0%)	-4	15%
<u> </u>	5. Program Income 522,668 (3.1%)	34% ——	
<b>6</b>	. Other Funds 2,987,578 (17.8%)		
By Category of Services			
	Direct Health Care ervices \$4,932,475 (29.3%)	$\wedge$	
	Enabling Services	/ \	

# 1. Direct Health Care Services \$4,932,475 (29.3%) 2. Enabling Services \$4,610,345 (27.4%) 3. Population-Based Services \$1,789,479 (10.6%) 4. Infrastructure-Building Services \$5,477,179 (32.6%) 32.6%





#### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	1
FY 2007 Total:	15
Total Possible:	18

Scale: 0 = Not Met

> 1 = Partially Met 2 = Mostly Met

3 = Completely Met

# IOWA

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	5.5	*
The ratio of the black infant mortality rate to the white infant mortality rate.	2.2	*
The neonatal mortality rate per 1,000 live births.	3.3	*
The postneonatal mortality rate per 1,000 live births.	2.2	*
The perinatal mortality rate per 1,000 live births plus fetal deaths.	8.6	*
The child death rate per 100,000 children aged 1 through 14.	18.8	*
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percent of children served by family support programs, whose primary delivery method is a home visit, that are served through evidence-based programs.	42.0%	70%
Percent of early care and education businesses who have received a training or service from a child care nurse consultant.	29.7%	50%
Percent of Medicaid enrolled children zero to five years who receive developmental evaluations.	8.0%	30%
Percent of children who needed care from a specialist who received the care without problem.	85.1%	93%
Percent of children 0-3 years served by Early ACCESS (IDEA, Part C).	2.7%	3.3%
Percent of lowa counties that have at least one participating targeted community in the CDC nutrition and physical activity obesity prevention project.	12.1%	48%
Percent of Medicaid enrolled children ages 9-35 months receiving a blood lead test.	61.4%	70%
Percent of Medicaid enrolled children ages 1-5 years who receive dental services.	42.1%	47%
Rate (per 1,000 births) of infant deaths due to prematurity.	3.0	2.7
Number of professionals trained on the use of appropriate maternal depression screening tools and the available referral resources.	*	1700

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	64.7%	79.2%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	57.4%	73.3%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	68.6%	87.6%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	92.9%	97.6%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	47.3%	60.4%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	88.4%	96%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	15.6	14
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	44.5%	50%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	4.6	2
The percent of mothers who breastfeed their infants at 6 months of age.	44.9%	54%
Percentage of newborns who have been screened for hearing before hospital discharge.	98.2%	100%
Percent of children without health insurance.	2.8%	2.5%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	32.5%	20%
Percentage of women who smoke in the last three months of pregnancy.	14.9%	10%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	10.1	9.4
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	94.2%	97%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	77.7%	89%

# IOWA

#### 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants IOWA DEPARTMENT OF PUBLIC HEALTH Des Moines, IA \$115,000 (EMSC Partnership Grants)

#### **Healthy Start**

HEALTHY START COMMUNITIES
VISITING NURSE SERVICES
Des Moines, IA
\$900,000
(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
IOWA DEPARTMENT OF PUBLIC HEALTH
Des Moines, IA
\$140,000
(Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

State Implementation Grants for Integrated Community Systems for CSHCN UNIVERSITY OF IOWA lowa City, IA \$300,000 (State Implementation Grants for Integrated Community Systems for CSHCN)

MCH DATA ENHANCEMENT PROJECT IOWA DEPARTMENT OF PUBLIC HEALTH Des Moines, IA \$94,644 (State Systems Development Initiative)

Children's Oral Healthcare Access Program IOWA DEPARTMENT OF PUBLIC HEALTH Des Moines, IA \$160,000 (Childrens Oral Healthcare Access Program)

State Grants for Perinatal Depression IOWA DEPARTMENT OF PUBLIC HEALTH Des Moines, IA \$203,508 (State Grants for Perinatal Depression)

Consumer Initiatives for Genetic Resources and Services IOWA DEPARTMENT OF PUBLIC HEALTH Des Moines, IA \$100,000 (Consumer Initiatives for Genetic Resources and Services)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation IOWA DEPARTMENT OF PUBLIC HEALTH Des Moines, IA \$118,600 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy IOWA PROTECTION & ADVOCACY SERVICES, INC. West Des Moines, IA \$50,000 (Traumatic Brain Injury Protection and Advocacy)

#### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING
UNIVERSITY OF IOWA HOSPITALS & CLINICS
lowa City, IA
\$139,829
(Universal Newborn Hearing Screening and Intervention)

# IDAHO

The Bureau of Clinical and Preventive Services, Idaho Department of Health and Welfare, administers the Title V MCH grant. The programs directly supervised by the Idaho MCH Director include: CSHP, Family Planning, Immunization, and WIC. Title V funds staff and/or programs in the Bureau of Community and Environmental Health, the Bureau of Vital Records and Health Statistics, and the Office of Epidemiology and Food Protection.

State Population: 1,499,402

Live Births: **24,184** 

#### MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: **\$5,843,950**Other MCHB Grant Programs: **\$745,203** 

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$6,589,153

#### **CONTACT INFORMATION**

#### For More Information on Title V:

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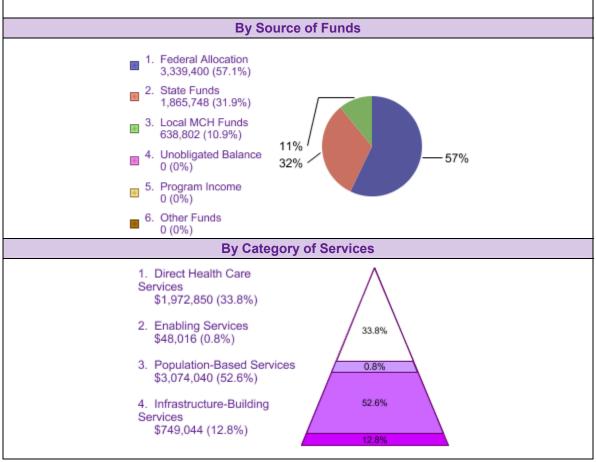
208-334-5963

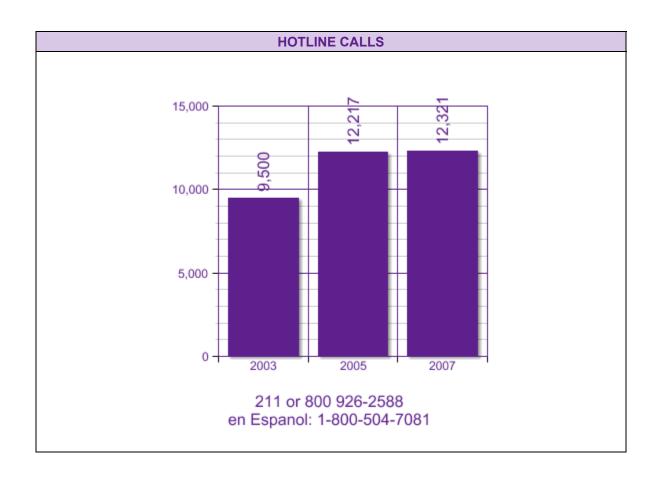
208-332-7307

scogginm@dhw.idaho.gov

### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group  Number of			
Populations Served	Individuals Served	Expenditures FY 2007	
Pregnant Women	2,685	\$327,341	5.6%
Infants < 1 year old	24,400	\$1,380,025	23.6%
Children 1 to 22 years old	86,684	\$2,215,348	37.9%
Children with Special Healthcare Needs	189	\$1,349,911	23.1%
Others	33,963	\$310,767	5.3%
Administration		\$260,558	4.5%
Totals	147,921	\$5,843,950	100%





## IDAHO

### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	2
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	1
Family members are involved in service training of CSHCN staff and providers.	0
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	0
Family members of diverse cultures are involved in all of the above activities.	1
FY 2007 Total:	7
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

## IDAHO

### MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	6.8	6
The ratio of the black infant mortality rate to the white infant mortality rate.	*	2
The neonatal mortality rate per 1,000 live births.	4.6	3.9
The postneonatal mortality rate per 1,000 live births.	2.2	2
The perinatal mortality rate per 1,000 live births plus fetal deaths.	8.3	8.9
The child death rate per 100,000 children aged 1 through 14.	26.4	25
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percent of mothers who were screened for post partum depression within one month following delivery.	99	80
The percent of Medicaid and SCHIP children ages 1 and 2 that received the expected number of EPSDT screens.	66.4%	76%
Percent of 9th - 12th grade students that report having engaged in sexual intercourse.	42	34.5
Percent of 9th – 12th grade students who used any type of tobacco in the past 30 days	26.1	0
Percent of pregnant women who received dental care during pregnancy.	43.4%	45.9%
Percent of Medicaid and SCHIP children who are fully immunized by age 2.	63	90
Percent of 9th – 12th grade students that are overweight.	11	0

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	52.7%	53%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	47.7%	52%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	56.9%	60%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	86%	86%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	45.8%	46%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	77.8%	83%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	18.2	17.4
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	55.7%	60.9%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	6.8	5.5
The percent of mothers who breastfeed their infants at 6 months of age.	54%	53.5%
Percentage of newborns who have been screened for hearing before hospital discharge.	96.7%	99.2%
Percent of children without health insurance.	13.0%	12.3%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	31.2%	30.6%
Percentage of women who smoke in the last three months of pregnancy.	9.0%	8.3%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	11.7	10.8
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	99%	75%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	71.7%	73.8%

### IDAHO

### 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
IDAHO DEPARTMENT OF HEALTH AND WELFARE
BOISE, ID
\$115,000
(EMSC Partnership Grants)

#### **Title V - Community Integrated Service Systems (CISS)**

CISS - SECCS (PLANNING)
IDAHO STATE DEPT OF HEALTH AND WELFARE
Boise, ID
\$140,000
(Community-Based Integrated Service Systems (Local/State))

### Title V - Special Projects of Regional and National Significance (SPRANS)

Healthy Tomorrows Partnership for Children Program MOUNTAIN STATES GROUP BOISE, ID \$50,000 (Healthy Tomorrows Partnership for Children Program)

Healthy Tomorrows Partnership for Children Program
Treasure Valley Children's Mental Health Project, Inc dba MATCH
Boise, ID
\$50,000
(Healthy Tomorrows Partnership for Children Program)

IMPROVE MCH DATA CAPACITY
IDAHO STATE DEPT. OF HEALTH & WELFARE
Boise, ID
\$94,644
(State Systems Development Initiative)

### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation Idaho State University Pocatello, ID \$118,600 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy COMPREHENSIVE ADVOCACY, INC. BOISE, ID \$50,000 (Traumatic Brain Injury Protection and Advocacy)

### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING IDAHO STATE DEPT. OF HEALTH & WELFARE Boise, ID \$126,959 (Universal Newborn Hearing Screening and Intervention)

The Illinois Department of Human Services (IDHS) administers the Maternal and Child Health Services Block Grant. IDHS uses these funds to provde preventive and primary care services to women, infants, children and adolescents throughout the state. IDHS transfers 30% of the Block Grant funds to the University of Illinois at Chicago Division of Specialized Care for Children (DSCC) to operate the state's program for children with special health care needs. IDHS also transfers some Block Grant funds to the Illinois Department of Public Health (IDPH) to administer population-based services for pregnant women, infants and children, including perinatal care, metabolic and hearing screening of newborns, oral health services, screening for lead poisoning and vision and hearing screening of older children.

State Population: 12,852,548

Live Births: **180,583** 

### MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: **\$282,578,456**Other MCHB Grant Programs: **\$14,196,048** 

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$296,774,504

### **CONTACT INFORMATION**

#### For More Information on Title V:

### **Title V Program, Contact:**

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Interim Director

3135 Old Jacksonville Road

Springfield, Illinois 62704-6488

(217) 558-2350

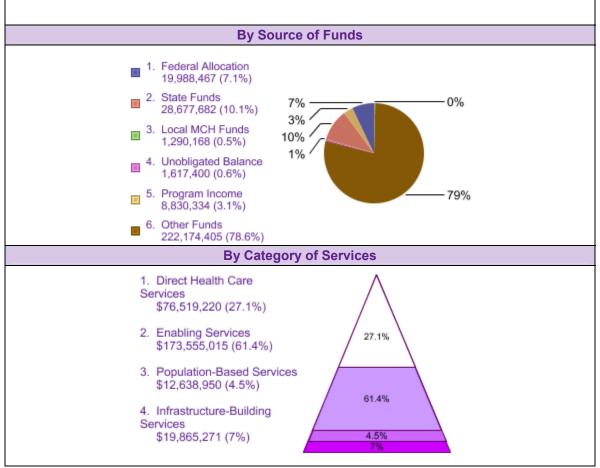
(217) 558-0773

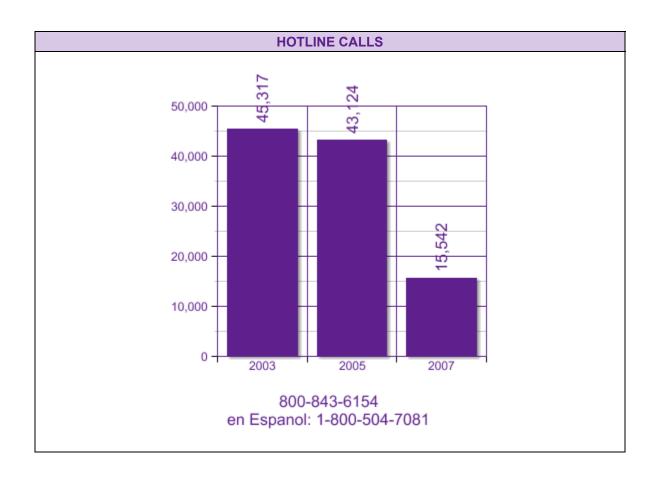
geclark@uic.edu

www.uic.edu/hsc/dscc

### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

Populations Served	Number of Individuals Served	Expenditures FY 2007	
Pregnant Women	147,910	\$22,908,943	8.1%
Infants < 1 year old	175,837	\$41,931,874	14.8%
Children 1 to 22 years old	1,589,030	\$154,676,275	54.7%
Children with Special Healthcare Needs	23,418	\$18,770,574	6.6%
Others	168,191	\$44,290,790	15.7%
Administration		\$0	0%
Totals	2,104,386	\$282,578,456	100%





### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	2
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	2
FY 2007 Total:	15
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

### MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	7.2	7
The ratio of the black infant mortality rate to the white infant mortality rate.	2.7	2.5
The neonatal mortality rate per 1,000 live births.	4.8	4.8
The postneonatal mortality rate per 1,000 live births.	2.4	2.2
The perinatal mortality rate per 1,000 live births plus fetal deaths.	6.9	6.2
The child death rate per 100,000 children aged 1 through 14.	17	18
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The incidence of maltreatment of children younger than age 18	7.6	7.6
The proportion of CSHCN ages 14 and above and their parents who receive comprehensive transition planning services to promote awareness of adult services	81.7%	82.4%
The proportion of women and children up to 22 years of age who receive appropriate genetic testing, counseling, education and follow-up services	1.0	1
The prevalence of Early Childhood Caries (ECC)	30.4%	30%
The prevalence of childhood lead poisoning	3.1	2.4
The rate of unintended pregnancy	42.2%	41%
The proportion of children under 36 months of age in WIC or FCM who have received at least one developmental screening test in the previous 12 months	66.1%	71%
Females 15 to 24 years of age receiving services at Title X family planning clinics tested at least once for chlamydia	55.9%	61%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	99.2%	99.9%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	60.3%	60.7%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	45.1%	45.5%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	59.3%	59.7%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	89.8%	90.2%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	44.2%	44.6%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	78.5%	85%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	22.1	21
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	27.0%	28%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	2.0	1.8
The percent of mothers who breastfeed their infants at 6 months of age.	25.7%	28%
Percentage of newborns who have been screened for hearing before hospital discharge.	99.2%	99.2%
Percent of children without health insurance.	5.9%	5.9%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	29.9%	28.5%
Percentage of women who smoke in the last three months of pregnancy.	10.4%	10%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	5.5	6
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	83.1%	82%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	86.1%	87%

### 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants Loyola University Chicago Maywood, IL \$115,000 (EMSC Partnership Grants)

EMSC Targeted Issue Grants Loyola University Chicago Maywood, IL \$200,000 (EMSC Targeted Issue Grants)

### **Healthy Start**

ELIMINATING DISPARITIES IN PERINATAL HEALTH SOUTHERN ILLINOIS HEALTHCARE FOUNDATION East Saint Louis, IL \$900,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

HEALTHY START INITIATIVE COMPETITIONS
HEALTHCARE CONSORTIUM OF ILLINOIS
Dolton, IL
\$1,725,000
(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH ILLINOIS DEPARTMENT OF HUMAN SERVICES Springfield, IL \$1,775,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH ACCESS COMMUNITY HEALTH NETWORK CHICAGO, IL \$1,675,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH CITY OF CHICAGO DEPARTMENT OF PUBLIC HEALTH Chicago, IL \$925,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH AUNT MARTHA'S YOUTH SERVICE CENTER, INC. CHICAGO HEIGHTS, IL \$875,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### Research

Competition, Volume, NICU Level and Outcomes in California NORTHWESTERN UNIVERSITY CHICAGO, IL \$220,289 (MCH Research)

NATIONAL PRACTICE BASED NETWORK TO IMPROVE CHILD HEALTH AMERICAN ACADEMY OF PEDIATRICS Elk Grove Village, IL \$400,000 (MCH Special Projects Research)

### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
ILLINOIS DEPARTMENT OF HUMAN SERVICES
Springfield, IL
\$140,000
(Community-Based Integrated Service Systems (Local/State))

### **Title V - Special Projects of Regional and National Significance (SPRANS)**

Child Health Practitioner Support Program AMERICAN ACADEMY OF PEDIATRICS Elk Grove Village, IL \$300,000 (Child Health Practitioner Support Program)

Partnerships to Promote Maternal and Child Health AMERICAN ACADEMY OF PEDIATRIC DENTISTRY CHICAGO, IL \$200,000 (Partnerships to Promote Maternal and Child Health)

Partnerships to Promote Maternal and Child Health AMERICAN ACADEMY OF PEDIATRICS Elk Grove Village, IL \$200,000 (Partnerships to Promote Maternal and Child Health)

Integrated Services for Young Children with Special Health Care Needs Illinois Chapter, American Academy of Pediatrics Chicago, IL \$251,755 (Medical Home/CSHCN)

Healthy Tomorrows Partnership for Children Program ERIE FAMILY HEALTH CENTER, INC. Chicago, IL \$50,000 (Healthy Tomorrows Partnership for Children Program)

ILLINOIS' MCH DATA USE ACADEMY
ILLINOIS DEPARTMENT OF HUMAN SERVICES
Springfield, IL
\$94,644
(State Systems Development Initiative)

GENETICS SERVICES SICKLE CELL DISEASE ASSOCIATION OF ILLINOIS CHICAGO, IL \$185,000 (Genetic Services Project)

Children's Oral Healthcare Access Program ILLINOIS DEPARTMENT OF PUBLIC HEALTH Springfield, IL \$160,000 (Childrens Oral Healthcare Access Program)

Healthy Behaviors in Women ERIE FAMILY HEALTH CENTER, INC. Chicago, IL \$141,190 (Healthy Behaviors in Women)

Family Professional Partnership/CSHCN THE ARC OF ILLINOIS Homewood, IL \$95,700 (Family Professional Partnership/CSHCN)

Thalassemia Children's Memorial Hospital Chicago, IL \$175,000 (Thalassemia)

State Grants for Perinatal Depression University of Illinois College of Medicine Chicago, IL \$209,627 (State Grants for Perinatal Depression)

Epidemiological MCH/SPH Institute University of Illinois College of Medicine Chicago, IL \$26,000 (Epidemiological MCH/SPH Institute) MCH Knowledge to Practice University of Illinois College of Medicine Chicago, IL \$30,000 (MCH Continuing Education)

Bright Futures Pediatric Implementation AMERICAN ACADEMY OF PEDIATRICS Elk Grove Village, IL \$1,027,000 (Bright Futures Pediatric Implementation)

Sickle Cell Treatment Demonstration Program Christian Community Health Center CHICAGO, IL \$320,000 (Sickle Cell Treatment Demonstration Program)

Medical Home/CSHCN
AMERICAN ACADEMY OF PEDIATRICS
Elk Grove Village, IL
\$862,240
(Medical Home Capacity Building for CSHCN)

Adolescent Health/School-Based Health AMERICAN ACADEMY OF PEDIATRICS Elk Grove Village, IL \$99,999 (Adolescent Health/School-Based Health)

Child Care
AMERICAN ACADEMY OF PEDIATRICS
Elk Grove Village, IL
\$316,924
(Child Care)

Healthy Tomorrows Cooperative Agreement AMERICAN ACADEMY OF PEDIATRICS Elk Grove Village, IL \$180,000 (Healthy Tomorrows Cooperative Agreement)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation ILLINOIS DEPARTMENT OF HUMAN SERVICES Springfield, IL \$103,074 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy EQUIP FOR EQUALITY, INC. CHICAGO, IL \$67,606 (Traumatic Brain Injury Protection and Advocacy)

### **Universal Newborn Hearing Screening**

Universal Newborn Hearing Screening and Intervention University of Illinois College of Medicine Springfield, IL \$150,000 (Universal Newborn Hearing Screening and Intervention)

The Indiana State Department of Health administers the Title V grant through Maternal and Children's Special Health Care Services (MCSHC), a division of the Operational Services Commission (OSC). MCSHC administered programs include: Prenatal Substance Use Prevention Program, Indiana Perinatal Network, SIDS, Preventive and Primary Child Health Care, Indiana RESPECT (Reducing Early Sex and Pregnancy by Educating Children and Teens), Family Care Coordination, Prenatal Care Services, Prenatal Care Coordination, Adolescent Health Centers, Family Planning Services, the Genomics/Newborn Screening Program which includes Early Hearing Detection and Intervention (EHD) Newborn Heal Stick Program, and Sickle Cell Program. MCSHC also administers Children's Special Health Care Services (CSHCS), the state program for children with special health care needs, and Oral Health Services. Title V also supports programs administered within ISDH including: Indiana Childhood Lead Poisoning Prevention Program, Injury Prevention, and Nutrition and Physical Activity. MCSHCS collaborates with many other programs within ISDH such as WIC and Office of Primary Care.

State Population: 6,345,289

Live Births: **88,674** 

### MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$36,327,087 Other MCHB Grant Programs: \$3,625,695

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$39,952,782

### **CONTACT INFORMATION**

#### For More Information on Title V:

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### Title V Program's Services for Children with Special Health Care Needs, contact:

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Director

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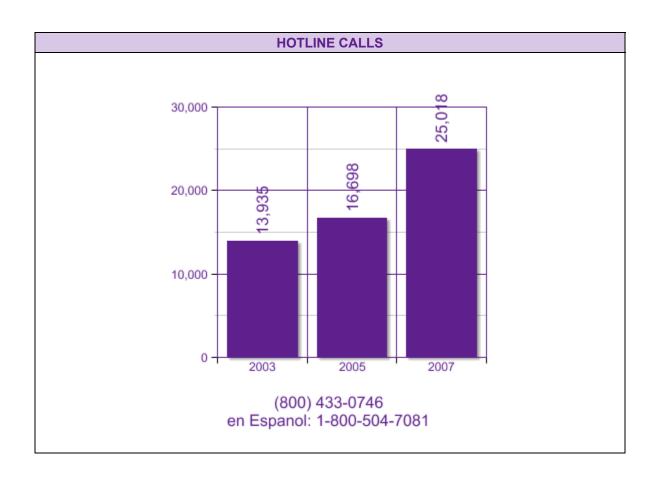
317-233-1252

317-234-2995

ebloom@isdh.in.gov

### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By N	umber of Individuals Se	erved and Population Gro	up
Populations Served	Number of Individuals Served	Expenditures	s FY 2007
Pregnant Women	24,342	\$4,671,489	12.9%
Infants < 1 year old	98,278	\$1,106,601	3%
Children 1 to 22 years old	80,322	\$4,130,488	11.4%
Children with Special Healthcare Needs	6,896	\$20,233,732	55.7%
Others	16,036	\$5,587,647	15.4%
Administration		\$597,130	1.6%
Totals	225,874	\$36,327,087	100%
3 4	. State Funds 18,183,757 (50.1%)  . Local MCH Funds 1,568,926 (4.3%)  . Unobligated Balance 1,438,762 (4%)  . Program Income 2,446,299 (6.7%)  49	-50	-
6	2,446,299 (6.7%) 49 . Other Funds 1,572,421 (4.3%)	0	
	By Category	of Services	
2. 3. 4.	Direct Health Care Prices \$13,019,914 (35.8%)  Enabling Services \$13,702,289 (37.7%)  Population-Based Services \$3,008,030 (8.3%)  Infrastructure-Building Prices \$6,596,854 (18.2%)	35.8% 37.7% 8.3% 18.2%	



### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	2
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	2
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	0
Family members of diverse cultures are involved in all of the above activities.	1
FY 2007 Total:	10
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

### MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	7.8	7.3
The ratio of the black infant mortality rate to the white infant mortality rate.	2.8	1.8
The neonatal mortality rate per 1,000 live births.	4.6	4.1
The postneonatal mortality rate per 1,000 live births.	2.5	2
The perinatal mortality rate per 1,000 live births plus fetal deaths.	6.5	5.6
The child death rate per 100,000 children aged 1 through 14.	20	15
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The number of data sets, including the NBS, UNHS, Lead, IBDPR, Immunizations, CSHCS, Vital Statistics, and First Steps Data, that are completely integrated into the Indiana Child Health Data Set.	1.0	1
The rate per 10,000 for asthma hospitalizations (ICD 9 Codes: 493.0 - 493.9) among children less than five years old.	24	19
The percent of live births to mothers who smoke.	17.1%	14%
The percent of black women (15 through 44) with a live birth whose prenatal care visits were adequate.	58%	63%
The percentage of children age 0 to 7 years with blood lead levels equal to or greater than 10 Micrograms per deciliter.	0.9%	0.6%
The proportion of births occurring within 18 months of a previous birth to the same birth mother.	17%	13%
Number of community/neighborhood partnerships begun in 5 targeted counties to identify perinatal disparities.	1.0	1
The percentage of high school students who are overweight or at risk.	29.1%	18%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	59.3%	62%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	54.6%	57%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	61.8%	64%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	94.3%	97%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	41.1%	42%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	84%	86%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	20.2	18.9
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	48.7%	53%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	3.2	2.4
The percent of mothers who breastfeed their infants at 6 months of age.	34.6%	39%
Percentage of newborns who have been screened for hearing before hospital discharge.	99.6%	99.8%
Percent of children without health insurance.	9.0%	6.5%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	17.5%	15%
Percentage of women who smoke in the last three months of pregnancy.	15.7%	15.2%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	7.2	6.3
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	77.4%	86%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	76.6%	80.6%

### 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Healthy Start**

ELIMINATING DISPARITIES IN PERINATAL HEALTH NORTHWEST INDIANA HEALTH DEPARTMENT COOP HAMMOND, IN \$1,250,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH HEALTH & HOSPITAL CORP OF MARION COUNTY Indianapolis, IN \$900,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

### Research

Health Care Access for Delinquent Youth INDIANA UNIVERSITY Indianapolis, IN \$275,493 (MCH Research)

### **Title V - Community Integrated Service Systems (CISS)**

CISS - SECCS (PLANNING)
INDIANA STATE DEPARTMENT OF HEALTH
Indianapolis, IN
\$140,000
(Community-Based Integrated Service Systems (Local/State))

### Title V - Special Projects of Regional and National Significance (SPRANS)

Healthy Tomorrows Partnership for Children Program CLARIAN HEALTH PARTNERS Indianapolis, IN \$49,925 (Healthy Tomorrows Partnership for Children Program)

INDIANA STATE DEPARTMENT OF HEALTH DATA LINKAGE GRANT INDIANA STATE DEPARTMENT OF HEALTH Indianapolis, IN \$94,644 (State Systems Development Initiative)

Family Professional Partnership/CSHCN About Special Kids, Inc. Indianapolis, IN \$95,700 (Family Professional Partnership/CSHCN)

INDIANA ADOLESCENT HEALTH TRAINING PROJECT INDIANA UNIVERSITY Indianapolis, IN \$377,000 (Leadership Education in Adolescent Health)

LEADERSHIP EDUCATION EXCELLENCE IN PEDIATRIC NUTRITION INDIANA UNIVERSITY, SCHOOL OF MEDICINE Indianapolis, IN \$140,000 (Leadership Training in Pediatric Nutrition)

### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation Indiana Vocational Rehabilitation Services Indianapolis, IN \$100,000 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy Indiana Protection and Advocacy Services Indianapolis, IN \$52,933 (Traumatic Brain Injury Protection and Advocacy)

### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING INDIANA STATE DEPARTMENT OF HEALTH Indianapolis, IN \$150,000 (Universal Newborn Hearing Screening and Intervention)

The Bureau of Family Health (BFH) in the Kansas Department of Health and Environment administers the Maternal and Child Health Services Block Grant program. The mission of the BFH is to provide leadership to enhance the health of Kansas women and children through partnerships with families and communities. BFH core functions include assessment, policy development and assurance. BFH engages in the 10 essential public health services to promote the health of mothers and children: assess and monitor health status; diagnose and investigate health problems; inform and educate the public and families; mobilize community partnerships; priority setting, planning and policy development; legal requirements to protect health and safety; link mothers and children to services; assure competent workforce; evaluate services and conduct research to improve MCH.

State Population: 2,775,997

Live Births: 40,964

### MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$14,157,947 Other MCHB Grant Programs: \$1,571,598

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$15,729,545

### **CONTACT INFORMATION**

#### For More Information on Title V:

### **Title V Program, Contact:**

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Topeka, Kansas 66612-1274

785-296-1310

785-296-6553

lkenney@kdhe.state.ks.us

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### Title V Program's Services for Children with Special Health Care Needs, contact:

Marc K. Shiff, MPA

Director, Children with Special Health Care Needs

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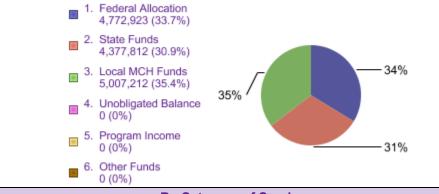
785-291-3368

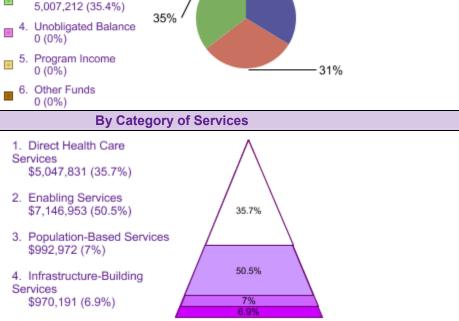
785-296-6553

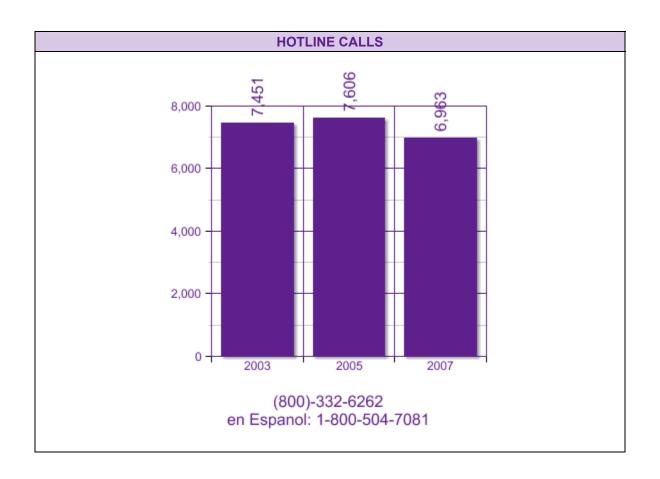
mshiff@kdhe.state.ks.us

www.kdheks.gov/shs

By N	umber of Individuals Se	rved and Population Gro	oup
Populations Served	Number of Individuals Served	Expenditures FY 2007	
Pregnant Women	8,464	\$2,702,803	19.1%
Infants < 1 year old	40,686	\$2,702,803	19.1%
Children 1 to 22 years old	45,963	\$5,730,828	40.5%
Children with Special Healthcare Needs	7,124	\$2,542,226	18%
Others	10,783	\$0	0%
Administration		\$479,287	3.4%
Totals	113,020	\$14,157,947	100%
Totalo	, ,		10070
	By Source	OI Fullus	
<b>=</b> <sup>1</sup>	. Federal Allocation 4,772,923 (33.7%)		







### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	3
FY 2007 Total:	17
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

### MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	*	6.1
The ratio of the black infant mortality rate to the white infant mortality rate.	*	1.6
The neonatal mortality rate per 1,000 live births.	*	4
The postneonatal mortality rate per 1,000 live births.	*	1.8
The perinatal mortality rate per 1,000 live births plus fetal deaths.	*	5.6
The child death rate per 100,000 children aged 1 through 14.	*	20
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The percent of women in their reproductive years with public or private health insurance coverage	80.3%	90%
The percent of women who report cigarette smoking during pregnancy	16.5%	15.3%
The percent of mothers who breastfeed their infants at least 6 months	22.2%	29%
The percent of children and adolescents that receive behavioral/mental health services	5.4%	8%
The percent of children who are overweight	13.8%	10.5%
The rate of adolescent deaths due to motor vehicle crashes when using no seat belt	14.3	11
The percent of infants with special health care needs who receive care within a medical home	82.1%	92%
The percent of youths with special health care needs who receive transition services to adult medical care	47.1%	65%
The percent of CSHCN families that experience financial problems due to the child's health needs	21.4%	20%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	65.6%	75%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	55.3%	60%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	62.9%	64%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	92.5%	99%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	50.3%	55%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	83.6%	91%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	19.5	17
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	38.2%	45%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	4.0	3.6
The percent of mothers who breastfeed their infants at 6 months of age.	22.2%	27%
Percentage of newborns who have been screened for hearing before hospital discharge.	96.4%	98%
Percent of children without health insurance.	7.3%	6.6%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	30.8%	28%
Percentage of women who smoke in the last three months of pregnancy.	14.2%	12.5%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	9.5	9
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	79.5%	87%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	75.0%	80%

### 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Emergency Medical Services for Children (EMSC)**

**EMSC Partnership Grants** Kansas Department of Health and Environment Topeka, KS \$115,000 (EMSC Partnership Grants)

#### **Healthy Start**

HEALTHY START INITIATIVE SEDGWICK COUNTY HEALTH DEPARTMENT Wachita, KS \$550,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### Research

Effectiveness of a Treatment for Pediatric Obesity (MCH) Research UNIVERSITY OF KANSAS LAWRENCE, KS \$143.354 (MCH Research)

### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING) KANSAS STATE DEPT OF HLTH AND ENVIRONMENT Topeka, KS \$140.000 (Community-Based Integrated Service Systems (Local/State))

### Title V - Special Projects of Regional and National Significance (SPRANS)

Health Families Expansion Program University of Kansas Medical Center Research Institute Kansas City, KS \$50,000 (Healthy Tomorrows Partnership for Children Program)

KANSAS STATE SYSTEMS DEVELOPMENT INITIATIVE KANSAS STATE DEPT OF HLTH AND ENVIRONMENT Topeka, KS \$94.644

(State Systems Development Initiative)

Children's Oral Healthcare Access Program Kansas Department of Health and Environment Topeka, KS \$160,000 (Childrens Oral Healthcare Access Program)

### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation
KS STATE DEPARTMENT OF SOCIAL & REHABILITATION SERVICES
Topeka, KS
\$118,600
(Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy Kansas Advocacy & Protective Services, Inc. Topeka, KS \$50,000 (Traumatic Brain Injury Protection and Advocacy)

### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING KANSAS STATE DEPT OF HLTH AND ENVIRONMENT Topeka, KS \$150,000 (Universal Newborn Hearing Screening and Intervention)

## KENTUCKY

The Kentucky Department for Public Health (DPH) administers Title V programs and services through Kentucky's local health departments. There are 56 local and district health departments that provide Title V program and Services in 120 counties. DPH allocates 34.9% on the MCH Block Grant to the Commission for Children with Special Health Care Needs. Other funds are allocated to our University partners, the University of Kentucky and the University of Louisville. The Universities provide training for local health department and state DPH staff and research including Maternal Mortality Review and Fetal and Infant Mortality Review (FIMR) and Injury Prevention Services.

State Population: 4,241,474

Live Births: **58,291** 

### MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: **\$82,385,777**Other MCHB Grant Programs: **\$2,855,452** 

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$85,241,229

#### **CONTACT INFORMATION**

### For More Information on Title V:

#### **Title V Program, Contact:**

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Director

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#### Title V Program's Services for Children with Special Health Care Needs, contact:

Rebecca J. Cecil

Acting Executive Director

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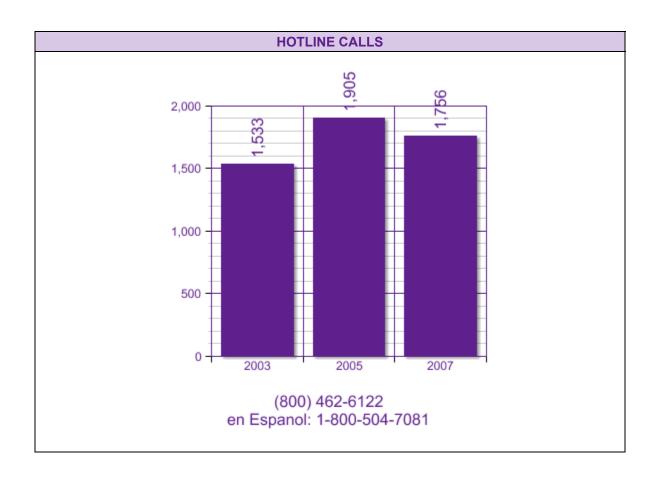
502-595-4459

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## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

lumber of iduals Served 10,974 28,957 186,965 8,920 71,309 307,125 By Source Allocation 935 (15.3%)	\$12,071,140 \$11,299,630 \$21,254,040 \$30,249,236 \$6,087,331 \$1,424,400 \$82,385,777	14.7% 13.7% 25.8% 36.7% 7.4% 1.7% 100%
10,974 28,957 186,965 8,920 71,309 307,125  By Source	\$11,299,630 \$21,254,040 \$30,249,236 \$6,087,331 \$1,424,400 \$82,385,777	13.7% 25.8% 36.7% 7.4% 1.7%
186,965 8,920 71,309 307,125 By Source	\$21,254,040 \$30,249,236 \$6,087,331 \$1,424,400 \$82,385,777	25.8% 36.7% 7.4% 1.7%
8,920 71,309 307,125  By Source	\$30,249,236 \$6,087,331 \$1,424,400 \$82,385,777	36.7% 7.4% 1.7%
71,309  307,125  By Source  Allocation	\$6,087,331 \$1,424,400 <b>\$82,385,777</b>	7.4% 1.7%
307,125  By Source  Allocation	\$1,424,400 <b>\$82,385,777</b>	1.7%
By Source	\$82,385,777	
By Source		100%
Allocation	of Funds	
447 (46.2%) ICH Funds 39% ated Balance		5% 6%
unds 395 (38.5%)		
By Category	of Services	
ealth Care ,442 (47.2%) g Services ,673 (29.1%) on-Based Services	47.2%	
	unds 395 (38.5%) <b>By Category</b> ealth Care ,442 (47.2%) g Services ,673 (29.1%)	unds 395 (38.5%)  By Category of Services ealth Care ,442 (47.2%) g Services ,673 (29.1%) on-Based Services



# KENTUCKY

## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	2
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	2
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	1
Family members are involved in service training of CSHCN staff and providers.	1
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	2
Family members of diverse cultures are involved in all of the above activities.	2
FY 2007 Total:	10
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

# KENTUCKY

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	5.3	6
The ratio of the black infant mortality rate to the white infant mortality rate.	2.0	1.6
The neonatal mortality rate per 1,000 live births.	2.7	3.3
The postneonatal mortality rate per 1,000 live births.	1.8	2.4
The perinatal mortality rate per 1,000 live births plus fetal deaths.	4.9	4
The child death rate per 100,000 children aged 1 through 14.	15.6	17
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Decrease the death rate for children age 0-18 due to unintentianal injury and/or violence.	6.2	7.5
Reduce the rate of substantiated incidence of child abuse, neglect, or dependency.	18.5	10
Increase the percent of women of childbearing age that present to a local health department that receive a preconceptual service.	83.4%	90%
Reduce the percentage of live births that are preterm.	15.8%	10%
Percentage of foster care children served by the Commission for Children with Special Health Care Needs (CCSHCN)	4.9%	60%
Percentage of medically fragile foster children served by the Commission.	78.1%	80%
The number of Medicaid covered women who had at least one dental visit during their pregnancy.	32.3%	36%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	98.3%	99.5%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	64.1%	70%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	90.3%	95%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	99.0%	99%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	88.0%	93%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	8.6%	40%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	84%	92%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	24.8	21
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	29.0%	34%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	2.3	3
The percent of mothers who breastfeed their infants at 6 months of age.	27.5%	32%
Percentage of newborns who have been screened for hearing before hospital discharge.	97.8%	99%
Percent of children without health insurance.	9.7%	7.5%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	16.4%	15%
Percentage of women who smoke in the last three months of pregnancy.	23.0%	18%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	8.5	7
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	55.0%	70%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	71.3%	82%

# KENTUCKY

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
Kentucky Community Technical College System
Versailles, KY
\$115,000
(EMSC Partnership Grants)

#### **Healthy Start**

ELIMINATING DISPARITIES IN PERINATAL HEALTH Whitley County Health Department Williamsburg, KY \$400,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH Louisville/Jefferson County Metro Government Louisville, KY \$1,275,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
KENTUCKY CABINET FOR HEALTH SERVICES
Frankfort, KY
\$140,000
(Community-Based Integrated Service Systems (Local/State))

# Title V - Special Projects of Regional and National Significance (SPRANS)

Child Health Practitioner Support Program Kentucky Child Now! Frankfort, KY \$300,000 (Child Health Practitioner Support Program)

Healthy Tomorrows Partnership for Children Program LEXINGTON-FAYETTE URBAN CTY GOVERNMENT Lexington, KY \$50,000 (Healthy Tomorrows Partnership for Children Program)

Healthy Tomorrows Partnership for Children Program Louisville/Jefferson County Metro Government Louisville, KY \$49,969 (Healthy Tomorrows Partnership for Children Program)

STATE SYSTEMS DEVELOPMENT INITIATIVE KENTUCKY CABINET FOR HEALTH SERVICES Frankfort, KY \$94,644 (State Systems Development Initiative)

Children's Oral Healthcare Access Program Kentucky Cabinet for Health Services Frankfort, KY \$160,000 (Childrens Oral Healthcare Access Program)

### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation Kentucky Cabinet for Health Services Frankfort, KY \$95,839 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy KENTUCKY PROTECTION & ADVOCACY Frankfort, KY \$50,000 (Traumatic Brain Injury Protection and Advocacy)

### **Universal Newborn Hearing Screening**

KISS PROJECT: KENTUCKY INFANTS' SOUND START COMM FOR CHILDREN W/SPECIAL HLTH CARE NEEDS LOUISVILLE, KY \$125,000 (Universal Newborn Hearing Screening and Intervention)

Louisiana's Title V program is administered by the State Sections of Maternal and Child Health and Children's Special Health Services. These programs are housed within the Office of Public Health's Center for Preventive Health. The Office of Public Health is one of the five major agencies within the Louisiana Department of Health and Hospitals. The MCH program serves a large portion of the State's large medically indigent MCH population, providing personal health services and local public health functions at parish health units distributed throughout the State. In addition to direct service provision, MCH is involved in enabling, population-based, and infrastructure building services.

State Population: 4,293,204

Live Births: **63,399** 

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$40,203,936 Other MCHB Grant Programs: \$4,755,725

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$44,959,661

#### **CONTACT INFORMATION**

### For More Information on Title V:

# **Title V Program, Contact:**

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504-219-4630

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#### Title V Program's Services for Children with Special Health Care Needs, contact:

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**CSHCN** Director

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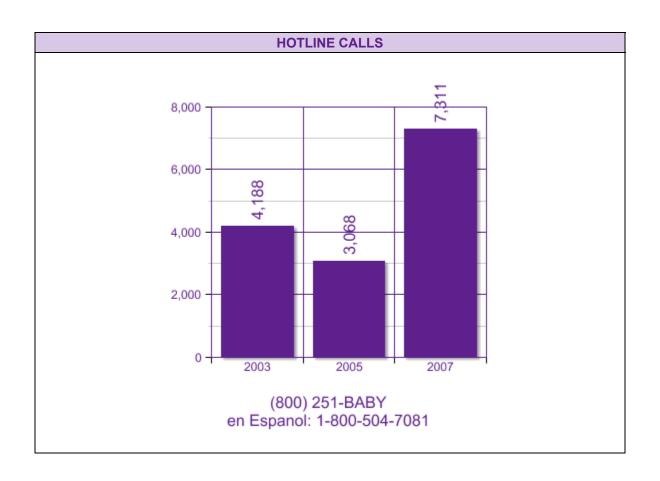
504-568-5055

504-568-7529

sberry1@dhh.la.gov

## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group			
Populations Served	Number of Individuals Served	Expenditures	-
Pregnant Women	54,091	\$7,249,303	18%
Infants < 1 year old	63,700	\$6,934,901	17.2%
Children 1 to 22 years old	74,003	\$13,364,150	33.2%
Children with Special Healthcare Needs	13,078	\$8,450,373	21%
Others	0	\$890,522	2.2%
Administration		\$3,314,687	8.2%
Totals	204,872	\$40,203,936	100%
3 4	. Program Income	% ————————————————————————————————————	
6	7,965,934 (19.8%)  Other Funds 0 (0%)		
	By Categor	y of Services	
2. 3. 4.	Direct Health Care ervices \$16,427,029 (40.9%)  Enabling Services \$13,431,548 (33.4%)  Population-Based Services \$8,749,056 (21.8%)  Infrastructure-Building ervices \$1,596,303 (4%)	40.9% 33.4% 21.8%	



## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	2
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	3
FY 2007 Total:	17
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	*	*
The ratio of the black infant mortality rate to the white infant mortality rate.	*	*
The neonatal mortality rate per 1,000 live births.	*	*
The postneonatal mortality rate per 1,000 live births.	*	*
The perinatal mortality rate per 1,000 live births plus fetal deaths.	*	*
The child death rate per 100,000 children aged 1 through 14.	*	*
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percent of all children and adolescents enrolled in public schools in Louisiana that have access to school-based health center services.	7.3	8.3
Percent of women in need of family planning services who have received such services.	18.8%	26.5%
Rate of children (per 1,000) under 18 who have been abused or neglected.	9.0	8.7
Percent of CSHS patients with case management (follow-up visits) from a nurse, social worker, or nutritionist.	72.6%	85%
Percent of infants receiving WIC services through Public Health Units, aged 0-1, screened by the Louisiana Risk Assessment (LRA)-Infant version.	8.0%	20%
Percent of women who use alcohol during pregnancy.	6.8%	5%
Rate of infant deaths due to Sudden Infant Death Syndrome.	0.9	1
Percent of state fetal and infant deaths reviewed by a Feto-Infant Mortality Review (FIMR).	*	50%
Percent of licensed day care centers with a health consultant contact.	85.4%	100%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	97.9%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	62.2%	65%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	49.6%	55%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	65.5%	70%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	89.3%	90%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	41%	44%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	73%	91%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	29.5	24
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	18.0%	25%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	4.2	4
The percent of mothers who breastfeed their infants at 6 months of age.	15.2%	16.2%
Percentage of newborns who have been screened for hearing before hospital discharge.	96.6%	99%
Percent of children without health insurance.	16.7%	8%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	*	10.5%
Percentage of women who smoke in the last three months of pregnancy.	17.7%	13.5%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	12.0	8.8
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	88.1%	90%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	87.1%	91%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants Louisiana DHH, OPH, Bureau of EMS Baton Rouge, LA \$115,000 (EMSC Partnership Grants)

#### **Healthy Start**

NORTH LOUISIANA AREA HEALTH EDUCATION CENTER NORTH LOUISIANA AREA HEALTH BOSSIER CITY, LA \$500,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

HEALTHY START INTIATIVE CITY OF NEW ORLEANS New Orleans, LA \$2,125,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH FAMILY ROAD OF GREATER BATON ROUGE, INC. Baton Rouge, LA \$700,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

Healthy Start Initiative-Eliminating Racial/Ethnic Disparities
The Family Tree Information, Education, Counseling Center, Inc
Lafayette, LA
\$538,575
(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

# Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
LOUISIANA STATE DOH & HOSPITALS
Metairie, LA
\$140,000
(Community-Based Integrated Service Systems (Local/State))

### Title V - Special Projects of Regional and National Significance (SPRANS)

LOUISIANA STATE SYSTEMS DEVELOPMENT INITIATIVE LOUISIANA OFFICE OF PUBLIC HEALTH New Orleans, LA \$94,644 (State Systems Development Initiative)

Family Professional Partnership/CSHCN Bayou Land Families Helping Families Thibodaux, LA \$95,700 (Family Professional Partnership/CSHCN)

State Grants for Perinatal Depression Louisiana Office of Public Health Baton Rouge, LA \$205,806 (State Grants for Perinatal Depression)

Epidemiological MCH/SPH Institute
Administrators of the Tulane Educational Fund, DBA: Tulane University SPHTM
New Orleans, LA
\$26,000
(Epidemiological MCH/SPH Institute)

Training CED/COR Pediatric and Child Psychiatry LOUISIANA STATE UNIVERSITY HSC SHREVEPORT, LA \$15,000 (Training CED/COR Pediatric and Child Psychiatry)

### **Traumatic Brain Injury**

Traumatic Brain Injury Protection and Advocacy ADVOCACY CENTER NEW ORLEANS, LA \$50,000 (Traumatic Brain Injury Protection and Advocacy)

## **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING12/23/02 LOUISIANA OFFICE OF PUBLIC HEALTH Metairie, LA \$150,000 (Universal Newborn Hearing Screening and Intervention)

The Massachusetts Title V Maternal and Child Health Services Block Grant Program is primarily located within the Bureau of Family Health and Nutrition (BFHN), Massachusetts Department of Public Health. The Bureau Director, Sally Fogerty is the Title V Director for the Commonwealth. This Bureau includes Perinatal, Early Childhood, Children with Special Health Needs, WIC and Early Intervention (Part H., IDEA). After a reorganization within the Department, a number of Title V supported programs are located in our sister Bureau, Community Health Access and Promotion (BCHAP), including primary care services for women of reproductive age and adolescents, family planning services, teen pregnancy prevention programs, school health programs, oral health, injury control and violence prevention programs. BCHAP also includes a number of primary care/health access and chronic disease prevention and health promotion programs with which we work closely on cross-cutting health issues.

The BFHN actively works to improve and to protect the health and well-being of women, children and families to achieve their optional development and health outcomes. It does this by: providing and expanding family-centered services and accessible systems of care; identifying and responding to the diverse cultural and changing needs of MA communities; partnering within the bureau, with families, communities, and other public and private organizations and groups, advocating for resources to address unmet needs and to assure quality services; developing and implementing policy and innovative programs; monitoring health status and program effectiveness; and motivating and educating the public.

The Bureau has established the following priorities: standardize systems to monitor and track progress, with outcomes, targets and milestones specified for all programs, enhance and integrate data systems and use data to inform practice outcomes, identify healthy disparities and shape programs; target services to reduce health disparities and serve those most in need; monitor, evaluate and manage increase in external demand; focus and align efforts to support systems of care well before, during and after pregnancies; define and set direction for CYSHCH program, and support and enhance collaborations within the bureau and with other bureaus and agencies.

State Population: 6.449.755

Live Births: 77,769

# MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$77,236,399 Other MCHB Grant Programs: \$8,400,955

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$85,637,354

### **CONTACT INFORMATION**

### For More Information on Title V:

## **Title V Program, Contact:**

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## Title V Program's Services for Children with Special Health Care Needs, contact:

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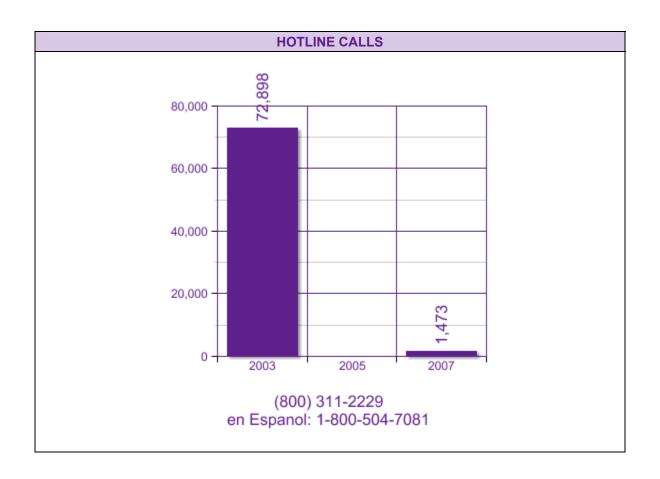
(617) 624-5901

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## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group			
Populations Served	Number of Individuals Served	Expenditure	es FY 2007
Pregnant Women	15,047	\$2,737,152	3.5%
Infants < 1 year old	16,528	\$813,626	1.1%
Children 1 to 22 years old	249,773	\$20,229,188	26.2%
Children with Special Healthcare Needs	44,988	\$46,022,746	59.6%
Others	47,283	\$6,165,178	8%
Administration		\$1,268,509	1.6%
Totals	373,619	\$77,236,399	100%
_	Federal Allocation 10,744,565 (13.9%) State Funds 66,283,296 (85.8%)	1	4%
■ <sup>4</sup>	Local MCH Funds 0 (0%) Unobligated Balance 208,538 (0.3%)	3%	
6	Other Funds 0 (0%)		
	By Categor	y of Services	
2. 3. 4.	Direct Health Care ervices \$27,412,175 (35.5%)  Enabling Services \$20,365,187 (26.4%)  Population-Based Services \$12,236,433 (15.8%)  Infrastructure-Building ervices \$17,222,604 (22.3%)	35.5% 35.5% 15.8%	



## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	2
FY 2007 Total:	16
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	4.8	4.8
The ratio of the black infant mortality rate to the white infant mortality rate.	2	2
The neonatal mortality rate per 1,000 live births.	3.6	3.5
The postneonatal mortality rate per 1,000 live births.	1.2	1.2
The perinatal mortality rate per 1,000 live births plus fetal deaths.	5.5	5.4
The child death rate per 100,000 children aged 1 through 14.	12	10
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The percentage of pregnancies among women age 18 and over that are intended.	78.4%	82%
The percent of births to women who report not smoking during their current pregnancy.	92.5%	94%
The percentage of women with an interpregnancy interval (IPI) less than 12 months.	13.5%	13.3%
Percent of children and youth (ages 3 - 18) enrolled in Medicaid who receive preventive dental services annually.	45.9%	60%
The extent to which the Commonwealth is making progress in developing a system to promote healthy weight, including nutrition and physical activity, as measured on a unique scale from 0 - 87.	56.0	85
The degree to which Pediatric Sexual Assault Nurse Examiner (Pedi-SANE) services have been implemented statewide, as measured on a unique scale from 0 - 20.	15.0	19
The percent of licensed child care centers serving children age birth to five who have on-site health consultation	22.5%	50%
The extent to which perinatal health disparities are addressed at the state and local levels, collaboratively with stakeholders and community partners, as measured by a unique scale from 0 - 33.	11.0	19
The percentage of adolescents reporting no current use (in past 30 days) of either alcohol or illicit drugs.	66%	68%
The percentage of Massachusetts births that occur in a hospital that has an active Shaken Baby Syndrome Prevention Program.	0.0%	90%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	57.1%	65%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	45.7%	53%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	63.1%	70%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	87.6%	90%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	46.6%	50%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	88.3%	91%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	10.5	9.5
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	66.2%	71%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	1.2	1.2
The percent of mothers who breastfeed their infants at 6 months of age.	42.1%	46%
Percentage of newborns who have been screened for hearing before hospital discharge.	98.7%	99.6%
Percent of children without health insurance.	2.3%	1%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	34%	32%
Percentage of women who smoke in the last three months of pregnancy.	9.2%	6%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	4.3	4.1
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	86%	86%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	82%	83%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH
BOSTON, MA
\$115,000
(EMSC Partnership Grants)

#### **Healthy Start**

HEALTHY START INITIATIVE: ELIMINATING DISPARITIES IN PERINATAL HEALTH GREAT BROOK VALLEY HEALTH CENTER WORCESTER, MA \$750,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

HEALTHY START INITIATIVE BOSTON PUBLIC HEALTH COMMISSION BOSTON, MA \$2,125,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

### Research

How Does the Family Matter? Influences of Child and Adolescent Family Factors on Adult Mental Health and Functioning SIMMONS COLLEGE BOSTON, MA \$99,772 (MCH Research)

### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH
BOSTON, MA
\$140,000
(Community-Based Integrated Service Systems (Local/State))

### Title V - Special Projects of Regional and National Significance (SPRANS)

State Implementation Grants for Integrated Community Systems for CSHCN COMMONWEALTH OF MASSACHUSETTS
Boston, MA
\$300,000
(State Implementation Grants for Integrated Community Systems for CSHCN)

Medical Home/CSHCN UNIVERSITY OF MASSACHUSETTS Worcester, MA \$150,000 (Medical Home/CSHCN)

HEALTHY TOMORROWS PARTNERSHIP FOR CHILDREN CAMBRIDGE HEALTH ALLIANCE Cambridge, MA \$50,000 (Healthy Tomorrows Partnership for Children Program)

Health Families Expansion Program UNIV. OF MASS. MEDICAL SCHOOL WORCESTER, MA \$49,136 (Healthy Tomorrows Partnership for Children Program)

Health Families Expansion Program
DORCHESTER HOUSE MULTI-SERVICE CENTER
DORCHESTER, MA
\$50,000
(Healthy Tomorrows Partnership for Children Program)

Healthy Tomorrows Partnership for Children Program CHILDREN'S HOSPITAL BOSTON, MA \$50,000 (Healthy Tomorrows Partnership for Children Program)

STATE SYSTEMS DEVELOPMENT INTIATIVE FOR MA MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH BOSTON, MA \$94,644 (State Systems Development Initiative)

REGION COMPREHENSIVE HEMOPHILIA PROGRAM UNIV. OF MASS. MEDICAL SCHOOL Worcester, MA \$340,900 (Hemophilia Treatment Centers (SPRANS))

Children's Oral Healthcare Access Program
Commonwealth of Massachusetts / Department of Public Health
Boston, MA
\$160,000
(Childrens Oral Healthcare Access Program)

Integrated Health and Behavioral Health Care for Children And Adolescents Cambridge Medical Care Foundation Cambridge, MA \$199,895 (Integrated Health and Behavioral Health Care for Children And Adolescents )

Family Professional Partnership/CSHCN
Federation for Children with Special Needs
Boston, MA
\$95,700
(Family Professional Partnership/CSHCN)

State Grants for Perinatal Depression
Commonwealth of Massachusetts / Department of Public Health
Boston, MA
\$209,632
(State Grants for Perinatal Depression)

Continuing Education/Distance Learning
UNIVERSITY OF MASSACHUSETTS MEDICAL SCHOOL
WORCESTER, MA
\$129,914
(MCH Distance Learning)

Epidemiological MCH/SPH Institute
Trustees of Boston University, Boston University Medical Campus
Boston, MA
\$26,000
(Epidemiological MCH/SPH Institute)

Epidemiological MCH/SPH Institute President and Fellows of Havard College Boston, MA \$26,000 (Epidemiological MCH/SPH Institute)

Training CED/COR Pediatric and Child Psychiatry CHILDREN'S HOSPITAL BOSTON, MA \$15,000 (Training CED/COR Pediatric and Child Psychiatry)

MCH Knowledge to Practice Trustees of Boston University, Boston University Medical Campus Boston, MA \$29,980 (MCH Continuing Education)

ADOLESCENT HEALTH TRAINING PROGRAM CHILDREN'S HOSPITAL BOSTON, MA \$375,000 (Leadership Education in Adolescent Health)

Promoting Integration of State Health Information Systems and Newborn Screening Service Systems

Commonwealth of Massachusetts / Department of Public Health

Boston, MA \$198.897

(Promoting integration of State Health Information Systems and Newborn Screening Service Systems)

Health Insurance and Financing/ CSHCN TRUSTEES OF BOSTON UNIVERSITY Boston, MA \$498,878 (Health Insurance and Financing/ CSHCN)

National Child Death Review Resource Center EDUCATION DEVELOPMENT CENTER, INC. NEWTON, MA \$1,500,000 (The National Child Death Review Resource Center)

Cooperative Agreement - Evidence Base for Systems of Care MASSACHUSETTS GENERAL HOSPITAL Boston, MA \$299,452 (Cooperative Agreement - Evidence Base for Systems of Care)

## **Traumatic Brain Injury**

Traumatic Brain Injury Implementation MASSACHUSETTS REHAB. COMMISSION BOSTON, MA \$118,600 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy Disability Law Center Inc Boston, MA \$53,555 (Traumatic Brain Injury Protection and Advocacy)

### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH BOSTON, MA \$150,000 (Universal Newborn Hearing Screening and Intervention)

The Department of Health and Mental Hygiene, Family Health Administration (FHA) administers Maryland's Title V MCH Block Grant Program. The Title V Program provides leadership for maternal and child issues in Maryland, supports state and community needs assessment and planning activities, develops MCH policies and standards, and supports activities to protect, promote and improve the health of all women, children, adolescents and young adults including those with special health care needs. The Block Grant supports gap-filling direct services for the uninsured and the under-insured; enabling services, such as home visiting, care coordination and genetic counseling; population based services, such as newborn screening and blood lead testing; and infrastructure building activities such as epidemiological analyses and MCH standards development. FHA also provides leadership and direction for the WIC Program, the Title X Family Planning Program, the Primary Care Cooperative Agreement, Preventive Health Services, Health Promotion and Tobacco Use Prevention and Oral Health. The MCH Program partners and collaborates with other State agencies, advocacy groups, parent groups, providers and community- based organizations to support maternal and child health.

State Population: 5,618,344

Live Births: 77,478

# MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: **\$21,078,038** Other MCHB Grant Programs: **\$6,732,672** 

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$27,810,710

### **CONTACT INFORMATION**

#### For More Information on Title V:

### **Title V Program, Contact:**

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# Title V Program's Services for Children with Special Health Care Needs, contact:

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Director, Genetics and CSHCN

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Baltimore, MD 21201

410-767-6730

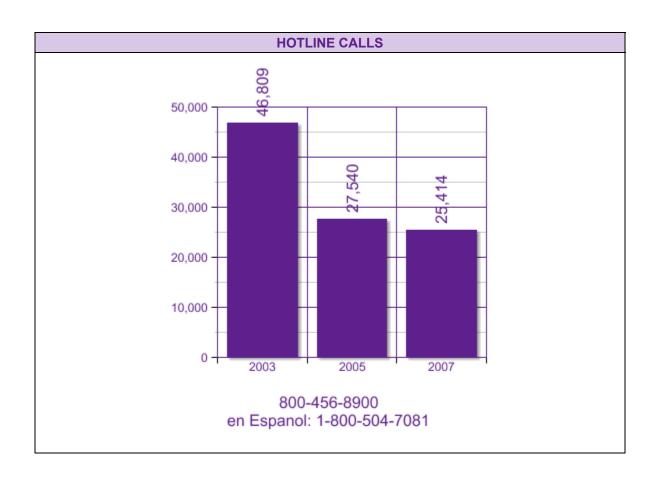
410-333-5047

pannys@dhmh.state.md.us

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## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By N	umber of Individuals Se	rved and Population Gro	oup			
Populations Served	Number of Individuals Served	Expenditures	-			
Pregnant Women	77,430	\$3,927,537	18.6%			
Infants < 1 year old	78,738	\$3,546,528	16.8%			
Children 1 to 22 years old	43,509	\$7,579,061	36%			
Children with Special Healthcare Needs	10,614	\$4,240,450	20.1%			
Others	5,541	\$0	0%			
Administration		\$1,784,462	8.5%			
Totals	215,832	\$21,078,038	100%			
<b>a</b> 4	9,033,445 (42.9%)  Local MCH Funds 0 (0%)  Unobligated Balance 0 (0%)  Program Income 0 (0%)	57	%			
<b>6</b>	Other Funds 0 (0%)					
By Category of Services						
Se 2.	Direct Health Care ervices \$2,114,340 (10%) Enabling Services \$7,883,545 (37.4%) Population-Based Services \$2,328,263 (11%)	37.4%				



## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	2
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	2
FY 2007 Total:	16
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	8.0	7.9
The ratio of the black infant mortality rate to the white infant mortality rate.	3.0	2.3
The neonatal mortality rate per 1,000 live births.	5.8	5.1
The postneonatal mortality rate per 1,000 live births.	2.2	2.1
The perinatal mortality rate per 1,000 live births plus fetal deaths.	8.4	8.1
The child death rate per 100,000 children aged 1 through 14.	17.9	17.4
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percent of pregnancies that are intended	59.7%	60.5%
Percent of women reporting alcohol use in the last three months of pregnancy	7.2%	6.5%
Percent of Maryland kindergartners entering school ready to learn	67.0%	72%
Rate of emergency department visits for asthma per 10,000 children, ages 0-4	221.9	218
Percent of Maryland 12th graders who graduate from high school	85.4%	86.4%
Percentage of local jurisdictions addressing the issue of respite for families of CSHCN	62.5%	62.5%
Percent of mothers breastfeeding at six months	40.8%	50%
Percent of local jurisdictions with written plans to address racial and ethnic disparities in maternal and child health	8.3%	20%
Percent of jurisdictions that partner with medical homes to develop and to disseminate resource materials.	41.7%	83.3%
Number of policy or issue briefs developed by the Title V program	3.0	1

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	98%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	54.8%	57%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	45.6%	48%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	65.5%	66.5%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	89.3%	90.3%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	37.5%	40%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	92.4%	87%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	17.5	15.8
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	42.2%	45%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	2.5	3.5
The percent of mothers who breastfeed their infants at 6 months of age.	40.2%	41.5%
Percentage of newborns who have been screened for hearing before hospital discharge.	92.5%	90%
Percent of children without health insurance.	12.0%	12.1%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	33.0%	32%
Percentage of women who smoke in the last three months of pregnancy.	7.8%	7.4%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	4.2	4.1
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	87.8%	90%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	80.5%	82.5%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
MARYLAND INSTITUTE FOR EMSS
Baltimore, MD
\$115,000
(EMSC Partnership Grants)

#### **Healthy Start**

Healthy Start Initiative-Eliminating Racial/Ethnic Disparities BALTIMORE CITY HEALTHY START, INC. Baltimore, MD \$750,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH BALTIMORE CITY HEALTHY START, INC. Baltimore, MD \$1,250,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
MARYLAND DEPT OF HEALTH & MENTAL HYGIENE
Baltimore, MD
\$140,000
(Community-Based Integrated Service Systems (Local/State))

### Title V - Special Projects of Regional and National Significance (SPRANS)

Improving Understanding of Maternal and Child Health and Health Care Issues
Grantmakers for Children, Youth and Families
Silver Spring, MD
\$200,000
(Improving Understanding of Maternal and Child Health and Health Care Issues)

Healthy Tomorrows Partnership for Children Program UNIVERSITY OF MD MEDICAL SYSTEM FOUNDATION BALTIMORE, MD \$50,000 (Healthy Tomorrows Partnership for Children Program)

# MARYLAND'S STATE SYSTEMS DEVELOPMENT INITIATIVE MARYLAND STATE DEPARTMENT

Baltimore, MD \$94,644

(State Systems Development Initiative)

Family Professional Partnership/CSHCN THE PARENTS' PLACE OF MARYLAND Glen Burnie, MD \$95,700 (Family Professional Partnership/CSHCN)

Awareness and Access to Care for Children and Youths with Epilepsy Epilepsy Foundation
Landover, MD
\$523,719
(Awareness and Access to Care for Children and Youths with Epilepsy)

Epidemiological MCH/SPH Institute JOHNS HOPKINS UNIVERSITY Baltimore, MD \$26,000 (Epidemiological MCH/SPH Institute)

Training CED/COR Pediatric and Child Psychiatry JOHNS HOPKINS UNIVERSITY BALTIMORE, MD \$15,000 (Training CED/COR Pediatric and Child Psychiatry)

Leadership Education in Adolescent Health (LEAH) JOHNS HOPKINS UNIVERSITY Baltimore, MD \$297,000 (Leadership Education in Adolescent Health)

Heritable Disorders American College of Medical Genetics Bethesda, MD \$799,978 (Heritable Disorders)

Awareness and Access to Care for Children and Youth with Epilepsy Epilepsy Foundation Landover, MD \$750,000 (Awareness and Access to Care for Children and Youths with Epilepsy)

SICKLE CELL DISEASE & NEWBORN SCREENING PROGRAM SICKLE CELL DISEASE ASSOCIATION OF AMERICA INC Baltimore, MD \$759,641 (Sickle Cell)

ADVANCING MENTAL HEALTH SERVICES IN SCHOOLS UNIVERSITY OF MARYLAND, BALTIMORE Baltimore, MD \$300,000 (Adolescent Health/School-Based Health)

Sudden Infant Death Syndrome THE SUDDEN INFANT DEATH SYNDROME ALLIANCE Pikesville, MD \$250,000 (Sudden Infant Death Syndrome)

### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation
MARYLAND DEPT OF HEALTH & MENTAL HYGIENE
Baltimore, MD
\$115,000
(Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy MARYLAND DISABILITY LAW CENTER BALTIMORE, MD \$51,118 (Traumatic Brain Injury Protection and Advocacy)

#### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING MARYLAND DEPT OF HEALTH & MENTAL HYGIENE Baltimore, MD \$149,872 (Universal Newborn Hearing Screening and Intervention)

The Title V Program is administered through the Division of Family Health in the Maine Center for Disease Control and Prevention within the Department of Health and Human Services. Programs included in Title V are: Oral Health, Maine Injury Prevention, Teen and Young Adult Health, Children with Special Health Needs/Genetics, State Systems Development Initiative, Public Health Nursing, Healthy Families, Special Supplemental Nutrition for Women, Infants and Children (WIC), Women's Health, Early Childhood Initiative, and Medical and Epidemiology Consultation.

State Population: 1,317,207

Live Births: 14,151

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$18,058,479 Other MCHB Grant Programs: \$1,477,698

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$19,536,177

### **CONTACT INFORMATION**

### For More Information on Title V:

### **Title V Program, Contact:**

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## Title V Program's Services for Children with Special Health Care Needs, contact:

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Director

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## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

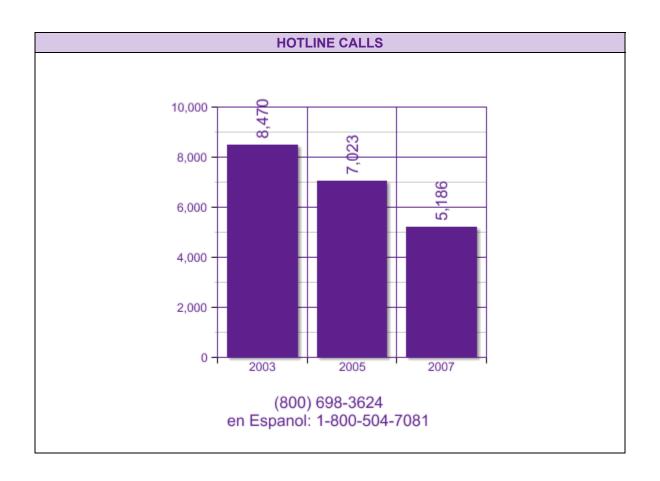
Bv N	By Number of Individuals Served and Population Group				
Populations Served	Number of Individuals Served	Expenditure	•		
Pregnant Women	13,969	\$784,857	4.3%		
Infants < 1 year old	13,969	\$4,735,132	26.2%		
Children 1 to 22 years old	76,522	\$5,669,558	31.4%		
Children with Special Healthcare Needs	1,646	\$3,322,696	18.4%		
Others	0	\$3,314,442	18.4%		
Administration		\$231,794	1.3%		
Totals	106,106	\$18,058,479	100%		
= 4 = 5	14,982,998 (83%)  Local MCH Funds 0 (0%)  Unobligated Balance 0 (0%)  Program Income 0 (0%)  Other Funds 0 (0%)		17%		
	By Category	of Services			
Se	Direct Health Care ervices \$11,140,369 (61.7%) Enabling Services \$1,178,183 (6.5%)				
3.	Population-Based Services	61.7%			

6.5%

21.7%

3. Population-Based Services \$1,823,103 (10.1%)

4. Infrastructure-Building Services \$3,916,824 (21.7%)



## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	2
FY 2007 Total:	16
Total Possible:	18

Scale: 0 = Not Met

> 1 = Partially Met 2 = Mostly Met

3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	*	5
The ratio of the black infant mortality rate to the white infant mortality rate.	*	*
The neonatal mortality rate per 1,000 live births.	*	*
The postneonatal mortality rate per 1,000 live births.	*	*
The perinatal mortality rate per 1,000 live births plus fetal deaths.	*	*
The child death rate per 100,000 children aged 1 through 14.	*	*
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The percentage of births in women less than 24 years of age that are unintended.	59.2	40
The percentage of 0-11 month old children enrolled in WIC who were ever breastfed.	55.9%	61%
The motor vehicle death rate per 100,000 among children 15 to 21 years of age	27.1	20
The percentage of high school students (grades 9-12) who are overweight	12.8	9.5
The percentage of high school students (grades 9-12) who feel like they matter to people in their community.	57.3%	65%
The percentage of elementary schools that have developed and implemented a comprehensive approach to the prevention of bullying in collaboration with the Maine Injury Prevention Program.	5.3	12
The rate per 1000 of emergency department visits for asthma among women ages 15-44.	*	8.3
The percent of licensed child care centers serving children age birth to five who have on-site health consultation.	*	16%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	60.7%	65%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	51.7%	55%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	70%	70%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	87.6%	90%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	49%	51%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	79.8%	89%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	9.4	7.8
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	56.6%	60%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	3.5	2.8
The percent of mothers who breastfeed their infants at 6 months of age.	46.6%	51%
Percentage of newborns who have been screened for hearing before hospital discharge.	95.3%	97.6%
Percent of children without health insurance.	*	10%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	*	27%
Percentage of women who smoke in the last three months of pregnancy.	17.1%	13.5%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	8.4	7.9
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	82.1%	82.6%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	87.2%	90%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

## **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
Maine Board of Emergency Medicial Services
Augusta, ME
\$115,000
(EMSC Partnership Grants)

### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
MAINE DEPARTMENT OF HUMAN SERVICES
Augusta, ME
\$140,000
(Community-Based Integrated Service Systems (Local/State))

### Title V - Special Projects of Regional and National Significance (SPRANS)

State Implementation Grants for Integrated Community Systems for CSHCN Maine Department of Health and Human Services
Augusta, ME
\$295,500
(State Implementation Grants for Integrated Community Systems for CSHCN)

STATE SYSTEMS DEVELOPMENT INITIATIVE MAINE DEPARTMENT OF HUMAN SERVICES Augusta, ME \$94,644 (State Systems Development Initiative)

Children's Oral Healthcare Access Program State of Maine Augusta, ME \$160,000 (Childrens Oral Healthcare Access Program)

HEALTH CARE INFO & EDUCATION FOR FAMILIES OF CHILDREN WITH SPECIAL HEALTH CARE N
MAINE PARENT FEDERATION
AUGUSTA, ME
\$95,700
(Family Professional Partnership/CSHCN)

Transition Services in Adolescent Health - Healthy and Ready to Work Maine Department of Health and Human Services Augusta, ME \$400,000 (Transition Services in Adolescent Health - Healthy and Ready to Work)

### **Traumatic Brain Injury**

Traumatic Brain Injury Protection and Advocacy DISABILITY RIGHTS CENTER OF MAINE Augusta, ME \$50,000 (Traumatic Brain Injury Protection and Advocacy)

### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING
ME ST BUREAU OF ACCOUNTS & CONTROL, STATE PLNG OFFICE
Augusta, ME
\$126,854
(Universal Newborn Hearing Screening and Intervention)

The Constitution of the Marshall Islands designates the Ministry of Health (MOH) as the "state" agency. The MCH is the only legislatively authorized agency that provides health care to the people of the Marshall Islands.

State Population: **61,815** Live Births: **1,589** 

# MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$441,867 Other MCHB Grant Programs: \$160,000

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$601,867

### **CONTACT INFORMATION**

### For More Information on Title V:

## **Title V Program, Contact:**

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Secretary of Health

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## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group				
Populations Served	Number of Individuals Served	Expenditure	es FY 2007	
Pregnant Women	1,552	\$108,907	24.6%	
Infants < 1 year old	7,632	\$86,274	19.5%	
Children 1 to 22 years old	20,727	\$141,811	32.1%	
Children with Special Healthcare Needs	241	\$79,625	18%	
Others	*	\$0	0%	
Administration		\$25,250	5.7%	
Totals	30,152	\$441,867	100%	
= <sup>2</sup>	. Federal Allocation 252,495 (57.1%) 2. State Funds 189,372 (42.9%) 3. Local MCH Funds 0 (0%)			
5	i. Unobligated Balance 0 (0%) 43% ii. Program Income 0 (0%) ii. Other Funds 0 (0%)		7%	
	By Category	of Services		
2. 3. 4.	Direct Health Care ervices \$123,973 (28.1%)  Enabling Services \$90,000 (20.4%)  Population-Based Services \$125,250 (28.3%)  Infrastructure-Building ervices \$102,644 (23.2%)	28.1%		

# HOTLINE CALLS

No hotline calls were reported by Marshall Islands for this year.

en Espanol: 1-800-504-7081

## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	2
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	2
Family members of diverse cultures are involved in all of the above activities.	1
FY 2007 Total:	14
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	23.3	29
The ratio of the black infant mortality rate to the white infant mortality rate.	*	0
The neonatal mortality rate per 1,000 live births.	0.0	6
The postneonatal mortality rate per 1,000 live births.	0.0	*
The perinatal mortality rate per 1,000 live births plus fetal deaths.	18.3	25
The child death rate per 100,000 children aged 1 through 14.	100.7	100
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percentage of mothers who receive nutrition and family planning counseling during prenatal care	88.3	100
The birth rate(per 1,000) for teenagers age 15-17	46.9	4
The Percentage of pregnant women who receive prenatal care during the first trimester.	78.7%	85%
The percentage of high risk pregnant women who are identified and are referred to special prenatal services	27.2	80
The number of women who are screened for cervical cancer.	69.3	100
Proportion of children who are identified and referred to the Children with Special Health Care Needs program	100.0	100
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	99.3%	95%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	0.0%	30%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	100.0%	100%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	100.0%	100%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	100.0%	100%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	100.0%	100%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	54.2%	98%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	95.0%	95%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	46.9	85
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	82.6%	96%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	17.8	4
The percent of mothers who breastfeed their infants at 6 months of age.	97.1%	98%
Percentage of newborns who have been screened for hearing before hospital discharge.	15.6%	45%
Percent of children without health insurance.	100.0%	100%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	4.2%	26%
Percentage of women who smoke in the last three months of pregnancy.	2.5%	2%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	215.3	190
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	0.6%	1%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	78.7%	85%

# 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

Title V - Special Projects of Regional and National Significance (SPRANS)

Children's Oral Healthcare Access Program Ministry of Health Majuro, MH \$160,000 (Childrens Oral Healthcare Access Program)

Michigan's MCH program is administered by the Department of Community Health, Bureau of Family Maternal and Child Health under the authority of the Public Health Code. The Bureau includes the Divisions of Family and Community Health, WIC, and Children's Special Health Care Services. The Division of Family and Community Health has responsibility for family planning, prenatal care, adolescent health, childhood lead poisoning prevention, oral health, newborn hearing screening, infant mortality initiatives and child health. The WIC Division administers the USDA Supplemental Food Program for Women, Infants and Children, Project FRESH and breastfeeding initiatives. The CSHCS Division has responsibility for medical care and treatment for children with special health care needs, case management, ancillary services and the Parent Participation Program.

State Population: 10,071,822

Live Births: 127,476

# MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$108,851,105 Other MCHB Grant Programs: \$8,893,952

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$117,745,057

#### **CONTACT INFORMATION**

### For More Information on Title V:

### **Title V Program, Contact:**

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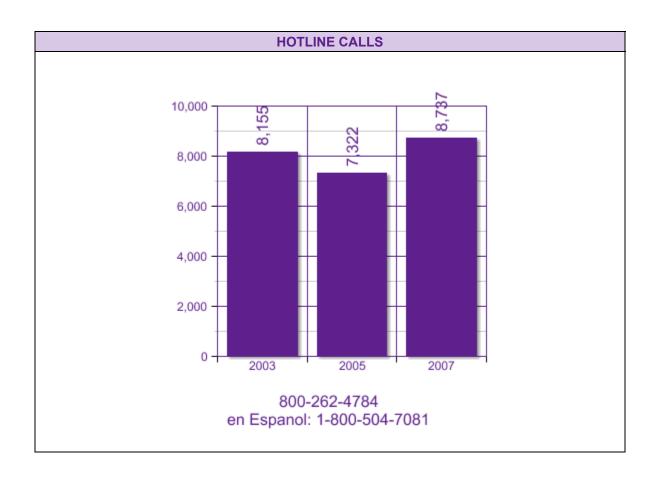
517-335-5008

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## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group				
Populations Served	Number of Individuals Served	Expenditure	-	
Pregnant Women	26,314	\$0	0%	
Infants < 1 year old	123,368	\$54,213,278	49.8%	
Children 1 to 22 years old	2,376,132	\$8,636,965	7.9%	
Children with Special Healthcare Needs	36,969	\$39,016,204	35.8%	
Others	146,904	\$6,511,767	6%	
Administration		\$472,891	.4%	
Totals	2,709,687	\$108,851,105	100%	
- 1		e of Funds		
<b>■</b> <sup>1</sup>	. Federal Allocation			
_ 2	19,101,965 (17.5%) 2. State Funds	,		
<b>=</b> -	34,673,285 (31.9%)	1	8%	
■ <sup>3</sup>	3. Local MCH Funds 0 (0%)			
■ <sup>4</sup>	. Unobligated Balance 276,757 (0.3%) 50%		2%	
5	54,213,278 (49.8%)			
<b>6</b>	5. Other Funds 585,820 (0.5%)	0	%	
	By Category	of Services		
	Direct Health Care ervices \$53,285,123 (49%)	$\wedge$		
2.	Enabling Services \$50,333,826 (46.2%)	49%		
3.	Population-Based Services \$4,759,265 (4.4%)			
	Infrastructure-Building ervices \$472,891 (0.4%)	46.2% 4.4% 0.4%		



## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	2
FY 2007 Total:	17
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	7.8	7.4
The ratio of the black infant mortality rate to the white infant mortality rate.	2.9	2.1
The neonatal mortality rate per 1,000 live births.	6.8	5
The postneonatal mortality rate per 1,000 live births.	3.0	2
The perinatal mortality rate per 1,000 live births plus fetal deaths.	6.7	7
The child death rate per 100,000 children aged 1 through 14.	16.7	16.2
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percent of Medicaid-enrolled women who are screened for maternal depression	*	50%
Percent of low birthweight births (<2500 grams) among live births.	8.2	7.7
Percent of preterm births (<37 weeks gestation) among live births	9.6	10
Percent of live births resulting from unintended pregnancies.	38.3%	37.3%
Increase the percent of Medicaid enrolled children, 0-6 years of age, who receive lead screening	29.2	50
Maternal mortality ratio in Black women	88.9	82
Rate of breastfeeding at six months	15.8%	40%
Percent of WIC-enrolled children who are overweight (BMI greater than or equal to 95th Percentile)	12.4%	11.7%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	56.4%	56.4%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	46%	46%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	60.8%	60.8%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	90.9%	90.9%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	40.8%	40.8%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	81.8%	91%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	14.0	17
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	23.4%	50%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	2.3	2.2
The percent of mothers who breastfeed their infants at 6 months of age.	15.8%	40%
Percentage of newborns who have been screened for hearing before hospital discharge.	97.1%	100%
Percent of children without health insurance.	4.7%	4.1%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	29.5%	27.5%
Percentage of women who smoke in the last three months of pregnancy.	13.6%	10.6%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	7.0	7.3
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	87.8%	88.8%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	83.4%	90.3%

# 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

## **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
Lansing, MI
\$115,000
(EMSC Partnership Grants)

GREAT LAKES REGIONAL NODE FOR PEDIATRIC EMS RESEARCH
THE REGENTS OF THE UNIVERSITY OF MICHIGAN
Ann Arbor, MI
\$742,630
(Emergency Medical Services for Children: Network Development Demonstration Project)

## **Healthy Start**

HEALTHY START INITIATIVE
KALAMAZOO COUNTY HEALTH AND COMMUNITY SERVICES DEPARTMENT
Kalamazoo, MI
\$600,000
(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

GREAT BEGINNINGS SAGINAW COUNTY HEALTHY START SAGINAW COUNTY DEPARTMENT OF PUBLIC HEALTH SAGINAW, MI \$600,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

HEALTHY START INITIATIVE Inter-Tribal Council of Michigan, Inc. Consortium of Michigan's Federal Tribes Sault Sainte Marie, MI \$900,000

HEALTHY START INITIATIVES
DETROIT PUBLIC HEALTH DEPARTMENT
Detroit, MI
\$1,575,000
(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH GENESEE COUNTY HEALTH DEPARTMENT FLINT, MI \$750,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

Healthy Start Initiative-Eliminating Racial/Ethnic Disparities SPECTRUM HEALTH GRAND RAPIDS, MI \$749,270 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
Lansing, MI
\$140,000
(Community-Based Integrated Service Systems (Local/State))

### Title V - Special Projects of Regional and National Significance (SPRANS)

Health Families Expansion Program
Ele's Place
Lansing, MI
\$42,000
(Healthy Tomorrows Partnership for Children Program)

MICHIGAN STATE SYSTEMS DEVELOPMENT INITIATIVE MICHIGAN DEPARTMENT OF COMMUNITY HEALTH Lansing, MI \$94,644 (State Systems Development Initiative)

REGION V- EAST HEMOPHILIA COMPREHENSIVE CARE NETWORK HEMOPHILIA FOUNDATION OF MICHIGAN Ypsilanti, MI

Ypsilanti, MI \$398,485

(Hemophilia Treatment Centers (SPRANS))

Children's Oral Healthcare Access Program
MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
Lansing, MI
\$160,000
(Childrens Oral Healthcare Access Program)

Healthy Behaviors in Women THE REGENTS OF THE UNIVERSITY OF MICHIGAN Ann Arbor, MI \$140,958 (Healthy Behaviors in Women)

Healthy Behaviors in Women Spectrum Health Hospitals Grand Rapids, MI \$141,104 (Healthy Behaviors in Women) Training CED/COR Pediatric and Child Psychiatry
THE REGENTS OF THE UNIVERSITY OF MICHIGAN
Ann Arbor, MI
\$14,997
(Training CED/COR Pediatric and Child Psychiatry)

Heritable Disorders
MICHIGAN PUBLIC HEALTH INSTITUTE
Okemos, MI
\$1,000,000
(Heritable Disorders)

THE NATIONAL CHILD DEATH REVIEW RESOURCE CENTER MICHIGAN PUBLIC HEALTH INSTITUTE Okemos, MI \$400,000 (The National Child Death Review Resource Center)

### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation Michigan Dept of Community Health Lansing, MI \$118,000 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy
MICHIGAN PROTECTION & ADVOCACY SERVICE INC
LANSING, MI
\$61,864
(Traumatic Brain Injury Protection and Advocacy)

### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING MICHIGAN DEPARTMENT OF COMMUNITY HEALTH Lansing, MI \$150,000 (Universal Newborn Hearing Screening and Intervention)

The Minnesota Department of Health is one of the major administrative agencies of state government. The Commissioner of Health is appointed by the governor with confirmation by the state senate. The Executive Office is organized into three Bureaus: Policy Quality and Compliance Bureau, Health Protection Bureau, and Community and Family Health Promotion Bureau. Within the Bureau of Community and Family Health Promotion is the Division of Community and Family Health, the Division of Health Promotion and Chronic Disease and the Office of Minority and Multicultural Health. The Division of Community and Family Health administers the Title V Programs. Other programs within the division include WIC and the Office of Public Health Practice.

State Population: 5,197,621

Live Births: **73,559** 

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$25,127,474 Other MCHB Grant Programs: \$3,083,157

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$28,210,631

### **CONTACT INFORMATION**

### For More Information on Title V:

### **Title V Program, Contact:**

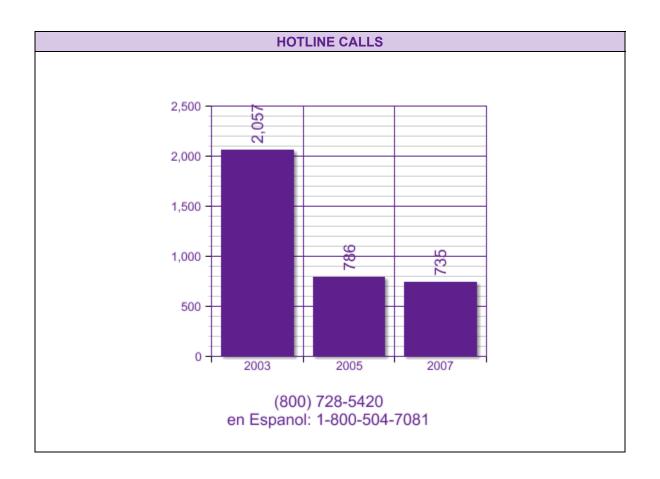
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Division Director
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651.201.3590
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## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By N	umber of Individuals	Served and Population Gr	oup
Populations Served	Number of Individuals Served	Expenditure	es FY 2007
Pregnant Women	10,855	\$4,990,685	19.9%
Infants < 1 year old	71,645	\$2,117,230	8.4%
Children 1 to 22 years old	16,215	\$8,428,321	33.5%
Children with Special Healthcare Needs	7,244	\$8,117,594	32.3%
Others	3,497	\$849,863	3.4%
Administration		\$623,781	2.5%
Totals	109,456	\$25,127,474	100%
■ 3 ■ 4	. Local MCH Funds 3,326,330 (13.2%)	2% — 3	% 6%
	. Local MCH Funds 3,326,330 (13.2%)		6%
5	. Program Income 50,782 (0.2%) 2	7% ———	%
■ 6	. Other Funds 5,649,653 (22.5%)		
	By Catego	ry of Services	
	Direct Health Care ervices \$8,975,962 (35.7%)		
2.	Enabling Services \$4,725,265 (18.8%)	35.7%	
3.	Population-Based Service \$6,177,152 (24.6%)	18.8%	
	Infrastructure-Building	24.6%	
	\$5,249,095 (20.9%)	20.9%	



## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3	
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.		
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	0	
Family members are involved in service training of CSHCN staff and providers.	3	
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3	
Family members of diverse cultures are involved in all of the above activities.	2	
FY 2007 Total:	14	
Total Possible:	18	

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	*	4.8
The ratio of the black infant mortality rate to the white infant mortality rate.	*	1.8
The neonatal mortality rate per 1,000 live births.	*	2.6
The postneonatal mortality rate per 1,000 live births.	*	1.1
The perinatal mortality rate per 1,000 live births plus fetal deaths.	*	4.3
The child death rate per 100,000 children aged 1 through 14.	*	14
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Proportion of counties that universally offer the Follow- Along Program, or an equivalent approved tracking program, to all children birth to age three.	0.6	0.8
Percent of children enrolled in Medicaid who receive Early Periodic Screening, Diagnosis, and Treatment (EPSDT), also known as Child & Teen Checkup (CTC) in MN.	65.5%	68%
Percent of sexually active ninth grade students who used a condom at last intercourse.	70.8%	74%
Incidence of determined cases of child maltreatment by persons responsible for a child's care.	*	4
Percent of pregnancies that are intended.	*	67%
Percent of pregnant women screened for depression during routine prenatal care.	*	88%
The degree to which Title V programs enhance statewide capacity for a public health approach to mental health promotion and suicide prevention for children and adolescents.	2.0	4
The ratio of the low birth weight (<2500 grams) rate for American Indian women and women of color to the low birth rate for white women.	*	1
Percent of Children and Youth with Special Health Care Needs (CYSHCN) with one or more unmet needs for specific health care services.	*	10%
Degree to which comprehensive mental health screening, evaluation, and treatment is provided to Children and Youth with Special Health Care Needs (CYSHCN).	9.0	11

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	*	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	60.3%	65%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	51.8%	54%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	66.3%	70%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	90.7%	95%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	52.9%	59%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	*	87%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	*	11
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	*	16%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	*	1.5
The percent of mothers who breastfeed their infants at 6 months of age.	*	50%
Percentage of newborns who have been screened for hearing before hospital discharge.	*	90%
Percent of children without health insurance.	*	5%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	29.9%	25%
Percentage of women who smoke in the last three months of pregnancy.	*	12%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	*	7.5
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	*	87%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	*	89%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

## **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
Minnesota Emergency Medical Services Regulatory Board
Minneapolis, MN
\$115,000
(EMSC Partnership Grants)

### **Healthy Start**

ELIMINATING DISPARITIES IN PERINATAL HEALTH CITY OF MINNEAPOLIS MINNEAPOLIS, MN \$925,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### Research

Pregnancy Psychosocial Risk Screening Validation Study CITY OF MINNEAPOLIS MINNEAPOLIS, MN \$196,094 (MCH Research)

### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
MINNESOTA DEPARTMENT OF HEALTH STATE TREASURER
Saint Paul, MN
\$140,000
(Community-Based Integrated Service Systems (Local/State))

### Title V - Special Projects of Regional and National Significance (SPRANS)

Healthy Tomorrows Partnership for Children Program Asian Media Access, Inc. Minneapolis, MN \$50,000 (Healthy Tomorrows Partnership for Children Program)

MINNESOTA STATE SYSTEMS DEVELOPMENT INITIATIVE MINNESOTA STATE DEPARTMENT OF HEALTH St. Paul, MN \$94,644 (State Systems Development Initiative)

HLTH CARE INFORMATION & EDUCATION FOR FAMILIES OF CHILDREN W/SPECIAL HLTH

CARE N

PACER CENTER INC

(MCH Distance Learning)

Minneapolis, MN

\$95,700

(Family Professional Partnership/CSHCN)

Continuing Education/Distance Learning UNIVERSITY OF MINNESOTA Minneapolis, MN \$129,874

Training CED/COR Pediatric and Child Psychiatry Regents of the University of Minnesota Minneapolis, MN \$15,000 (Training CED/COR Pediatric and Child Psychiatry)

ADOLESCENT HEALTH TRAINING PROGRAM UNIVERSITY OF MINNESOTA Minneapolis, MN \$398,000 (Leadership Education in Adolescent Health)

NURSING EDUCATION CHILDREN W/SPECIAL HEALTH NEEDS (LT-NURSING) UNIVERSITY OF MINNESOTA Minneapolis, MN \$180,000 (Leadership Training in Nursing)

CENTER FOR ADOLESCENT NURSING LEADERSHIP UNIVERSITY OF MINNESOTA Minneapolis, MN \$180,000 (Leadership Training in Nursing)

KONOPKA INSTITUTE FOR BEST PRACTICES IN ADOLESCENT HEALTH UNIVERSITY OF MINNESOTA Minneapolis, MN \$245,000 (Adolescent Health/School-Based Health)

### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation The State of Minnesota Saint Paul, MN \$118,600 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy LEGAL AID SOCIETY OF MINNEAPOLIS Minneapolis, MN \$50,245 (Traumatic Brain Injury Protection and Advocacy)

# **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING MINNESOTA DEPARTMENT OF HEALTH STATE TREASURER Saint Paul, MN \$150,000 (Universal Newborn Hearing Screening and Intervention)

# MISSOURI

The administration of the MCH Block Grant is under the direction of the Administrator of the Section for Healthy Families and Youth (HFY), with oversight from the Director of the Division of Community and Public Health within the Missouri Department of Health and Senior Services. The Title V program supports needs assessment and activities designed to improve the health status of women, particularly mothers and women of reproductive age, and infants and children, including children with special health care needs. Funds are directed to supporting essential Maternal and Child Health services and prevention programs. Services under Title V administrative control include Missouri School Health Services Program, injury prevention activities, and the Adult Head Injury Services program. Numerous other programs and services funded through the MCH Block Grant, general revenue, and other funds are under the Title V Director's control and include Medicaid case management services, Elks Mobile Dental Unit, Chronic Disease Prevention, Environmental and Communicable Disease Control and others.

State Population: 5,878,415

Live Births: 81,388

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$23,447,312 Other MCHB Grant Programs: \$4,273,676

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$27,720,988

#### **CONTACT INFORMATION**

#### For More Information on Title V:

### **Title V Program, Contact:**

Melinda Sanders, MSN, RN

Title V Director

DCPH, MO Dept of Health & Senior Services

Jefferson City, MO 65102

573-751-6253

573-751-6185

Melinda.Sanders@dhss.mo.gov

### Title V Program's Services for Children with Special Health Care Needs, contact:

**Gary Harbison** 

**CSHCN** Director

SHCN, DCPH, Mo Dept of Health & Snr Services

Jefferson City, MO 65102

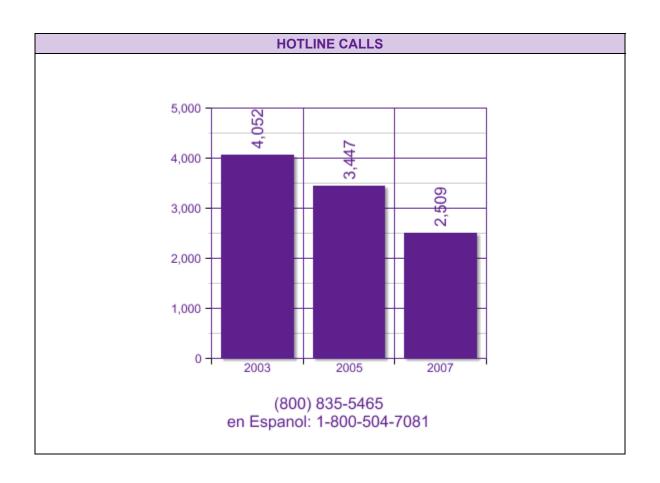
573-751-6241

573-751-6237

Gary. Harbison@dhss.mo.gov

## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By N		Served and Population Gr	oup	
Populations Served	Number of Individuals Served	Expenditure	es FY 2007	
Pregnant Women	43,136	\$1,328,130	5.7%	
Infants < 1 year old	81,100	\$1,743,700	7.4%	
Children 1 to 22 years old	184,331	\$8,653,658	36.9%	
Children with Special Healthcare Needs	4,568	\$7,591,866	32.4%	
Others	20,164	\$2,941,804	12.5%	
Administration		\$1,188,154	5.1%	
Totals	333,299	\$23,447,312	100%	
<b>a</b> 4	. Unobligated Balance 0 (0%)	3% — 5%	1%	
<b>■</b> 6	i. Other Funds 34,563 (0.1%)			
	By Catego	ry of Services		
Se	Direct Health Care ervices \$1,134,222 (4.8%) Enabling Services \$5,893,707 (25.1%)	25.1%		
	Population-Based Service			



# MISSOURI

## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	1
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	1
FY 2007 Total:	14
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# MISSOURI

## MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	7.5	7.1
The ratio of the black infant mortality rate to the white infant mortality rate.	2.8	2.3
The neonatal mortality rate per 1,000 live births.	5.0	4.8
The postneonatal mortality rate per 1,000 live births.	2.5	2.3
The perinatal mortality rate per 1,000 live births plus fetal deaths.	9.9	9.7
The child death rate per 100,000 children aged 1 through 14.	22.6	20.4
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percent of women who have reported smoking during pregnancy.	17.7%	15.3%
Percent of tobacco use among children 14-18 years of age.	23.8%	21.3%
Percent of mothers who are prepregnancy overweight by 20% or more.	36.9%	36.4%
Percent of high school students who met currently recommended levels of physical activity.	43.5%	48.5%
Percent of women who enrolled in WIC during first trimester of pregnancy.	41.6%	43.3%
The incidence of emergency room visits for diseases of teeth and jaw for children ages 15 and under per 1,000 population.	0.9	0.8
The incidence of domestic violence per 100,000 population.	633.5	656.8
Percent of women 18-44 years of age who reported frequent mental distress (FDM) for fourteen or more days during the past thirty days their mental health was not good.	12.5%	12.3%
Percent of special needs children ages 3-5 enrolled in public preschool programs.	5.0%	5.2%
Percent of children ages 0-19 years old who received health care at a FQHC.	7.8%	10%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	96.2%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	64.1%	65.3%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	51.8%	53%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	64.8%	65%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	90.1%	91.3%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	54.4%	54.6%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	82.1%	87.2%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	21.6	20.6
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	28.6%	35.6%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	3.6	2.8
The percent of mothers who breastfeed their infants at 6 months of age.	34.7%	35.7%
Percentage of newborns who have been screened for hearing before hospital discharge.	97.1%	99%
Percent of children without health insurance.	10.5%	10.3%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	30.3%	28%
Percentage of women who smoke in the last three months of pregnancy.	20.4%	18%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	8.5	6
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	76.2%	81%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	84.1%	86.6%

## MISSOURI

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
MISSOURI DEPARTMENT OF HEALTH
Jefferson City, MO
\$115,000
(EMSC Partnership Grants)

EMSC Targeted Issue Grants WASHINGTON UNIVERSITY, SCHOOL OF MEDICINE Saint Louis, MO \$198,623 (EMSC Targeted Issue Grants)

## **Healthy Start**

HEALTHY START INITIATIVE
Maternal & Child Health Coalition
Kansas City, MO
\$1,500,000
(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

Healthy Start Initiative-Eliminating Racial/Ethnic Disparities
Maternal, Child and Family Health Coalition of Metropolitan St. Louis
St. Louis, MO
\$550,000
(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

Healthy Start Initiative-Eliminating Racial/Ethnic Disparities Missouri Bootheel Regional Consortium, Inc. Portageville, MO \$900,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

## Title V - Community Integrated Service Systems (CISS)

Community-Based Integrated Service Systems (Local/State)
MISSOURI DEPARTMENT OF HEALTH
Jefferson City, MO
\$140,000
(Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

Health Families Expansion Program SOUTH SIDE DAY NURSERY Saint Louis, MO \$50,000 (Healthy Tomorrows Partnership for Children Program)

STATE SYSTEMS DEVELOPMENT INITIATIVE MISSOURI DEPARTMENT OF HEALTH Jefferson City, MO \$94,644 (State Systems Development Initiative)

GREAT PLAINS REGIONAL HEMOPHILIA DIAGNOSTIC TREATMENT CENTERS PROGRAM CHILDREN'S MERCY HOSP (KANSAS CITY, MO)
Kansas City, MO
\$405,000
(Hemophilia Treatment Centers (SPRANS))

### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation MISSOURI DEPARTMENT OF HEALTH Jefferson City, MO \$118,600 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy
MISSOURI PROTECTION & ADVOCACY SERVICES
Jefferson City, MO
\$51,809
(Traumatic Brain Injury Protection and Advocacy)

#### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING MISSOURI DEPARTMENT OF HEALTH Jefferson City, MO \$150,000 (Universal Newborn Hearing Screening and Intervention)

# NORTHERN MARIANA ISLANDS

The CNMI's State MCH Program. including Children with Special Health Care Needs, is administered through the Division of Public Health, Department of Public Health. A Deputy Secretary oversees the Division. The MCH Program work with all programs at the Division and collaborate and partner with other agencies, both private and governmental, to assist in its work to emphasize lifestyle behavioral changes especially with health care practices, diet, and physical fitness and to ensure access and continuity of care.

Maternal and child health services are provided at the following:

- Southern Community Wellness Center located in the village of San Antonio;
- Women's and Children's Clinic located in the village of Garapan at the Commomwealth Health Center;
- Children's Developmental Assistance Center located in the village of Garapan;
   Adolescent Health Center; and
- Rota and Tinian Health Center.

Services are provided in collaboration with other agencies, both private and governmental. For example, through a memorandum of agreement, immunization services are provided at five private health clinics on the island of Saipan.

State Population: **84,546** Live Births: **1,422** 

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$1,807,944 Other MCHB Grant Programs: \$566,424

Bioterrorism Grant Program: **\$0** 

Total MCH Partnership Funds: \$2,374,368

#### **CONTACT INFORMATION**

#### For More Information on Title V:

## Title V Program, Contact:

Margarita Torres Aldan MCH Program Coordinator P.O. Box 500409 Saipan, MP 96950-0409 670-236-8703

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## Title V Program's Services for Children with Special Health Care Needs, contact:

Shiella Perez

**CSHCN** Coordinator

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Saipan, MP 96950-0409

670-664-4830

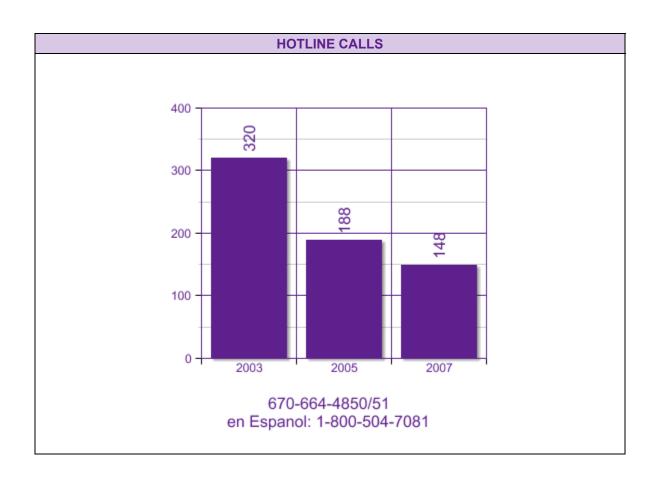
670-236-8700

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# NORTHERN MARIANA ISLANDS

## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group			
Populations Served	Number of Individuals Served	Expenditure	es FY 2007
Pregnant Women	1,596	\$361,589	20%
Infants < 1 year old	3,202	\$198,874	11%
Children 1 to 22 years old	17,940	\$343,509	19%
Children with Special Healthcare Needs	219	\$614,701	34%
Others	32,948	\$108,476	6%
Administration		\$180,795	10%
Totals	55,905	\$1,807,944	100%
1	. Federal Allocation	e of Funds	
■ <sup>1</sup>	. Federal Allocation 394,261 (21.8%)		
■ <sup>2</sup>	2. State Funds 871,631 (48.2%)	2	2%
■ 3	30% 0 (0%)	6	
■ 4	Unobligated Balance 0 (0%)		
5	5. Program Income 542,052 (30%)	4	8%
■ 6	i. Other Funds 0 (0%)		
	By Category	of Services	
Se	Direct Health Care ervices \$1,355,958 (75%) Enabling Services \$108,477 (6%)		
	Population-Based Services \$235,033 (13%)	75%	
	Infrastructure-Building ervices \$108,476 (6%)	6% 13% 6%	



The MCH Federal-State Partnership - 2007

# NORTHERN MARIANA ISLANDS

## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	2
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	1
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	2
FY 2007 Total:	13
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# NORTHERN MARIANA ISLANDS

## MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	4.3	4.9
The ratio of the black infant mortality rate to the white infant mortality rate.	0.0	*
The neonatal mortality rate per 1,000 live births.	2.9	2.9
The postneonatal mortality rate per 1,000 live births.	1.4	1.4
The perinatal mortality rate per 1,000 live births plus fetal deaths.	11.4	10
The child death rate per 100,000 children aged 1 through 14.	5.7	23
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The percent of unplanned pregnancies of birth (per 1,000) for women aged 15-44 years	78.8%	50%
Percent of women who have ever received a pap smear.	6.8%	8%
Percent of women who have ever received a mammogram.	6.5%	12.5%
Percent of eligible infants with disabilities under the age of 1 year receiving early intervention services.	30.3	50
The rate of chlamydia for adolescents aged 13-19 years.	4.5	6
The degree to which State provides nutrition education information to children aged 6 through 11 years.	15.1%	55%
The percent of pregnant women that are screened for chlamydia.	102.9%	100%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	98.1%	98.5%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	87.0%	88.1%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	68.0%	70%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	68.6%	70%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	43.2%	46.1%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	5.9%	8%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	76.9%	89%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	26.8	26.5
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	65.9%	69%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	0.0	30
The percent of mothers who breastfeed their infants at 6 months of age.	35.0%	50%
Percentage of newborns who have been screened for hearing before hospital discharge.	97.7%	99%
Percent of children without health insurance.	45.7%	45%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	0.0%	50%
Percentage of women who smoke in the last three months of pregnancy.	100.0%	45%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	0.0	0
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	100.0%	1%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	29.1%	31%

# NORTHERN MARIANA ISLANDS

### 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
COMMONWEALTH OF THE NORTHERN MARIANAS ISLANDS
Saipan, MP
\$115,000
(EMSC Partnership Grants)

#### Title V - Community Integrated Service Systems (CISS)

Community-Based Integrated Service Systems (Local/State)
Commonwealth Health Center
SAIPAN, MP
\$140,000
(Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

CNMI MCH DATA SYSTEM LINKAGE AND TRAINING INITIATIVE Commonwealth of the Northern Mariana Islands Saipan, MP \$94,644 (State Systems Development Initiative)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation
COMMONWEALTH OF THE NORTHERN MARIANAS ISLANDS
Saipan, MP
\$70,000
(Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy NORTHERN MARIANAS SAIPAN, MP \$20,000 (Traumatic Brain Injury Protection and Advocacy)

#### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING Commonwealth of the Northern Mariana Islands Saipan, MP \$126,780 (Universal Newborn Hearing Screening and Intervention)

## MISSISSIPPI

The Mississippi State Department of Health (MSDH) is the state agency responsible for administering the Title V program in Mississippi. Maternal and Child Health (MCH) Block Grant funds are allocated in the MSDH central office to the Offices of Women's Health and Child/Adolescent Health. The Children's Medical Program (CMP) is the program of services for Children with Special Health Care Needs, and is located organizationally within Health Services (HS), which is responsible for all maternal and child health functions. These two HS Offices provide services for the three major populations targeted by the MCH Block Grant; pregnant women, infants, children, and children with special health care needs. Health Services is also responsible for administering the statewide Family Planning program and the Women, Infants, and Children (WIC) Supplemental Food Program.

State Population: 2,918,785

Live Births: 46,069

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$18,732,933 Other MCHB Grant Programs: \$1,330,333

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$20,063,266

#### **CONTACT INFORMATION**

#### For More Information on Title V:

#### **Title V Program, Contact:**

Daniel R. Bender DH Office Director

Mississippi State Department of Health

Jackson, Mississippi 39215-1700

(601)576-7472

(601)576-7825

daniel.bender@msdh.state.ms.us

www.msdh.state.ms.us

### Title V Program's Services for Children with Special Health Care Needs, contact:

Lawrence Clark

Director of CHildren's Medical Program

Children's Medical Program, P.O. Box 1700

Jackson, Mississippi 39215-1700

(601)987-3965

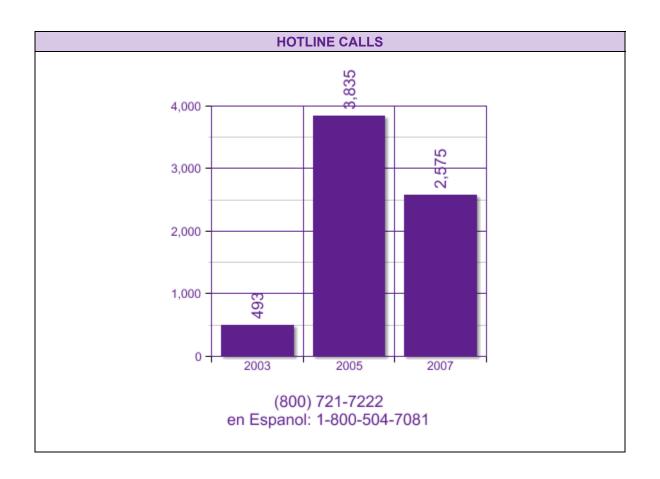
601)987-5560

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## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By N	umber of Individuals Se	erved and Population Gr	oup
Populations Served	Number of Individuals Served	Expenditure	-
Pregnant Women	22,154	\$9,558,273	51%
Infants < 1 year old	46,046	\$0	0%
Children 1 to 22 years old	34,249	\$4,216,377	22.5%
Children with Special Healthcare Needs	3,069	\$4,214,895	22.5%
Others	101,377	\$0	0%
Administration		\$743,388	4%
Totals	206,895	\$18,732,933	100%
1	By Source  Federal Allocation 9,080,587 (48.5%)	oi runas	
3 4 5	State Funds 9,652,346 (51.5%) Local MCH Funds 0 (0%) Unobligated Balance 0 (0%) Program Income 0 (0%) Other Funds 0 (0%)		8%
-	By Category	of Services	_
2. 3. 4.	Direct Health Care ervices \$10,115,784 (54%)  Enabling Services \$936,646 (5%)  Population-Based Services \$1,498,635 (8%)  Infrastructure-Building ervices \$6,181,868 (33%)	54% 5% 8% 33%	



# MISSISSIPPI

## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	2
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	2
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	2
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	2
Family members of diverse cultures are involved in all of the above activities.	2
FY 2007 Total:	12
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

# MISSISSIPPI

## MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	10.1	9.3
The ratio of the black infant mortality rate to the white infant mortality rate.	2.1	2
The neonatal mortality rate per 1,000 live births.	6.1	5.6
The postneonatal mortality rate per 1,000 live births.	4.0	3.6
The perinatal mortality rate per 1,000 live births plus fetal deaths.	10.4	8.7
The child death rate per 100,000 children aged 1 through 14.	30.6	29.1
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percent of children on Medicaid and SCHIP who receive EPSDT and preventive health services well child visits.	35.3%	45%
Current percent of cigarette smoking among adolescents grades 6-12.	19.2%	18%
Percent of pregnant women who smoke	11.8%	10.5%
Percent of children with genetic disorders identified through the MSDH newborn screening who receive case management services.	1.0%	100%
The Rate of Repeat Birth (per 1000) for Adolescents Less Than 18 Years Old	120.0	104
Percent of children ages 0-5 on WIC classified as overweight	1.9%	11.8%
Percent of adolescents in grades 6-12 who are overweight or at risk for becoming overweight	35.8%	25%
Percent of Medicaid eligible children ages 1-5 reported to have had at least one preventive dental service	26.8%	32%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	60.4%	64.5%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	45.0%	48.2%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	58.8%	70.2%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	90.9%	93.5%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	30.9%	37.5%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	80.5%	85.2%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	32.4	29.7
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	7.5%	10%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	7.9	6.1
The percent of mothers who breastfeed their infants at 6 months of age.	18%	19.5%
Percentage of newborns who have been screened for hearing before hospital discharge.	97.1%	98.8%
Percent of children without health insurance.	12.6%	10.2%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	33.0%	29.5%
Percentage of women who smoke in the last three months of pregnancy.	14.0%	12.5%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	7.2	5.9
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	31.1%	32.5%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	84.9%	91.4%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
MISSISSIPPI STATE DEPARTMENT OF HEALTH
Jackson, MS
\$115,000
(EMSC Partnership Grants)

#### **Healthy Start**

DELTA HEALTHPARTNERS HEALTHY START INIATIVE-ELIMINATING DISPARITIES IN PERINATAL TOUGALOO COLLEGE TOUGALOO, MS \$775,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### Title V - Special Projects of Regional and National Significance (SPRANS)

Healthy Tomorrows Partnership for Children Program CATCH KIDS, INC.
TUPELO, MS
\$49,989
(Healthy Tomorrows Partnership for Children Program)

MISSISSIPPI STATE SYSTEMS DEVELOPMENT INITIATIVE MISSISSIPPI STATE DEPARTMENT OF HEALTH Jackson, MS \$94,644 (State Systems Development Initiative)

Family Professional Partnership/CSHCN UNIVERSITY OF SOUTHERN MISSISSIPPI HATTIESBURG, MS \$95,700 (Family Professional Partnership/CSHCN)

### **Traumatic Brain Injury**

Traumatic Brain Injury Protection and Advocacy MS Protection & Advocacy System, Inc Jackson, MS \$50,000 (Traumatic Brain Injury Protection and Advocacy)

## **Universal Newborn Hearing Screening**

Universal Newborn Hearing Screening and Intervention MISSISSIPPI STATE DEPARTMENT OF HEALTH Jackson, MS \$150,000 (Universal Newborn Hearing Screening and Intervention)

The Family and Community Health Bureau, housed within the Public Health and Safety Division, is the administrative entity for Title V services in Montana. The Title V funding is allocated to several FCHB Sections, including the Children's With Special Health Care Needs; Child, Adolescent, and Community Health; Women's and Men's Health; and Maternal and Child Health Coordination and also to local public health departments.

State Population: **957,861** Live Births: **12,506** 

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$7,847,085 Other MCHB Grant Programs: \$718,241

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$8,565,326

#### **CONTACT INFORMATION**

#### For More Information on Title V:

#### **Title V Program, Contact:**

Ann M. Buss

MCH BG Project Director 1218 East 6th Avenue Helena, MT 59601 406-444-4119

406-444-2606

ahagenbuss@mt.gov

### Title V Program's Services for Children with Special Health Care Needs, contact:

Denise Brunett

**CSHS** Supervisor

1218 East 6th Avenue

Helena, MT 59601

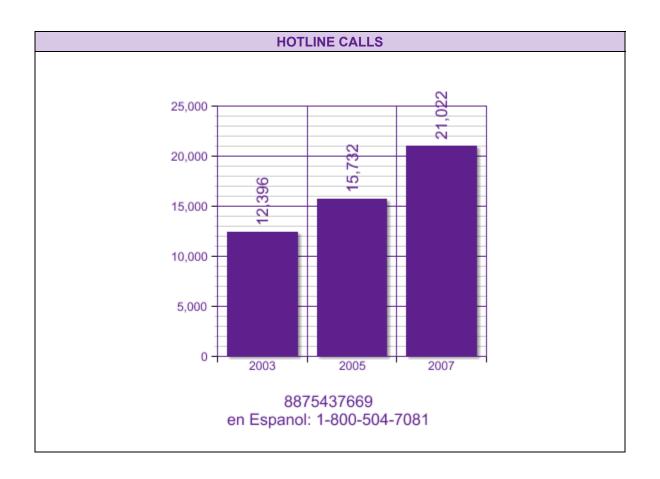
406-444-3617

406-444-2750

dbrunett@mt.gov

## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By N	umber of Individuals S	Served and Population Gr	oup
Populations Served	Number of Individuals Served	Expenditure	es FY 2007
Pregnant Women	3,539	\$1,327,766	16.9%
Infants < 1 year old	12,341	\$1,178,535	15%
Children 1 to 22 years old	68,548	\$2,439,391	31.1%
Children with Special Healthcare Needs	4,934	\$1,464,925	18.7%
Others	24,597	\$1,126,823	14.4%
Administration		\$309,645	3.9%
Totals	113,959	\$7,847,085	100%
■ <sup>4</sup>	Local MCH Funds 3,165,000 (40.3%)	9% —	1% 8%
■ 6	Other Funds 0 (0%)		
	By Categor	ry of Services	
2. 3. 4.	Direct Health Care rvices \$2,881,625 (36.7%) Enabling Services \$2,138,691 (27.3%) Population-Based Services \$1,768,019 (22.5%) Infrastructure-Building rvices \$1,058,750 (13.5%)	36.7% 27.3% 22.5% 13.5%	



## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	2
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	2
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	0
Family members are involved in service training of CSHCN staff and providers.	1
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	0
Family members of diverse cultures are involved in all of the above activities.	1
FY 2007 Total:	6
Total Possible:	18

Scale: 0 = Not Met

> 1 = Partially Met 2 = Mostly Met

3 = Completely Met

## MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	5.3	4.7
The ratio of the black infant mortality rate to the white infant mortality rate.	0.0	1
The neonatal mortality rate per 1,000 live births.	3.2	2.5
The postneonatal mortality rate per 1,000 live births.	2.4	2.2
The perinatal mortality rate per 1,000 live births plus fetal deaths.	4.8	4.8
The child death rate per 100,000 children aged 1 through 14.	21.2	8
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percent of unintended pregnancy.	71.5%	60%
Percent of women who abstain from alcohol use in pregnancy.	97.2%	98%
Percent of state fetal/infant/child deaths reviewed for preventability by local review teams.	75.8%	92%
Percent of Medicaid eligible children who receive dental services as part of their comprehensive services.	26.0%	30%
Percent of pregnant women who abstain from cigarette smoking.	81.8%	83%
Rate of firearm deaths among youth aged 5-19.	5.3	5
Percent of low birth weight infants among all live births.	7.2%	6%
Percent of Montana public middle and secondary schools that include comprehensive sexuality education as part of their health curriculum.	62.6%	70%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	56.5%	56.5%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	45.9%	50%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	55.2%	57%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	88.6%	90%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	46.2%	47.5%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	74.9%	80%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	16.4	15
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	45.9%	46%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	3.9	4
The percent of mothers who breastfeed their infants at 6 months of age.	53.8%	56%
Percentage of newborns who have been screened for hearing before hospital discharge.	93.1%	95%
Percent of children without health insurance.	14%	14%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	33.6%	27%
Percentage of women who smoke in the last three months of pregnancy.	15.9%	13%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	8.9	9
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	86.8%	91%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	83.3%	85%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
MONTANA DEPT OF PUBLIC HEALTH AND HUMAN SERVICES
Helena, MT
\$115,000
(EMSC Partnership Grants)

#### Title V - Community Integrated Service Systems (CISS)

Community-Based Integrated Service Systems (Local/State)
MONTANA DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES
Helena, MT
\$140,000
(Community-Based Integrated Service Systems (Local/State))

## Title V - Special Projects of Regional and National Significance (SPRANS)

Health Families Expansion Program
MISSOULA CITY-COUNTY HEALTH DEPARTMENT
MISSOULA, MT
\$50,000
(Healthy Tomorrows Partnership for Children Program)

IMPROVING MONTANA'S DATA CAPACITY FOR MCH ANALYSIS MT ST DEPT OF PUBLIC HLTH & HUMAN SERVICES Helena, MT \$94,644 (State Systems Development Initiative)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation
MONTANA DEPT OF PUBLIC HEALTH AND HUMAN SERVICES
Helena, MT
\$118,597
(Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy MONTANA ADVOCACY PROGRAM INC HELENA, MT \$50,000 (Traumatic Brain Injury Protection and Advocacy)

## **Universal Newborn Hearing Screening**

Universal Newborn Hearing Screening and Intervention MONTANA DEPT OF PUBLIC HEALTH AND HUMAN SERVICES Helena, MT \$150,000 (Universal Newborn Hearing Screening and Intervention)

The Title V Maternal and Child Health Block Grant is administered by the NC Department of Health and Human Services, Division of Public Health, Women's and Children's Health Section. Programs and services within the Women's and Children's Health Section's administrative control include: Maternal Health Services, Women's Preventive Health Services (including the Title X program), Children's Preventive Health Services, Children's Specialized Health Services, Genetic Services, Immunization Services, Early Intervention Services, and Nutrition Services (including the Special Supplemental Nutrition Program for Women, Infants, and Children [WIC], Child and Adult Care Food Program, and Summer Food Service Program for Children).

State Population: 9,061,032

Live Births: 127,841

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$232,448,508 Other MCHB Grant Programs: \$7,189,670

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$239,638,178

#### **CONTACT INFORMATION**

#### For More Information on Title V:

#### **Title V Program, Contact:**

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WCHS/DPH MSC 1928

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919-870-4828

kevin.ryan@ncmail.net

http://wch.dhhs.state.nc.us/

## Title V Program's Services for Children with Special Health Care Needs, contact:

Carol Tant

Head, Children & Youth Branch

WCHS/DPH MSC 1928

Raleigh, NC 27699-1928

919-707-5610

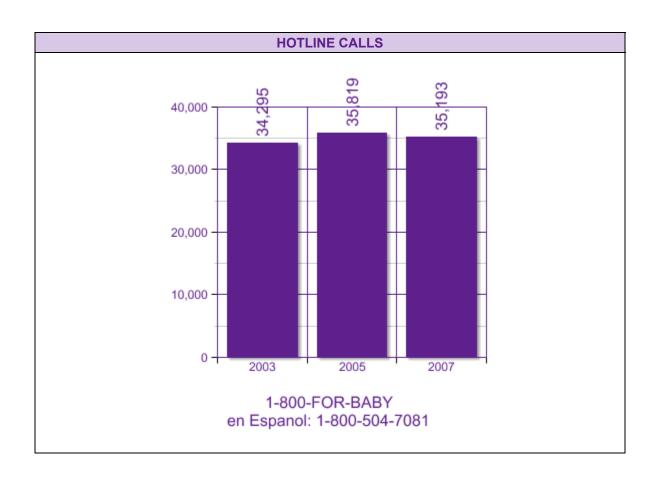
919-870-4880

carol.tant@ncmail.net

http://wch.dhhs.state.nc.us/

## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By N	umber of Individual	s Serve	d and Population	on Group	
Populations Served	Number of Individuals Serve		•	ditures FY	2007
Pregnant Women	66,787		\$57,759,605		24.8%
Infants < 1 year old	125,134		\$22,869,095		9.8%
Children 1 to 22 years old	88,149		\$110,398,998		47.5%
Children with Special Healthcare Needs	57,922		\$26,884,412		11.6%
Others	129,457		\$13,902,947		6%
Administration			\$633,451		.3%
Totals	467,449		\$232,448,508		100%
■ <sup>4</sup>	60,383,536 (26%)  Local MCH Funds 0 (0%)  Unobligated Balance 0 (0%)	25% —		—— 7% —— 26%	
	Program Income 97,036,173 (41.7%) Other Funds	42% —			
_	58,322,658 (25.1%) By Categ	norv of	Services		
	Direct Health Care rvices \$96,602,092 (41.6%)				
	Enabling Services \$91,117,143 (39.2%) Population-Based Serv	ices	41.6%		
	\$35,745,430 (15.4%) Infrastructure-Building rvices \$8,983,843 (3.9%)		39.2% 15.4% 3.9%		



## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	1
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	2
FY 2007 Total:	15
Total Possible:	18

Scale: 0 = Not Met

> 1 = Partially Met 2 = Mostly Met

3 = Completely Met

## MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	*	8
The ratio of the black infant mortality rate to the white infant mortality rate.	*	2
The neonatal mortality rate per 1,000 live births.	*	5.7
The postneonatal mortality rate per 1,000 live births.	*	2.5
The perinatal mortality rate per 1,000 live births plus fetal deaths.	*	7.8
The child death rate per 100,000 children aged 1 through 14.	*	20
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Number of children affected in substantiated reports of abuse and/or neglect as compared with previous years.	14744	14000
The number of children in the State less than three years old enrolled in early intervention services to reduce the effects of developmental delay, emotional disturbance, or chronic illness.	15048	16000
Percent of children 2-18 who are overweight.  Overweight is defined as a body mass index (BMI) greater than or equal to the 95th percentile for gender and age.	17.4%	10%
The percent of women responding to the Pregnancy Risk Assessment Monitoring System (PRAMS) survey that they either wanted to be pregnant later or not then or at any time in the future.	47.6%	38%
Percent of women of childbearing age taking folic acid regularly.	38.5%	50%
The ratio of school health nurses to the public school student population.	1,340.8	1100
Percent of women with live, term births who gain within the Institute of Medicine (IOM) Recommended Weight Gain Ranges.	32.9%	38%
Percent of non-pregnant women of reproductive age who are overweight/obese (BMI>26).	46.7%	40%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	58.3%	75%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	46.5%	75%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	63.7%	80%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	89.3%	90%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	39.9%	50%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	82.4%	90%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	24.6	24
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	42.0%	50%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	5.0	4
The percent of mothers who breastfeed their infants at 6 months of age.	16.2%	17.5%
Percentage of newborns who have been screened for hearing before hospital discharge.	94.6%	98%
Percent of children without health insurance.	13.1%	10%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	30.4%	25%
Percentage of women who smoke in the last three months of pregnancy.	11.5%	10%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	6.8	6
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	78.2%	83%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	81.9%	87%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants N.C. Dept. of Health and Human Services Raleigh, NC \$115,000 (EMSC Partnership Grants)

EMSC Targeted Issue Grants University of North Carolina at Chapel Hill Chapel Hill, NC \$200,000 (EMSC Targeted Issue Grants)

#### **Healthy Start**

HEALTHY START INITIATIVE: ELIMINATING DISPARITIES IN PERINATAL HEALTH NC DEPARTMENT OF HEALTH AND HUMAN SERVICES
Raleigh, NC
\$732,315
(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH UNIVERSITY OF NORTH CAROLINA AT PEMBROKE PEMBROKE, NC \$400,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH NC DEPARTMENT OF HEALTH AND HUMAN SERVICES Raleigh, NC \$750,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH NC DEPARTMENT OF HEALTH & HUMAN SERVICES Raleigh, NC \$900,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### Research

INTERGENERATIONAL PATHWAYS TO COMPETENCE IN MINORITY FAMILIES University of North Carolina at Chapel Hill Chapel Hill, NC \$183,152 (MCH Research)

MCH Research UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL Chapel Hill, NC \$180,431 (MCH Research)

School Competence of African American School Youth University of North Carolina at Chapel Hill Chapel Hill, NC \$224,206 (MCH Research)

MCH Research Research Triangle Institute Durham, NC \$105,063 (MCH Research)

Contextual Influences On Pregnancy Outcomes UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL Chapel Hill, NC \$100,000 (MCH Research)

Effects of Interdisciplinary Training on MCH Professionals, Organizations and Systems UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL Chapel Hill, NC \$299,996 (MCH Research)

Promoting Nutrition and Physical Activity in Child Care Centers UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL Chapel Hill, NC \$299,995 (MCH Research)

# Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
NC DEPARTMENT OF HEALTH AND HUMAN SERVICES
Raleigh, NC
\$140,000
(Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

State Implementation Grants for Integrated Community Systems for CSHCN NORTH CAROLINA DEPT OF HEALTH AND HUMAN SERVICES Raleigh, NC \$295,500

(State Implementation Grants for Integrated Community Systems for CSHCN)

Healthy Tomorrows Partnership for Children Program UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL Chapel Hill, NC \$50,000 (Healthy Tomorrows Partnership for Children Program)

STATE SYSTEMS DEVELOPMENT INITIATIVE (SSDI) STATE OF NORTH CAROLINA Raleigh, NC \$94,644 (State Systems Development Initiative)

HEMOPHILIA DIAGNOSTIC AND TREATMENT CENTERS UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL Chapel Hill, NC \$360,000 (Hemophilia Treatment Centers (SPRANS))

GENETICS SERVICES
Piedmont Health Services and Sickle Cell Agency
Greensboro, NC
\$185,000
(Genetic Services Project)

Children's Oral Healthcare Access Program
NC DEPARTMENT OF HEALTH & HUMAN SERVICES
Raleigh, NC
\$159,679
(Childrens Oral Healthcare Access Program)

Family Professional Partnership/CSHCN Exceptional Children's Assistance Center Davidson, NC \$95,700 (Family Professional Partnership/CSHCN)

Epidemiological MCH/SPH Institute UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL Chapel Hill, NC \$26,000 (Epidemiological MCH/SPH Institute) Sickle Cell Treatment Demonstration Program STEDMAN-WADE HEALTH SERVICES, INC. Wade, NC \$318,832 (Sickle Cell Treatment Demonstration Program)

ASTDD COMMUNICATION NETWORK FOR MCH ORAL HEALTH INFORMATION ASSOCIATION OF STATE AND TERRITORIAL NEW BERN, NC \$400,000 (Oral Health)

CHILD CARE HEALTH CONSULTANT TRAINING PROGRAM University of North Carolina at Chapel Hill Chapel Hill, NC \$291,667 (Child Care)

## **Traumatic Brain Injury**

Traumatic Brain Injury Implementation N.C. Dept. of Health and Human Services Raleigh, NC \$100,000 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy Disability rights North Carolina Raleigh, NC \$57,490 (Traumatic Brain Injury Protection and Advocacy)

### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING STATE OF NORTH CAROLINA RALEIGH, NC \$125,000 (Universal Newborn Hearing Screening and Intervention)

Two state level divisions administer the Title V Program in North Dakota (ND). The Division of Family Health, within the Community Health Section of the ND Department of Health (NDDoH) supervises programs related to women, infants, children and adolescents while the Division of Children's Special Health Services (CSHS) within the Special Populations Section of the NDDoH administers programs related to children with special health care needs. In addition, two other divisions within the Community Health Section of the NDDoH receive Title V funding. The Division of Injury Prevention and Control administers programs relating to intentional and unintentional injuries and the Division of Nutrition and Physical Activity administers programs that address MCH nutrition and physical activity issues.

State Population: 639,715

Live Births: 8,622

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: **\$3,215,098** Other MCHB Grant Programs: **\$738,344** 

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$3,953,442

#### **CONTACT INFORMATION**

#### For More Information on Title V:

#### **Title V Program, Contact:**

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### Title V Program's Services for Children with Special Health Care Needs, contact:

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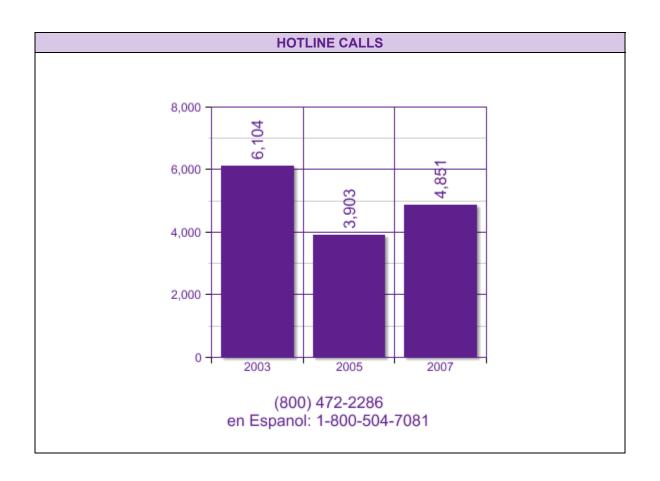
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## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

		Served and Population Gro	oup
Populations Served	Number of Individuals Served	Expenditure	s FY 2007
Pregnant Women	4,055	\$290,975	9.1%
Infants < 1 year old	10,109	\$581,950	18.1%
Children 1 to 22 years old	96,719	\$1,146,980	35.7%
Children with Special Healthcare Needs	2,073	\$991,545	30.8%
Others	15,368	\$138,575	4.3%
Administration		\$65,073	2%
Totals	128,324	\$3,215,098	100%
•	555,930 (17.3%)	21% —	9%
_ 6	. Other Funds	22% —	
6	0 (0%) 6. Other Funds 0 (0%)		
1. Se	0 (0%) 6. Other Funds 0 (0%)	ory of Services	



## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	2
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	2
Family members of diverse cultures are involved in all of the above activities.	3
FY 2007 Total:	15
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	6.4	6
The ratio of the black infant mortality rate to the white infant mortality rate.	1.0	1
The neonatal mortality rate per 1,000 live births.	3.4	3
The postneonatal mortality rate per 1,000 live births.	2.6	8.0
The perinatal mortality rate per 1,000 live births plus fetal deaths.	7.8	7
The child death rate per 100,000 children aged 1 through 14.	18.8	17
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The percent of healthy weight among women age 18-44.	56.2%	59%
The percent of women age 18-44 enrolled in Medicaid who receive a preventive dental service.	24.6%	28%
The degree to which women age 18-44 have access to preventive health services as measured by 5 indicators of health care access.	60.0%	68%
The rate of deaths to children age 1-19 caused by intentional and unintentional injuries per 100,000 children.	23.6	19
The percentage of students who were physically active for a total of at least 60 minutes per day on five or more of the past seven days.	54.7%	59%
The percent of ND children age 10-17 with a BMI in the normal weight range.	72.1%	75%
The degree to which the state can assess and plan for the health and related service needs of children with extraordinary medical needs.	8.0	9
The percent of families who reported they "had no problem at all" in getting care for their child from a specialist doctor.	75.6%	83%
The percent of activities completed in the CSHS Public Information Services plan.	79.5%	88%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	63.0%	65%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	51.2%	60%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	68.2%	70%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	92.3%	94.5%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	51.2%	58%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	84.2%	86.5%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	11.3	9.6
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	53.0%	56%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	3.7	3.2
The percent of mothers who breastfeed their infants at 6 months of age.	34.1%	40%
Percentage of newborns who have been screened for hearing before hospital discharge.	95.0%	98%
Percent of children without health insurance.	10.0%	7.5%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	29.8%	26.5%
Percentage of women who smoke in the last three months of pregnancy.	14.8%	13.4%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	19.9	16
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	53.9%	58%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	82.3%	89.5%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants NORTH DAKOTA STATE DEPARTMENT OF HEALTH Bismarck, ND \$115,000 (EMSC Partnership Grants)

#### **Title V - Community Integrated Service Systems (CISS)**

CISS - SECCS (PLANNING)
NORTH DAKOTA STATE DEPARTMENT OF HEALTH
Bismarck, ND
\$140,000
(Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

NORTH DAKOTA STATE SYSTEMS DEVELOPMENT INITIATIVE NORTH DAKOTA STATE DEPARTMENT OF HEALTH Bismarck, ND \$94,644 (State Systems Development Initiative)

Family Professional Partnership/CSHCN Family Voices of North Dakota, Inc Edgeley, ND \$95,700 (Family Professional Partnership/CSHCN)

### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation North Dakota Department of Human Services Bismarck, ND \$118,000 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy PROTECTION AND ADVOCACY PROJECT Bismarck, ND \$50,000 (Traumatic Brain Injury Protection and Advocacy)

# **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING MINOT STATE UNIVERSITY Minot, ND \$125,000 (Universal Newborn Hearing Screening and Intervention)

Title V / MCH Services Block Grant to Nebraska Department of Health and Human Services (DHHS) is administered within Lifespan Health Services by a unit entitled Planning & Support. Nebraska describes Title V as a funding source that supports programs, not a program itself. The Block Grant supports many of the programs within Lifespan Health Services, as well as other DHHS programs/units Title V/MCH also supports community-based organizations, e.g. local health departments, community action programs, and programs administered within Native American Tribes, academic institutions, and hospitals. The term administration is vaguely defined by the federal Maternal and Child Health Bureau (MCHB). The limited definition is problematic since one of the statutory requirements of Title V is that the cost of administration of the block grant cannot exceed 10% of the federal allotment. Given our interpretation and subsequent activities, only 4% is expended for administration. The Planning & Support unit manages the various grant processes, e.g. evaluating the best methods to distribute the block grant funds within its parameters, and monitoring the activities and finances of its grant-funded work. In addition, the unit assists with assessment, planning, implementation, and evaluation of the block grant funds and activities. An ancillary responsibility to the administration of the block grant considers the variety of other resources that impact the maternal and child health population in Nebraska. A holistic view aids in planning for the most efficient and effective use of public health resources relative to the Block Grant. Therefore, using a broad interpretation, the administration of Title V/MCH Block Grant is the sole function of this unit. Two FTEs accomplish the activities of this unit, classified as: 1) Federal Aid Administrator III and 2) Administrative Assistant I. Both positions are allocable to the Block Grant via the internal allocation to Planning & Support. The unit collaborates with Grants & Cost Management and Accounting units to: 1) reconcile expenditures in the Nebraska Information System to that of the reports from internals and externals, and subsequently to complete the annual application and report for the block grant; 2) respond with information for the audit; and 3) project funds available for FY 2009.

State Population: 1,774,571

Live Births: 26,733

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$7,674,763
Other MCHB Grant Programs: \$2,491,097

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$10,165,860

#### **CONTACT INFORMATION**

#### For More Information on Title V:

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# Title V Program's Services for Children with Special Health Care Needs, contact:

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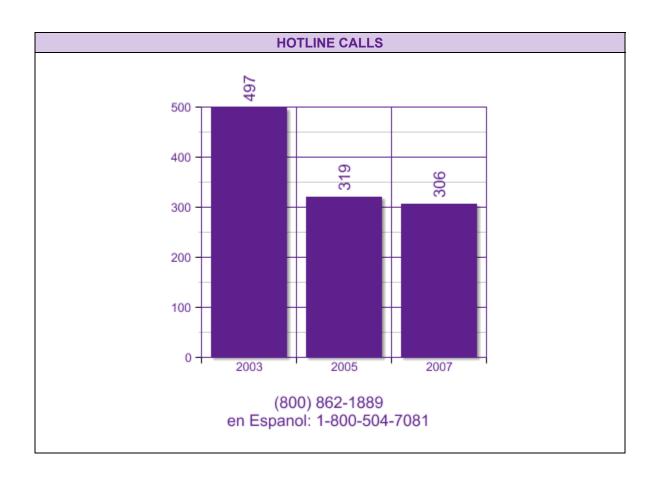
http://www.dhhs.ne.gov/hcs/programs/MHCP.htm

## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group			
Populations Served	Number of Individuals Served	Expenditure	s FY 2007
Pregnant Women	1,944	\$1,171,745	15.3%
Infants < 1 year old	27,107	\$655,830	8.5%
Children 1 to 22 years old	23,532	\$2,558,116	33.3%
Children with Special Healthcare Needs	2,190	\$2,725,616	35.5%
Others	17,368	\$424,422	5.5%
Administration		\$139,034	1.8%
Totals	72,141	\$7,674,763	100%
■ 4 ■ 5	Local MCH Funds 955,764 (12.5%)     Unobligated Balance 0 (0%)     Program Income 0 (0%)     Other Funds 0 (0%)		5%
	By Category	of Services	
Se	Direct Health Care ervices \$2,944,380 (38.4%) Enabling Services \$1,550,484 (20.2%)	38.4%	
3.	Population-Based Services \$1,795,629 (23.4%)		

4. Infrastructure-Building Services \$1,384,270 (18%) 20.2%

23.4% 18%



## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	1
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	2
Family members of diverse cultures are involved in all of the above activities.	1
FY 2007 Total:	13
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	6.6	6.3
The ratio of the black infant mortality rate to the white infant mortality rate.	2.4	2.7
The neonatal mortality rate per 1,000 live births.	4.7	4
The postneonatal mortality rate per 1,000 live births.	1.9	*
The perinatal mortality rate per 1,000 live births plus fetal deaths.	*	4.6
The child death rate per 100,000 children aged 1 through 14.	19.9	18.5
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percent women (18-44) with healthy weight (BMI)	54%	59.8%
Percent of women of child-bearing age who report smoking in the last 30 days	19.5%	17.6%
Percent of women age (18-44) who report mental health not good 10+ days of past 30	13.1%	11.6%
Percent of teens who report use of alcohol in last 30 days	41.1%	36.2%
Percent premature births (births<37 weeks)	9.6%	8.8%
Rate of infant death to adolescents (age 15-17)	*	6.7
Incidence of confirmed SIDS cases (per 1,000 live births) among African American and Native American infants	2.3	2.3
The percent of African American women beginning prenatal care during the first trimester.	58.4%	65.4%
Hospitalization for unintentional injuries (per 1,000) for children and adolescents	*	108.7
Hospitalization for intentional injuries (per 1,000) for children and adolescents (age 1-19)	*	4.4

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	65.7%	72.5%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	54.2%	59.8%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	65.9%	72.8%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	91.9%	100%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	54.4%	60%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	81.9%	90.4%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	17.0	15.3
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	44.6%	50%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	3.8	3
The percent of mothers who breastfeed their infants at 6 months of age.	55.1%	60.8%
Percentage of newborns who have been screened for hearing before hospital discharge.	99.0%	100%
Percent of children without health insurance.	13.9%	12.5%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	34.4%	31%
Percentage of women who smoke in the last three months of pregnancy.	11.5%	10.4%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	12.3	11.8
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	68.1%	74.9%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	73.4%	81%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
NE Department of Health and Human Services
Lincoln, NE
\$115,000
(EMSC Partnership Grants)

#### **Healthy Start**

OMAHA HEALTHY START PROGRAM CHARLES DREW HEALTH CENTER, INC. Omaha, NE \$900,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
STATE OF NEBRASKA
Lincoln, NE
\$140,000
(Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

Partnerships to Promote Maternal and Child Health UNIVERSITY OF NEBRASKA MEDICAL CENTER Omaha, NE \$495,000 (Partnerships to Promote Maternal and Child Health)

Health Families Expansion Program VISITING NURSE ASSOCIATION OMAHA, NE \$49,981 (Healthy Tomorrows Partnership for Children Program)

Healthy Tomorrows Partnership for Children Program Father Flanagan's Boys' Home Boys Town, NE \$50,000 (Healthy Tomorrows Partnership for Children Program)

# DEVELOPING AND MAINTAINING NEBRASKA'S MCH DATA CAPACITY STATE OF NEBRASKA

Lincoln, NE \$94,644

(State Systems Development Initiative)

Healthy Behaviors in Women NE Department of Health and Human Services Lincoln, NE \$145,772 (Healthy Behaviors in Women)

Family Professional Partnership/CSHCN PTI Nebraska Omaha, NE \$95,700 (Family Professional Partnership/CSHCN)

MCH Knowledge to Practice Board of Regents of the University of Nebraska, UNMC Omaha, NE \$30,000 (MCH Continuing Education)

Adolescent Health/School-Based Health
BOARD OF REGENTS/UNIV OF NEBRASKA MED CTR
Omaha, NE
\$100,000
(Adolescent Health/School-Based Health)

## **Traumatic Brain Injury**

Traumatic Brain Injury Implementation NE ST DEPARTMENT OF EDUCATION Lincoln, NE \$100,000 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy NEBRASKA ADVOCACY SERVICES INC LINCOLN, NE \$50,000 (Traumatic Brain Injury Protection and Advocacy)

# **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING
NE ST DEPARTMENT OF HEALTH
LINCOLN, NE
\$125,000
(Universal Newborn Hearing Screening and Intervention)

The Title V program is located in the NH Department of Health and Human Services. The Title V program is divided between the Maternal and Child Health Section (MCH) located within the Division of Public Health Services and the Special Medical Services Unit (SMS) located within the Division of Community Based Services. Guided by a newly instituted Memorandum of Understanding, Administration of the Block Grant is assigned jointly to MCH for services to women, infants and children, and to SMS for children and youth with special health care needs. Together both components of the Title V program provide direct, enabling, population based, and infrastructure building services in the following areas: maternal and child health; children with special health care needs; family planning; childhood lead poisoning prevention; adolescent health; home visiting; health and safety in child care; injury prevention; early hearing detection and intervention; and newborn screening.

State Population: 1,315,828

Live Births: 14,380

# MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: **\$8,778,211**Other MCHB Grant Programs: **\$2,566,556** 

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$11,344,767

#### **CONTACT INFORMATION**

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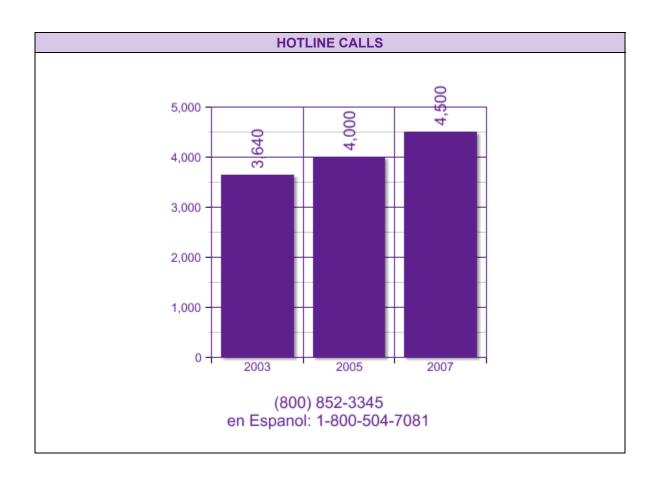
603-271-4209

ecollins@dhhs.state.nh.us

http://www.dhhs.state.nh.us/DHHS/SPECIALMEDSRVCS/default.htm

## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By N	umber of Individuals Se	erved and Population Gro	up
Populations Served	Number of Individuals Served	Expenditures	s FY 2007
Pregnant Women	2,119	\$648,669	7.4%
Infants < 1 year old	13,897	\$1,059,235	12.1%
Children 1 to 22 years old	30,052	\$2,911,790	33.2%
Children with Special Healthcare Needs	3,582	\$2,811,972	32%
Others	55,176	\$1,020,259	11.6%
Administration		\$326,286	3.7%
Totals	104,826	\$8,778,211	100%
3 4 5	2,017,856 (23%)  State Funds 6,408,767 (73%)  Local MCH Funds 0 (0%)  Unobligated Balance 0 (0%)  Program Income 0 (0%)  Other Funds	23	3%
• 0	351,588 (4%)		
	By Category	of Services	
2. 3. 4.	Direct Health Care ervices \$3,443,619 (39.2%)  Enabling Services \$1,676,989 (19.1%)  Population-Based Services \$877,096 (10%)  Infrastructure-Building ervices \$2,780,507 (31.7%)	39.2% 19.1% 10% 31.7%	



## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	2
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	1
FY 2007 Total:	15
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	*	4
The ratio of the black infant mortality rate to the white infant mortality rate.	*	1.1
The neonatal mortality rate per 1,000 live births.	*	*
The postneonatal mortality rate per 1,000 live births.	*	*
The perinatal mortality rate per 1,000 live births plus fetal deaths.	*	*
The child death rate per 100,000 children aged 1 through 14.	31.4	27
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percent of data linkage projects completed	80.0%	100%
Percent of children age two (24-35 months) on Medicaid who have been tested for lead.	33.8%	38%
Percent of third grade children screened who had untreated dental decay.	24.2%	22%
The rate (per 100,000) of emergency department visits among youths aged 15-19 resulting from being an occupant in a motor vehicle crash	2207.6	1800
Percent of adolescents (ages 10-20) eligible for an EPSDT service who received an EPSDT service during the past year	43.5%	49%
Percent of center-based child care facilities in the MCH catchment area and serving children under age 2, that are visited at least once a month by a child care health consultant	1.8%	35%
[REVISED]:The percent of CSHCN who are at risk for/are overweight or obese	*	8
[REVISED]: The percent of respite/childcare providers, serving medically and behaviorally complex children, who have participated in competence-based training.	*	100

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	60%	65%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	49.6%	54%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	67.3%	70%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	85.8%	89%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	51.6%	55%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	80.7%	86%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	7.4	6.9
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	42.4%	44%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	89.3	80
The percent of mothers who breastfeed their infants at 6 months of age.	48.7%	54%
Percentage of newborns who have been screened for hearing before hospital discharge.	98.2%	100%
Percent of children without health insurance.	6.0%	3.5%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	33.6%	29%
Percentage of women who smoke in the last three months of pregnancy.	13.3%	9%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	37.2	30
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	78.0%	83%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	82.0%	87%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

## **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
TRUSTEES OF DARTMOUTH COLLEGE
Hanover, NH
\$114,142
(EMSC Partnership Grants)

### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
NH ST DEPT OF SAFETY (BEMS)
Concord, NH
\$140,000
(Community-Based Integrated Service Systems (Local/State))

#### **Title V - Special Projects of Regional and National Significance (SPRANS)**

State Implementation Grants for Integrated Community Systems for CSHCN TRUSTEES OF DARTMOUTH COLLEGE Hanover, NH \$295,500 (State Implementation Grants for Integrated Community Systems for CSHCN)

Integrated Services for Young Children with Special Health Care Needs Crotched mountain Foundation Greenfield, NH \$250,000 (Medical Home/CSHCN)

Healthy Tomorrows Partnership for Children Program GOOD BEGINNINGS OF SULLIVAN COUNTY Claremont, NH \$50,000 (Healthy Tomorrows Partnership for Children Program)

Healthy Tomorrows Partnership for Children Program WEEKS MEDICAL CENTER, INC LANCASTER, NH \$50,000 (Healthy Tomorrows Partnership for Children Program)

NEW HAMPSHIRE MCH DATA LINKAGE PROJECT NH ST DEPT OF HEALTH & WELFARE, DIV OF PUBLIC HEALTH Concord, NH \$94,644 (State Systems Development Initiative)

Awareness and Access to Care for Children and Youths with Epilepsy TRUSTEES OF DARTMOUTH COLLEGE Hanover, NH \$340,000 (Awareness and Access to Care for Children and Youths with Epilepsy)

Continuing Education/Distance Learning Trustees of Dartmouth College Lebanon, NH \$130,000 (MCH Distance Learning)

Training CED/COR Pediatric and Child Psychiatry TRUSTEES OF DARTMOUTH COLLEGE Hanover, NH \$15,000 (Training CED/COR Pediatric and Child Psychiatry)

Heritable Disorders
University of New Hampshire
Durham, NH
\$817,613
(Heritable Disorders)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation New Hampshire Bureau of Developmental Services Concord, NH \$99,657 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy DISABILITIES RIGHTS CENTER INC CONCORD, NH \$50,000 (Traumatic Brain Injury Protection and Advocacy)

# **Universal Newborn Hearing Screening**

NEW HAMPSHIRE UNIVERSAL NEWBORN HEARING SCREENING PROGRAM NH ST DEPT OF SAFETY (BEMS)
Concord, NH
\$120,000
(Universal Newborn Hearing Screening and Intervention)

# **NEW JERSEY**

In New Jersey the administration of the MCH Block Grant, including the program for children with special health care needs, is organizationally located within the Department of Health and Senior Services, Division of Family Health Services (FHS). The division's organization is based on function, rather than categorical programs. Maternal, Child and Community Health (MCCH) has oversight of the Maternal and Child Health Consortia (MCHC), the Healthy Mothers Healthy Babies Coalitions (HMHB), FAS risk reduction perinatal addiction services, Healthy Start, the Black Infant Mortality Reduction Awareness Campaign, comprehensive maternity services and outreach and education, preventive and primary care services including child and adolescent health services, oral health, childhood lead poisoning prevention services, Title X-family planning, breast and cervical cancer control initiative, the primary care cooperative agreement, and the federally qualified health center (FQHC) expansion program. The second service unit in FHS. Special Child Health and Early Intervention Services (SCHEIS) administers programs and services to assure that all persons with special health needs have access to comprehensive. community based, culturally competent and family centered care. The Birth Defects registry provides for early identification and surveillance. Newborn screening follow-up is within SCAEIS. Specialized pediatric evaluation and treatment services are managed by SCAEIS along with community based case management services for children with special health care needs. Services for adults include hereditary disorders, diabetes control, Huntington's disease, and chronic renal disease. The MCH Epidemiology Program is under the Office of the Medical Director within the Office of the Assistant Commissioner.

State Population: 8,685,920 Live Births: 115,006

# MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$130,525,166 Other MCHB Grant Programs: \$3,681,132

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$134,206,298

### **CONTACT INFORMATION**

#### For More Information on Title V:

#### **Title V Program, Contact:**

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# Title V Program's Services for Children with Special Health Care Needs, contact:

Gloria Rodriquez

Service Director of Special Child Health & Early Intervention Services

PO Box 364

Trenton, NJ 08625-0364

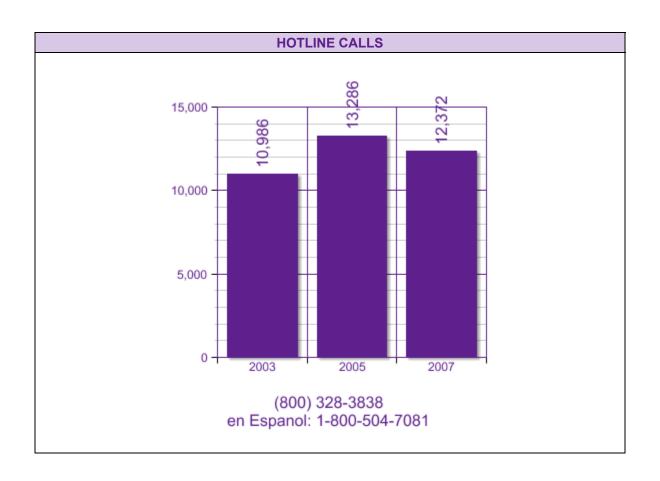
(609) 292-4043

(609) 292-9599

Gloria.Rodriquez@doh.state.nj.us

## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By N	umber of Individual	s Served and Population G	roup
Populations Served	Number of Individuals Serve	d Expenditur	res FY 2007
Pregnant Women	110,168	\$7,725,640	5.9%
Infants < 1 year old	112,715	\$5,646,453	4.3%
Children 1 to 22 years old	209,763	\$12,755,319	9.8%
Children with Special Healthcare Needs	40,000	\$103,479,556	79.3%
Others	30,000	\$0	0%
Administration		\$918,198	.7%
Totals	502,646	\$130,525,166	100%
2	11,238,157 (8.6%)  State Funds 119,287,009 (91.4%)		-9%
	Federal Allocation 11,238,157 (8.6%)		00/
	,		0,0
3.	. Local MCH Funds 0 (0%)		
■ 4	Unobligated Balance 0 (0%)		
5.	Program Income 0 (0%)	91%	
6.	Other Funds 0 (0%)		
	By Cate	gory of Services	
	Direct Health Care rvices \$98,279,008 (75.3%)		
2.	Enabling Services \$15,938,351 (12.2%)		
3.	Population-Based Serv \$10,352,406 (7.9%)	ices / 75.3%	
	Infrastructure-Building rvices \$5,955,401 (4.6%)	12.2% 7.9% 4.6%	



# **NEW JERSEY**

## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	
Family members of diverse cultures are involved in all of the above activities.	3
FY 2007 Total:	
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# **NEW JERSEY**

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	5.7	5.3
The ratio of the black infant mortality rate to the white infant mortality rate.	2.8	1.9
The neonatal mortality rate per 1,000 live births.	4.0	3.5
The postneonatal mortality rate per 1,000 live births.	1.6	1.5
The perinatal mortality rate per 1,000 live births plus fetal deaths.	6.1	5.6
The child death rate per 100,000 children aged 1 through 14.	13.6	12.4
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The percentage of Black non-Hispanic preterm infants in New Jersey	11.3%	12%
The percentage of Regional MCH Consortia implementing community-based Fetal and Infant Mortality Review (FIMR)Teams.	100.0	100
The percentage of children with elevated blood lead levels (>=20 ug/dL).	0.2%	0.2%
The percentage of repeat pregnancies among adolescents 15 - 19 years of age.	5.7%	5.3%
The percentage of State supported initiatives implemented for improving the nutrition and physical activity of children and adolescents	100.0%	100%
The percentage of children with birth defects who are appropriately reported to the New Jersey Birth Defects Registry.	89.0%	92%
Percent of children reported to the NJ Birth Defects Registry by three months of age.	60.8%	80%
The percentage of HIV exposed newborns receiving appropriate antiviral treatment to reduce the perinatal transmission of HIV.	97.0%	78%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	55.4%	64%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	40.8%	46%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	59.9%	65%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	88%	90%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	37.9%	45%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	80.3%	85%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	12.3	11.4
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	42%	47%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	1.3	1.2
The percent of mothers who breastfeed their infants at 6 months of age.	37.3%	50%
Percentage of newborns who have been screened for hearing before hospital discharge.	99.1%	99.2%
Percent of children without health insurance.	13.1%	9%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	39.1%	37%
Percentage of women who smoke in the last three months of pregnancy.	8.1%	7.4%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	4.4	3
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	76.7%	80%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	76.6%	80%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants New Jersey Department of Health Trenton, NJ \$115,000 (EMSC Partnership Grants)

#### **Healthy Start**

ELIMINATING DISPARITIES IN PERINATAL HEALTH NEW JERSEY STATE DEPT OF HEALTH Trenton, NJ \$500,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

HEALTHY START INITIATIVE SOUTHERN NEW JERSEY PERINATAL Pennsauken, NJ \$1,520,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

HEALTHY START INTIATIVE ELIMINATING DISPARITIES IN PERINATAL HEALTH Children's Futures, Inc
Trenton, NJ
\$700,000
(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
NEW JERSEY STATE DEPT OF HEALTH
Trenton, NJ
\$140,000
(Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

STATE SYSTEMS DEVELOPMENT INITIATIVE NEW JERSEY STATE DEPT OF HEALTH Trenton, NJ \$94,644 (State Systems Development Initiative) Family Professional Partnership/CSHCN Statewide Parent Advocacy Network of New Jersey Newark, NJ \$95,700 (Family Professional Partnership/CSHCN)

Promoting Integration of State Health Information Systems and Newborn Screening Service Systems

New Jersey Department of Health and Senior Services

Trenton, NJ

\$200,000

(Promoting integration of State Health Information Systems and Newborn Screening Service Systems)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation NEW JERSEY DEPARTMENT OF HUMAN SERVICES Trenton, NJ \$100,000 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy NEW JERSEY PROTECTION & ADVOCACY INC TRENTON, NJ \$58,335 (Traumatic Brain Injury Protection and Advocacy)

### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING NEW JERSEY STATE DEPT OF HEALTH Trenton, NJ \$157,453 (Universal Newborn Hearing Screening and Intervention)

# **NEW MEXICO**

Title V is located in the Family Health Bureau in the Public Health Division in the NM Department of Health. The Title V Director is also the Bureau Chief of the Family Health Bureau. The Family Health Bureau oversees: Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), Family Planning, Children with Special Health Care Needs, Perinatal Case Management/Home Visiting, Maternal Child Health, Maternal Child Health Epidemiology and Part C Care Coordination. School Health, Dental Health, Childhood Injury Prevention and Immunizations are located in other bureaus within the Public Health Division. Close coordination exists with these programs. The SECCS component is housed withing the Maternal Child Health Section of the Bureau. The Family Health Bureau consists of consists of sic sections/programs, and administrative staff who oversee the implementation of preventive services to reproductive aged women, mothers, infants, children, including children and youth with special health care need, and their families. The programs assess the needs of this population, and generate data to influence policy decision making. The services provider range from: 1) Direct safety-net health care services to individuals; 2) Family support services such as transportation, parent to parent support, case management, care coordination, WIC Commodity Supplemental Foods and Farmer's Market, outreach, translation, and health education; 3) Population-based services, such as newborn screening, surveillance, SIDS education and counseling, injury and violence prevention activities, and a marketing campaign to increase positive birth outcomes; and 4) Capacity or infrastructure building services, such as needs assessment, evaluation, planning. policy development, quality assurance, monitoring, training, information systems, and helping in developing systems of care. Several programs fund positions in the District and Local Health Offices to implement these services. The Bureau houses a Medical Director, Bureau Chief, and support staff who work collaboratively to use resources strategically to meet identified needs.

State Population: 1,969,915

Live Births: 29,937

# MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$9,939,824 Other MCHB Grant Programs: \$3,386,443

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$13,326,267

#### **CONTACT INFORMATION**

#### For More Information on Title V:

#### **Title V Program, Contact:**

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505-476-8941

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# Title V Program's Services for Children with Special Health Care Needs, contact:

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**CYSHCN** Director

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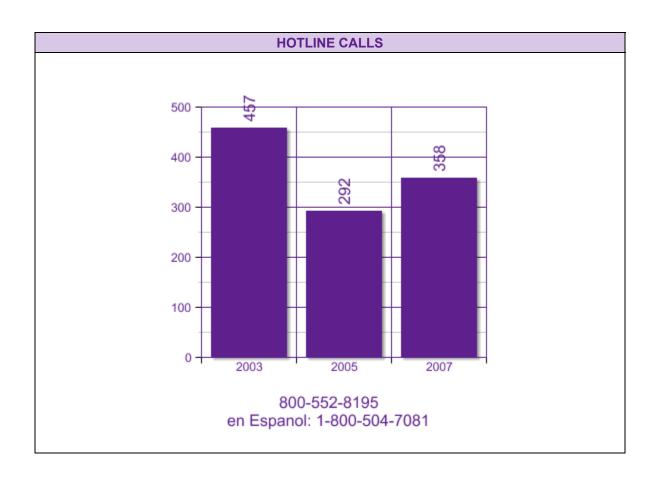
505-476-8851

505-476-8959

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## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By N	umber of Individuals S	Served and Population Gro	oup
Populations Served	Number of Individuals Served	Expenditure	
Pregnant Women	23,389	\$1,421,229	14.3%
Infants < 1 year old	29,738	\$202,115	2%
Children 1 to 22 years old	85,438	\$4,955,202	49.9%
Children with Special Healthcare Needs	5,341	\$3,169,986	31.9%
Others	40,232	\$0	0%
Administration		\$191,292	1.9%
Totals	184,138	\$9,939,824	100%
■ <sup>4</sup>	5,500,331 (55.3%)  Local MCH Funds 0 (0%)  Unobligated Balance 0 (0%)  Program Income 0 (0%)	% <b>-</b> -45	5%
■ 6	Other Funds 0 (0%)		
	By Categor	y of Services	
2. 3. 4.	Direct Health Care ervices \$4,476,294 (45%)  Enabling Services \$3,557,711 (35.8%)  Population-Based Services \$210,927 (2.1%)  Infrastructure-Building	45%	



# **NEW MEXICO**

## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	2
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	2
Family members of diverse cultures are involved in all of the above activities.	3
FY 2007 Total:	16
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# **NEW MEXICO**

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	*	*
The ratio of the black infant mortality rate to the white infant mortality rate.	*	*
The neonatal mortality rate per 1,000 live births.	*	*
The postneonatal mortality rate per 1,000 live births.	*	*
The perinatal mortality rate per 1,000 live births plus fetal deaths.	*	*
The child death rate per 100,000 children aged 1 through 14.	*	*
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The number of New Mexico counties and tribal entities implementing positive youth development strategies defined by 6 key criteria	6.0	6
Percent of first newborns/moms receiving support services/parenting through community home visiting/support programs	20.1	22
Reduce unintended pregnancy in New Mexico to less than 30% of births	45.8	41
Reduce the number of children witnessing violence (exposed to domestic or sexual violence) as expressed by percent of children present at a domestic violence scene.	22.4%	20%
Increase the proportion of women who report having all six criteria of the NM Healthy Birth Index	11.8%	12%
Reduce the proportion of women who report being physically abused by husband or partner during pregnancy.	5.4%	5%
Increase the proportion of women who deliver a live infant who are reported to have been screened for syphilis during pregnancy.	75.6%	90%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	53.2%	55%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	41.6%	43%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	56.6%	59%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	85.7%	89%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	33.7%	36%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	81%	82%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	34.3	33
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	48%	50%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	8.0	7
The percent of mothers who breastfeed their infants at 6 months of age.	41.8%	50%
Percentage of newborns who have been screened for hearing before hospital discharge.	92.3%	96%
Percent of children without health insurance.	9.8%	10%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	26.3%	20%
Percentage of women who smoke in the last three months of pregnancy.	7.6%	7%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	22.8	21
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	67.6%	70%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	72.7%	76%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants University of New Mexico Health Sciences Center Albuquerque, NM \$115,000 (EMSC Partnership Grants)

#### **Healthy Start**

HEALTHY START INITIATIVE- ELIMINATING DISPARITIES IN PERINATAL HEALTH - BORDER H
LA CLINICA DE FAMILIA, INC.
LAS CRUCES, NM
\$870,000
(Disparities in Perinatal Health-Border Initiatives)

HEALTHY START INITIATIVE- ELIMINATING DISPARITIES IN PERINATAL HEALTH BORDER H
LUNA COUNTY
DEMING, NM
\$832,500
(Disparities in Perinatal Health-Border Initiatives)

#### **Title V - Community Integrated Service Systems (CISS)**

CISS - SECCS (PLANNING)
NEW MEXICO STATE DEPARTMENT OF HEALTH
Santa Fe, NM
\$140,000
(Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

Partnerships to Promote Maternal and Child Health FAMILY VOICES, INC Albuquerque, NM \$200,000 (Partnerships to Promote Maternal and Child Health)

NEW MEXICO STATE SYSTEMS DEVELOPMENT INITIATIVE NEW MEXICO STATE DEPARTMENT OF HEALTH Santa Fe, NM \$94,643 (State Systems Development Initiative) Family Professional Partnership/CSHCN Parents Reaching Out to Help Albuquerque, NM \$95,700 (Family Professional Partnership/CSHCN)

THE FAMILY VOICES NETWORK OF FAMILY TO FAMILY HEALTH INFORMATION CENTERS FAMILY VOICES, INC Albuquerque, NM \$725,000 (Family/Professional Partnership/CSHCN)

# **Traumatic Brain Injury**

Traumatic Brain Injury Implementation
New Mexico Aging & Long-Term Services Department
Santa Fe, NM
\$118,600
(Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy DNA-Native American Protection & Advocacy, Inc Farmington, NM \$20,000 (Traumatic Brain Injury Protection and Advocacy)

Traumatic Brain Injury Protection and Advocacy PROTECTION AND ADVOCACY SYSTEM ALBUQUERQUE, NM \$50,000 (Traumatic Brain Injury Protection and Advocacy)

### **Universal Newborn Hearing Screening**

Universal Newborn Hearing Screening and Intervention NEW MEXICO STATE DEPARTMENT OF HEALTH Santa Fe, NM \$125,000 (Universal Newborn Hearing Screening and Intervention)

Nevada's Title V Maternal and Child Health Program is administered through the Bureau of Family Health Services, Nevada State Health Division, Department of Health and Human Services. Programs under MCH include Children and Youth with Special Health Care Needs (CYSHCN), which includes newborn screening, newborn hearing screening, multidisciplinary clinics, and Nevada Birth Outcomes Monitoring system (formerly Birth Defects Registry); Maternal, Child and Adolescent Health, which includes Perinatal Substance Abuse Prevention, the MCH Campaign (which includes the MCH Information and Referral Line), teen pregnancy prevention, injury and rape prevention, early childhood systems development and middle childhood systems development; Oral Health which includes sealant initiatives, early childhood caries prevention, and fluoridation; and WIC, which includes breastfeeding promotion.

State Population: 2,565,382

Live Births: 40,085

# MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: **\$3,212,345**Other MCHB Grant Programs: **\$710,399** 

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$3,922,744

#### **CONTACT INFORMATION**

#### For More Information on Title V:

#### **Title V Program, Contact:**

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**Bureau Chief** 

4150 Technology Way, Ste 101

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775 684-4285

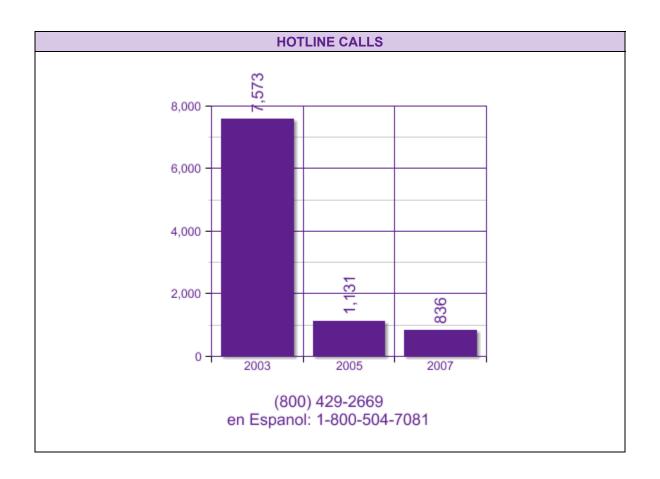
775 684-4245

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## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

	ullibel of illulviduals sel	ved and Population Gro	oup
Populations Served	Number of Individuals Served	Expenditure	s FY 2007
Pregnant Women	6,813	\$1,360,409	42.3%
Infants < 1 year old	40,652	\$0	0%
Children 1 to 22 years old	34,288	\$713,344	22.2%
Children with Special Healthcare Needs	3,738	\$942,878	29.4%
Others	13,958	\$0	0%
Administration		\$195,714	6.1%
Totals	99,449	\$3,212,345	100%
■ <sup>4</sup>	Local MCH Funds 0 (0%) Unobligated Balance 0 (0%) Program Income 0 (0%)	5	7%
6	Other Funds 0 (0%)		
	- ()		
	By Category	of Services	



## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	1
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	1
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	1
Family members of diverse cultures are involved in all of the above activities.	3
FY 2007 Total:	11
Total Possible:	18

Scale: 0 = Not Met

> 1 = Partially Met 2 = Mostly Met

3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	4.9	6
The ratio of the black infant mortality rate to the white infant mortality rate.	2.0	1.4
The neonatal mortality rate per 1,000 live births.	3.2	3
The postneonatal mortality rate per 1,000 live births.	1.7	2
The perinatal mortality rate per 1,000 live births plus fetal deaths.	9.3	8
The child death rate per 100,000 children aged 1 through 14.	19.5	16
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The percent of women of child-bearing age who receive screening and assistance for domestic violence should be increased.	0.1%	15%
The rate of significant Medicaid dental providers to the Medicaid population of children, youth and women of childbearing age (15-44) should be increased.	1.9	2.4
The percent of obese women ages 18 to 44 should be decreased.	21.9%	16%
The percent of children and youth ages birth through aged 18 who died from unintentional injuries should be decreased.	12.2	5
The percent of women (18-44) who feel down or depressed should be decreased.	51.0%	28%
The percent of children kindergarten - grade six who have access to a school based health center in Clark County should be increased.	*	*
Percent of CSHCN program enrollees with follow-up visits from a nutritionist should be increased.	10.2%	100%
The percent of pregnant women and those who are suspected of being pregnant who are screened for Alcohol, Tobacco And Other Drugs (ATOD) and referred in Reno, NV should be decreased.	34.7%	25%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	47.5%	55%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	41.2%	45%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	53.5%	56%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	82.6%	86%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	41.7%	45%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	65.4%	72%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	25.9	23
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	41.0%	49%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	3.9	1.9
The percent of mothers who breastfeed their infants at 6 months of age.	26.5%	40%
Percentage of newborns who have been screened for hearing before hospital discharge.	98.8%	9%
Percent of children without health insurance.	18.8%	13%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	12.6%	9%
Percentage of women who smoke in the last three months of pregnancy.	6.6%	4%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	11.9	5
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	97.1%	99%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	64.7%	85%

# 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants Nevada Department of Health and Human Services Carson City, NV \$115,000 (EMSC Partnership Grants)

#### **Title V - Community Integrated Service Systems (CISS)**

CISS - SECCS (PLANNING)
Nevada Department of Health and Human Services
Carson City, NV
\$140,000
(Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

NEVADA MATERNAL AND CHILD HEALTH STATE SYSTEMS DEVELOPMENT INITIATIVE Nevada Department of Health and Human Services Carson City, NV \$94,644 (State Systems Development Initiative)

Family Professional Partnership/CSHCN Family TIES of Nevada, Inc Reno, NV \$95,700 (Family Professional Partnership/CSHCN)

### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation
Office of Disability Services
Carson City, NV
\$99,513
(Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy NV DISABILITY ADVOCACY & LAW CENTER Las Vegas, NV \$50,000 (Traumatic Brain Injury Protection and Advocacy)

# **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING Nevada Department of Health and Human Services Carson City, NV \$115,542 (Universal Newborn Hearing Screening and Intervention)

# **NEW YORK**

The New York State Department of Health's Division of Family Health administers the Title V program in New York State. The Title V program supports activities designed to improve the health status of women, particularly those of reproductive age, infants, children and adolescents, including those with special health care needs. Funds support public health/maternal and child health services infrastructure, population-based, enabling and gap-filling personal health care services for those with limited access to high quality, continuous health care. The Division of Family Health encompasses four Bureaus (Women's Health, Dental Health, Early Intervention, and Child and Adolescent Health). The Division also provides leadership for the State Systems Development Initiative (SSDI), the American Indican Health Program, the Asthma Coordinators, MCH Graduate Assistantship Program, and the Migrant and Seasonal Framworker Health Program.

State Population: 19,297,729

Live Births: 250,091

# MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: **\$817,504,611**Other MCHB Grant Programs: **\$11,486,519** 

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$828,991,130

#### **CONTACT INFORMATION**

### **Title V Program, Contact:**

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(518) 474-6968

(518) 473-2015

blm01@health.state.ny.us

www.health.state.ny.us

### Title V Program's Services for Children with Special Health Care Needs, contact:

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Co-Director, Medical Home Unit

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Albany, NY 12237-0618

(518) 474-2001

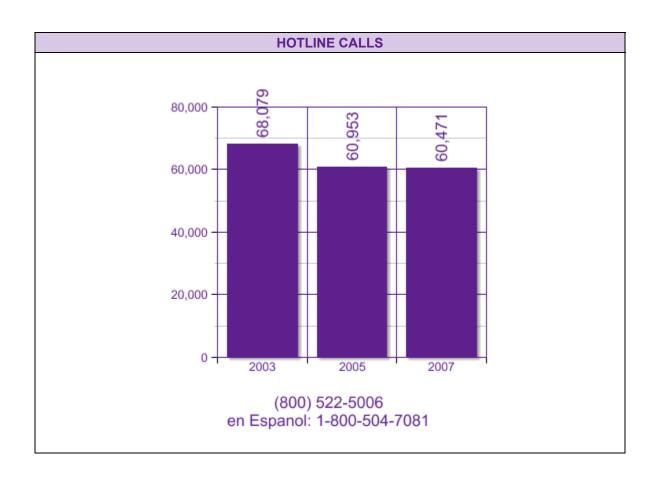
(518) 473-8673

sjs11@health.state.ny.us

www.health.state.ny.us

## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By N	umber of Individuals	S Served and Population Gro	oup
Populations Served	Number of Individuals Served	Evnondituro	-
Pregnant Women	388,110	\$45,117,681	5.5%
Infants < 1 year old	244,832	\$104,879,584	12.8%
Children 1 to 22 years old	5,644,950	\$97,346,038	11.9%
Children with Special Healthcare Needs	554,740	\$498,360,642	61%
Others	485,170	\$43,678,763	5.3%
Administration		\$28,121,903	3.4%
Totals	7,317,802	\$817,504,611	100%
3	State Funds 347,801,378 (42.5%) Local MCH Funds 245,642,140 (30%) Unobligated Balance 0 (0%)	22%	3%
	182,431,876 (22.3%)	30% —	
<b>6</b>	Other Funds 0 (0%)		
	By Categ	ory of Services	
Se	Direct Health Care rvices \$545,637,112 (66.7%) Enabling Services		
	\$124,847,808 (15.3%) Population-Based Services	Des 66.7%	
	\$68,531,654 (8.4%)		
	rvices \$78,488,037 (9.6%)	15.3% 8.4% 9.6%	



# **NEW YORK**

## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	3
FY 2007 Total:	18
Total Possible:	18

Scale: 0 = Not Met

> 1 = Partially Met 2 = Mostly Met

3 = Completely Met

# **NEW YORK**

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	5.6	5.2
The ratio of the black infant mortality rate to the white infant mortality rate.	1.9	1.2
The neonatal mortality rate per 1,000 live births.	3.8	3.6
The postneonatal mortality rate per 1,000 live births.	1.8	1
The perinatal mortality rate per 1,000 live births plus fetal deaths.	5.6	5.2
The child death rate per 100,000 children aged 1 through 14.	13.0	9.3
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percent of Live Births Resulting from Unintended Pregnancies	33.4%	29.5%
Hospitalilzation Rate for Asthma in Children 1 to Age 14	319.2	230
Teenage Pregnancy Rate for Girls Ages 15-17	36.3	32
Percent of infants who are put down on their backs to sleep.	71.9	86
Hospitalizations for Self-Inflicted Injuries for 15-19 Year Olds	0.1%	0.1%
Percent of High School Students who had five or more drinks of alcohol in a row at least once in the Last Month	24.9%	18%
Percent of High School Students Who Smoked Cigarettes in the Last Month	13.8%	4%
Percent of children in the birth year cohort who were screened for high blood lead before the age of two.	69.5	83
Percent of High School Students who watched 3 or more hours of TV on an average school day.	35.3%	30%
Percent of Women that felt down, depressed or hopeless always or often after their baby was born.	8.3%	7%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	59%	68%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	45.2%	60%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	62.1%	*
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	90.6%	93%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	38.4%	43%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	85.8%	90%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	13.1	10
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	27.0%	45%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	1.3	0.8
The percent of mothers who breastfeed their infants at 6 months of age.	50%	55%
Percentage of newborns who have been screened for hearing before hospital discharge.	97.9%	100%
Percent of children without health insurance.	8.4%	6.5%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	32.0%	28%
Percentage of women who smoke in the last three months of pregnancy.	12.2%	11%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	4.0	3.7
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	88.6%	95%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	74.6%	82%

# 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants Health Research, Inc. Rensselaer, NY \$115,000 (EMSC Partnership Grants)

EMSC NETWORK DEVELOPMENT DEMONSTRATION PROJECT (NDDP) Trustees of Columbia University

New York, NY \$742,630

(Emergency Medical Services for Children: Network Development Demonstration Project)

# **Healthy Start**

ELIMINATING DISPARITIES IN PERINATAL HEALTH
Onondaga County Health Department
Syracuse, NY
\$975,000
(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES
Perinatal Network of Monroe County, Inc.
Rochester, NY
\$500,000

(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH COLUMBIA UNIVERSITY New York, NY \$1,175,000

(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH Northern Manhattan Perinatal Partnership, Inc. New York, NY \$875,000

(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH

Fund for Public Health in New York, Inc.
New York, NY
\$1,350,000
(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
Health Research, Inc.
Menands, NY
\$140,000
(Community-Based Integrated Service Systems (Local/State))

Early Childhood Health Columbia University NEW YORK, NY \$375,000 (Early Childhood Health)

#### Title V - Special Projects of Regional and National Significance (SPRANS)

State Implementation Grants for Integrated Community Systems for CSHCN Health Research, Inc.
Rensselaer, NY \$295,500
(State Implementation Grants for Integrated Community Systems for CSHCN)

Child Health Practitioner Support Program ST JOSEPH'S HOSPITAL HEALTH CENTER SYRACUSE, NY \$296,556 (Child Health Practitioner Support Program)

Partnerships to Promote Maternal and Child Health TODAY'S CHILD COMMUNICATIONS, INC. New York, NY \$200,000 (Partnerships to Promote Maternal and Child Health)

Integrated Services for Young Children with Special Health Care Needs ST. CHARLES HOSPITAL & REHABILITATION CENTER Port Jefferson, NY \$250,000 (Medical Home/CSHCN)

Health Families Expansion Program UNIVERSITY OF ROCHESTER Rochester, NY \$34,724 (Healthy Tomorrows Partnership for Children Program)

Healthy Tomorrows Partnership for Children Program
THE TRUSTEES OF COLUMBIA UNIVERSITY
New York, NY
\$50,000
(Healthy Tomorrows Partnership for Children Program)

#### STATE SYSTEMS DEVELOPMENT INITIATIVE

Health Research, Inc. Rensselaer, NY \$94,644

(State Systems Development Initiative)

REG MT SINAI-CORNELL U HEMOPHILIA DIAGNOSTIC & TREATMENT CTR MOUNT SINAI SCHOOL OF MEDICINE New York, NY

New York, NY \$649,624

(Hemophilia Treatment Centers (SPRANS))

GENETICS SERVICES BROOKDALE UNIV HOSPITAL MEDICAL CENTER Brooklyn, NY \$185,000

Children's Oral Healthcare Access Program Health Research, INC./ NYS Department of Health Albany, NY \$160,000

(Childrens Oral Healthcare Access Program)

Family Professional Partnership/CSHCN Parent to Parent of NYS Tupper Lake, NY \$95,700 (Family Professional Partnership/CSHCN)

### **GENETICS SERVICES**

(Genetic Services Project)

Joan & Sanford I Weill Medical College of Cornell University New York, NY \$175,000 (Thalassemia)

MCH Distance Learning NEW YORK MEDICAL COLLEGE Valhalla, NY \$100,000 (MCH Distance Learning)

Leadership Training in Pediatric Dentistry COLUMBIA UNIVERSITY New York, NY \$200,000 (Leadership Training in Pediatric Dentistry)

Training CED/COR Pediatric and Child Psychiatry
Trustees of Columbia University in the City of New York
New York, NY
\$14,356
(Training CED/COR Pediatric and Child Psychiatry)

#### ROCHESTER MCH LEADERSHIP EDUCATION IN ADOLESCENT HEALTH (LT-ADOLESCENT

HEALTH)

University of Rochester

Rochester, NY

\$372,000

(Leadership Education in Adolescent Health)

#### PEDIATRIC PULMONARY CENTER TRAINING GRANT

MOUNT SINAI SCHOOL OF MEDICINE

New York, NY

\$370,000

(Pediatric Pulmonary Centers)

#### LEADERSHIP EDUCATION IN BEHAVIORAL PEDIATRICS

Montefiore Medical Center

Bronx, NY

\$145.000

(Developmental-Behavioral Pediatrics Training Program)

Heritable Disorders

Health Research, Inc.

Rensselaer, NY

\$500,000

(Heritable Disorders)

# CONSUMER NETWORK FOR GENETIC RESOURCE & SERVICE INFORMATION

MARCH OF DIMES FOUNDATION

WHITE PLAINS, NY

\$700,000

(Consumer Initiatives for Genetic Resources and Services)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation

Health Research, Inc.

Rensselaer, NY

\$118,000

(Traumatic Brain Injury Implementation)

### Traumatic Brain Injury Protection and Advocacy

Commission on Quality of Care and Advocacy for Persons with Disabilities

Schenectady, NY

\$82,785

(Traumatic Brain Injury Protection and Advocacy)

#### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING

Health Research, Inc.

Rensselaer, NY

\$150,000

(Universal Newborn Hearing Screening and Intervention)

# OHIO

The Ohio Department of Health administers the Title V Program. The Department conducts a statewide assessment of needs, develops policies, plans and implements programs to improve the health of women, infants, children, adolescents, and families in Ohio. Programs within the Title V administrative structure which are coordinated with the MCH Block Grant include: Oral Health Services to improve access to dental care; the Help Me Grow Program, which includes the Part C Early Intervention Program, birth to three at-risk services and newborn visitation program; Title X family planning services; WIC; Primary and Rural Health Services; Ryan White Program; Childhood Lead Poisoning Prevention Program and the Birth Defects Surveillance Program

State Population: **11,466,917** 

Live Births: **150,590** 

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$46,127,976 Other MCHB Grant Programs: \$5,031,538

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$51,159,514

#### **CONTACT INFORMATION**

#### For More Information on Title V:

### **Title V Program, Contact:**

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614-466-3263

614-728-9163

karen.hughes@odh.ohio.gov

http://www.odh.ohio.gov

# Title V Program's Services for Children with Special Health Care Needs, contact:

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Chief, Bureau for Children with Medical Handicaps

246 North High Street

Columbus, Ohio 43215

614-466-1549

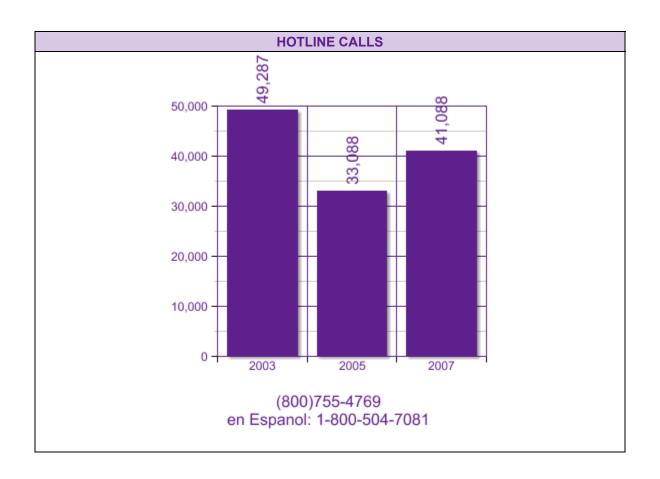
614-728-3616

james.bryant@odh.ohio.gov

http://www.odh.ohio.gov

## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group					
Populations Served	Number of Individuals Served	Expenditures	s FY 2007		
Pregnant Women	150,510	\$5,647,207	12.2%		
Infants < 1 year old	150,510	\$2,464,671	5.3%		
Children 1 to 22 years old	1,849,900	\$15,816,966	34.3%		
Children with Special Healthcare Needs	342,562	\$21,685,341	47%		
Others	101,505	\$0	0%		
Administration		\$513,791	1.1%		
Totals	2,594,987	\$46,127,976	100%		
3 4 5	. State Funds 18,658,778 (40.5%)  . Local MCH Funds 0 (0%)  . Unobligated Balance 3,237,642 (7%)  . Program Income 0 (0%)  . Other Funds	-40	9%		
5,728,729 (12.4%)					
		y of Services			
2. 3. 4.	Direct Health Care ervices \$21,268,794 (46.1%)  Enabling Services \$9,889,014 (21.4%)  Population-Based Services \$5,366,289 (11.6%)  Infrastructure-Building ervices \$9,603,879 (20.8%)	46.1% 21.4% 11.6%			



# OHIO

## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	2
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	2
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	
Family members of diverse cultures are involved in all of the above activities.	3
FY 2007 Total:	16
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	7.8	6.8
The ratio of the black infant mortality rate to the white infant mortality rate.	2.7	1.9
The neonatal mortality rate per 1,000 live births.	5.2	4.9
The postneonatal mortality rate per 1,000 live births.	2.6	2.3
The perinatal mortality rate per 1,000 live births plus fetal deaths.	7.0	6.5
The child death rate per 100,000 children aged 1 through 14.	19.9	17
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Increase statewide capacity to reduce unintended pregnancies among populations at high risk for poor birth outcomes.	2.0	4
Percent of low birth weight black births among all live black births.	14.2%	13%
Increase the capacity of the State to assess social/emotional health needs of MCH populations and to promote early identification, prevention and intervention services.	1.0	4
Degree to which Division of Family and Community Health Services programs can incorporate and evaluate culturally appropriate activities and interventions	3.0	5
Percent of 3rd graders who are overweight	34.3%	34%
Assess the contribution of safety net providers in meeting the need for primary care, mental health, and dental services	1.0	3
Percentage of 3rd grade children with untreated caries	23.7%	18%
Implement Ohio Connections for Children with Special Needs (OCCSN) Birth Defects Registry System	3.0	4
Increase the proportion of children who receive age- and risk-appropriate screenings for lead, vision, and hearing.	25.0%	4%
Integrate ODH Maternal and Child Health Information Systems	1.0	6

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	66.3%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	65.4%	75%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	55.6%	60%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	64.6%	75%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	92.2%	95%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	48.5%	50%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	81.3%	86%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	19.8	18
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	42.2%	52%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	2.7	2.5
The percent of mothers who breastfeed their infants at 6 months of age.	31.5%	36%
Percentage of newborns who have been screened for hearing before hospital discharge.	90.2%	99%
Percent of children without health insurance.	7.1%	7%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	27.6%	25.6%
Percentage of women who smoke in the last three months of pregnancy.	15.3%	14%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	8.7	8.5
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	67.4%	74%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	72.7%	80.5%

# 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

# **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants State of Ohio Columbus, OH \$115,000 (EMSC Partnership Grants)

EMSC Targeted Issue Grants
THE OHIO STATE UNIVERSITY RESEARCH FOUNDATION
COLUMBUS, OH
\$200,000
(EMSC Targeted Issue Grants)

## **Healthy Start**

HEALTHY START INITIATIVE: ELIMINATING DISPARITIES IN PERINATAL HEALTH COLUMBUS HEALTH DEPARTMENT COLUMBUS, OH \$750,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

CLEVELAND HEALTHY FAMILY/ HEALTHY START PROJECT CLEVELAND DEPARTMENT OF PUBLIC HEALTH CLEVELAND, OH \$2,000,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### Research

Increasing Retention in Home Visitation (MCH Research) CHILDREN'S HOSPITAL MEDICAL CENTER Cincinnati, OH \$253,270 (MCH Research)

How Insurance Instability Impacts Children (MCH Research) CHILDREN'S HOSPITAL MEDICAL CENTER Cincinnati, OH \$87,505 (MCH Research) Xylitol for Caries Prevention in Inner-City Children CASE WESTERN RESERVE UNIVERSITY CLEVELAND, OH \$251,041 (MCH Research)

#### Title V - Community Integrated Service Systems (CISS)

Community-Based Integrated Service Systems (Local/State) STATE OF OHIO-DEPT OF HEALTH COLUMBUS, OH \$140,000 (Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

Integrated Services for Young Children with Special Health Care Needs PrimeCare of Southeastern Ohio, Inc . Zanesville, OH \$46,940 (Medical Home/CSHCN)

Health Families Expansion Program
ST. VINCENT MERCY MEDICAL CENTER
Toledo, OH
\$50,000
(Healthy Tomorrows Partnership for Children Program)

OHIO STATE SYSTEMS DEVELOPMENT INITIATIVE Ohio Dept of Health Columbus, OH \$94,644 (State Systems Development Initiative)

Integrated Health and Behavioral Health Care for Children And Adolescents ST. VINCENT MERCY MEDICAL CENTER Toledo, OH \$200,000 (Integrated Health and Behavioral Health Care for Children And Adolescents )

Training CED/COR Pediatric and Child Psychiatry Children's Research Institute Columbus, OH \$15,000 (Training CED/COR Pediatric and Child Psychiatry)

BEHAVIORAL PEDIATRICS FELLOWSHIP TRAINING PROGRAM CASE WESTERN RESERVE UNIVERSITY Cleveland, OH \$175,000

(Developmental-Behavioral Pediatrics Training Program)

Sickle Cell Treatment Demonstration Program UNIVERSITY OF CINCINNATI Cincinnati, OH \$320,000 (Sickle Cell Treatment Demonstration Program)

### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation State of Ohio Rehabilition Services Commission Columbus, OH \$118,000 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy OHIO STATE LEGAL RIGHTS SERVICE COLUMBUS, OH \$65,138 (Traumatic Brain Injury Protection and Advocacy)

### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING STATE OF OHIO - DEPARTMENT OF HEALTH COLUMBUS, OH \$150,000 (Universal Newborn Hearing Screening and Intervention)

# OKLAHOMA

The Title V Program is administered by two state agencies. The Oklahoma State Department of Health (OSDH) administers programs for pregnant women, mothers, infants, children and their families through the Maternal and Child Health Service (MCH). MCH organizationally consists of the Child and Adolescent Health Division, Women's Health Division and MCH Assessment. The Oklahoma Department of Human Services (OKDHS) administers the Children with Special Health Care Needs (CSHCN) Program through the Health Related and Medical Services of the Family Support Services Division.

State Population: 3,617,316

Live Births: **54,018** 

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$22,006,345 Other MCHB Grant Programs: \$3,316,307

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$25,322,652

### **CONTACT INFORMATION**

### For More Information on Title V:

### **Title V Program, Contact:**

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## Title V Program's Services for Children with Special Health Care Needs, contact:

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Director, CSHCN Program

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Oklahoma City, Oklahoma 73125

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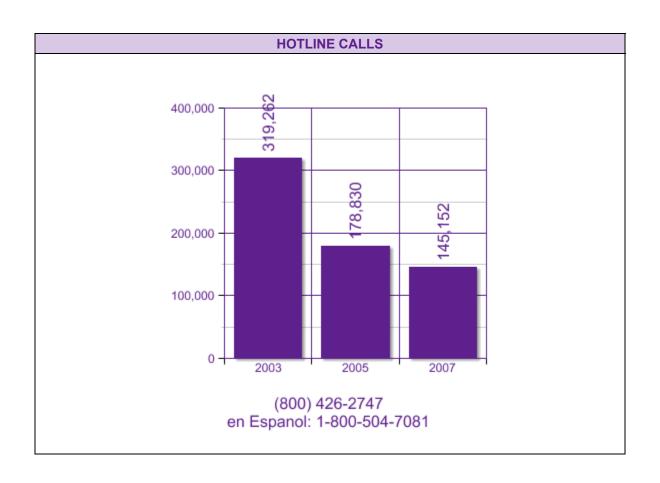
(405) 521-4158

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## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group				
Populations Served	Number of Individuals Served	Expenditures	s FY 2007	
Pregnant Women	4,800	\$5,902,376	26.8%	
Infants < 1 year old	54,354	\$2,709,536	12.3%	
Children 1 to 22 years old	19,671	\$7,840,093	35.6%	
Children with Special Healthcare Needs	25,691	\$3,895,473	17.7%	
Others	82,524	\$0	0%	
Administration		\$1,658,867	7.5%	
Totals	187,040	\$22,006,345	100%	
■ <sup>4</sup>	1% Local MCH Funds 5,417,667 (24.6%) Unobligated Balance 0 (0%) Program Income 128,367 (0.6%) Other Funds	34	1%	
	0 (0%)  By Category (	of Services		
Se 2.	Direct Health Care rvices \$10,518,154 (47.8%)  Enabling Services \$1,592,575 (7.2%)  Population-Based Services \$3,633,545 (16.5%)	47.8%		



# OKLAHOMA

## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	2
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	2
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	1
FY 2007 Total:	13
Total Possible:	18

Scale: 0 = Not Met

> 1 = Partially Met 2 = Mostly Met

3 = Completely Met

# OKLAHOMA

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	7.6	6.5
The ratio of the black infant mortality rate to the white infant mortality rate.	2.6	1.3
The neonatal mortality rate per 1,000 live births.	4.6	3.9
The postneonatal mortality rate per 1,000 live births.	3.7	2.6
The perinatal mortality rate per 1,000 live births plus fetal deaths.	10.1	8.3
The child death rate per 100,000 children aged 1 through 14.	31.1	23.7
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The percent of women who have an unintended pregnancy (mistimed or unwanted) resulting in live birth.	48.4%	47.2%
The percent of adolescents grades 9-12 smoking tobacco products	23.2%	21.8%
The number of families with a child with special health care needs receiving respite care provided through the CSHCN program.	138	200
The percent of adolescents at risk for overweight (greater than or equal to 85th percentile of gender-specific body mass index [BMI] distribution).	15.3%	14.2%
The extent to which the MCH program area develops and maintains the capacity to access and link health-related data relevant to targeted MCH populations.	15	18
The percent of Medicaid eligible children with special health care needs who report receiving routine dental care.	41.5%	44%
The percent of adolescents grades 9-12 not using alcohol during the past 30 days.	56.9%	67.1%
The percent of adolescents overweight and obese (greater than or equal to 85th percentile of gender-specific body mass index [BMI] distribution	29.9%	28.4%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	56.9%	62.7%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	49.7%	62.5%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	61.6%	68.1%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	90.3%	95%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	43.7%	49%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	79.5%	86%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	30.6	25.7
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	35.1%	43.2%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	6.7	4.9
The percent of mothers who breastfeed their infants at 6 months of age.	29.6%	35%
Percentage of newborns who have been screened for hearing before hospital discharge.	95.1%	97.4%
Percent of children without health insurance.	12.5%	12%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	54.4%	50%
Percentage of women who smoke in the last three months of pregnancy.	19.3%	17.7%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	10.3	8.3
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	82.1%	85%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	73.9%	85.7%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
BOARD OF REGENTS THE UNIVERSITY OF OKLAHOMA
Oklahoma City, OK
\$115,000
(EMSC Partnership Grants)

### **Healthy Start**

ELIMINATING DISPARITIES IN PERINATAL HEALTH-GENERAL POPULATION TULSA CITY-COUNTY HEALTH DEPARTMENT Tulsa, OK \$1,075,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH COMMUNITY HEALTH CENTERS, INC.
Oklahoma City, OK \$700,000
(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

### **Title V - Community Integrated Service Systems (CISS)**

Community-Based Integrated Service Systems (Local/State)
OKLAHOMA STATE DEPARTMENT OF HEALTH
Oklahoma City, OK
\$140,000
(Community-Based Integrated Service Systems (Local/State))

### Title V - Special Projects of Regional and National Significance (SPRANS)

State Agency Partnerships for Promoting Child and Adolescent Mental Health OKLAHOMA STATE DEPARTMENT OF HEALTH Oklahoma City, OK \$85,000 (State Agency Partnerships for Promoting Child and Adolescent Mental Health)

State Implementation Grants for Integrated Community Systems for CSHCN BOARD OF REGENTS THE UNIVERSITY OF OKLAHOMA Oklahoma City, OK \$298,498 (State Implementation Grants for Integrated Community Systems for CSHCN)

OKLAHOMA STATE SYSTEMS DEVELOPMENT INITIATIVE OKLAHOMA STATE DEPARTMENT OF HEALTH Oklahoma City, OK \$94,644 (State Systems Development Initiative)

Heritable Disorders UNIVERSITY OF OKLAHOMA HEALTH SCIS CTR OKLAHOMA CITY, OK \$498,673 (Heritable Disorders)

### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation
OKLAHOMA STATE DEPARTMENT OF HEALTH
Oklahoma City, OK
\$109,492
(Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy Oklahoma Disability Law Center, Inc. Oklahoma City, OK \$50,000 (Traumatic Brain Injury Protection and Advocacy)

### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING OKLAHOMA STATE DEPARTMENT OF HEALTH Oklahoma City, OK \$150,000 (Universal Newborn Hearing Screening and Intervention)

The Office of Family Health, Oregon Public Health Division, of the Dept of Human Services, administers the Title V Program. The services located in the state Title V agency include grants to counties, policy and program development and evaluation, population-based assessment and surveillance, and leadership and coordination of health systems and services for MCH populations, including high-risk pregnant women, infants and children, adolescents, and children with special health care needs. The Oregon Center for Children and Youth with Special Health Needs, in the Child Development and Rehabilitation Center, of the Oregon Health and Science University, administers the state Title V Program for children with special health needs. Direct and enabling individual services, community-based collaboration and coordination, and local assessments is conducted with Title V funds awarded by contract to county health departments in Oregon.

State Population: 3,747,455

Live Births: 48,717

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$38,323,255 Other MCHB Grant Programs: \$3,440,605

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$41,763,860

### **CONTACT INFORMATION**

### For More Information on Title V:

### **Title V Program, Contact:**

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Administrator

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Portland, OR 97207

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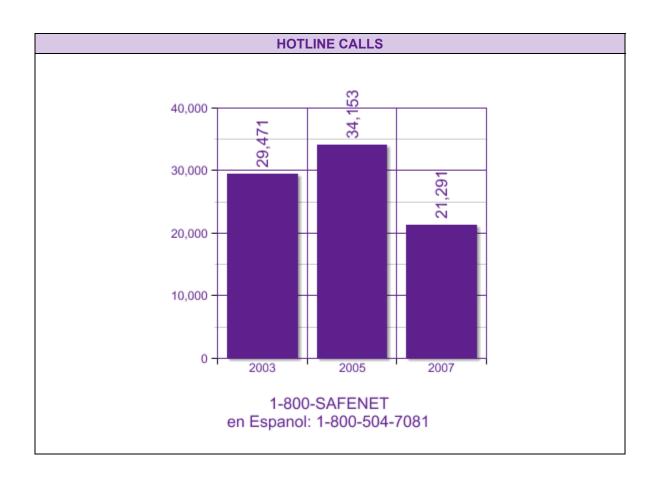
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## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

Dy It	umber of Individuals	Served and Population Gro	oup
Populations Served	Number of Individuals Served	Expenditure	-
Pregnant Women	59,477	\$2,473,598	6.5%
Infants < 1 year old	49,223	\$12,720,634	33.2%
Children 1 to 22 years old	918,512	\$17,681,899	46.1%
Children with Special Healthcare Needs	9,658	\$3,448,563	9%
Others	77,399	\$841,647	2.2%
Administration		\$1,156,914	3%
Totals	1,114,269	\$38,323,255	100%
3 4	. Local MCH Funds 0 (0%) . Unobligated Balance 0 (0%) . Program Income		9%
6		8% ———	
_	. Other Funds 5,910,651 (15.4%)		
_	5,910,651 (15.4%)	ry of Services	



## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	2
FY 2007 Total:	17
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	5.5	5.2
The ratio of the black infant mortality rate to the white infant mortality rate.	1.8	1
The neonatal mortality rate per 1,000 live births.	3.9	3.1
The postneonatal mortality rate per 1,000 live births.	1.6	1.8
The perinatal mortality rate per 1,000 live births plus fetal deaths.	4.9	5
The child death rate per 100,000 children aged 1 through 14.	15.2	14
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percent of births where mothers report that the pregnancy was intended	62.1%	65%
Percent of smoking women who quit smoking during their pregnancy and did not begin smoking postpartum.	52.0%	65%
Percent of infants diagnosed with hearing loss that are enrolled or in Early Intervention before 6 months of age.	49.2%	58%
Percent of children that complete the 4th DTaP vaccine by two years of age.	65.5%	71%
Percent of 8th graders who report being physically active for a total of at least 60 minutes a day for 5 or more days in the last 7 days.	56.2%	75%
Percent of 11th graders who report having unmet health care needs.	29.2%	26%
Percent of Oregonians living in a community where the water system is optimally fluoridated.	19.7	21
Percent of health care providers who report confidence in caring for CYSHN and their families	95.1%	98%
Percent of families of CYSHN who report costs not covered by insurance were usually or always reasonable.	85.5%	90%
Percent of families of CYSHN who reside in rural areas report that needs are usually or always met.	72.4%	85%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	55.5%	57%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	47.4%	55%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	61.5%	65%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	88.3%	92%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	43.7%	48%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	78.4%	80%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	15.2	13.5
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	42.7%	55%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	3.0	2.5
The percent of mothers who breastfeed their infants at 6 months of age.	56.4%	64%
Percentage of newborns who have been screened for hearing before hospital discharge.	96.7%	99.5%
Percent of children without health insurance.	12.6%	10%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	32.1%	36%
Percentage of women who smoke in the last three months of pregnancy.	10.7%	9.5%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	8.0	6.5
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	99.2%	99%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	78.4%	85%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
OREGON STATE DEPT OF HUMAN SERVICES
Portland, OR
\$115,000
(EMSC Partnership Grants)

### **Healthy Start**

ELIMINATING DISPARITIES IN PERINATAL HEALTH HEALTH CARE COALITION OF SOUTHERN OREGON, INC. Medford, OR \$750,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

HEALTHY START ELIMINATING DISPARITIES IN PERINATAL HEALTH Multnomah County Health Department Portland, OR \$850,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
OREGON STATE DEPT OF HUMAN SERVICES
Portland, OR
\$140,000
(Community-Based Integrated Service Systems (Local/State))

### Title V - Special Projects of Regional and National Significance (SPRANS)

State Implementation Grants for Integrated Community Systems for CSHCN OREGON HEALTH & SCIENCES UNIVERSITY PORTLAND, OR \$300,000 (State Implementation Grants for Integrated Community Systems for CSHCN)

Health Families Expansion Program
SACRED HEART MEDICAL CENTER
Springfield, OR
\$50,000
(Healthy Tomorrows Partnership for Children Program)

OREGON STATE SYSTEMS DEVELOPMENT INITIATIVE OREGON STATE DEPT OF HUMAN SERVICES Portland, OR \$94,644 (State Systems Development Initiative)

REGION X COMPREHENSIVE HEMOPHILIA DIAGNOSTIC & TREATMENT CENTERS OREGON HEALTH & SCIENCES UNIVERSITY PORTLAND, OR \$201,661 (Hemophilia Treatment Centers (SPRANS))

Family Professional Partnership/CSHCN Oregon Family Support Network Eugene, OR \$95,700 (Family Professional Partnership/CSHCN)

National Maternal and Child Health Data Resource Center OREGON HEALTH & SCIENCES UNIVERSITY PORTLAND, OR \$525,000 (National Maternal and Child Health Data Resource Center)

### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation
OREGON STATE DEPARTMENT OF EDUCATION
Salem, OR
\$118,600
(Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy OREGON ADVOCACY CENTER PORTLAND, OR \$50,000 (Traumatic Brain Injury Protection and Advocacy)

### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING
OREGON STATE DEPT OF HUMAN SERVICES
Portland, OR
\$150,000
(Universal Newborn Hearing Screening and Intervention)

The Pennsylvania Department of Health's, Bureau of Family Health is the State Title V Agency overseeing the MCH Block Grant as well as other initiatives focused on maternal, child and family health. The mission of the BFH is to imporve the health of pregnant women, infants, children and CSHCN.

State Population: 12,432,792

Live Births: 149,082

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: **\$83,306,543**Other MCHB Grant Programs: **\$9,774,954** 

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$93,081,497

#### **CONTACT INFORMATION**

### For More Information on Title V:

## **Title V Program, Contact:**

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### Title V Program's Services for Children with Special Health Care Needs, contact:

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717-772-2763

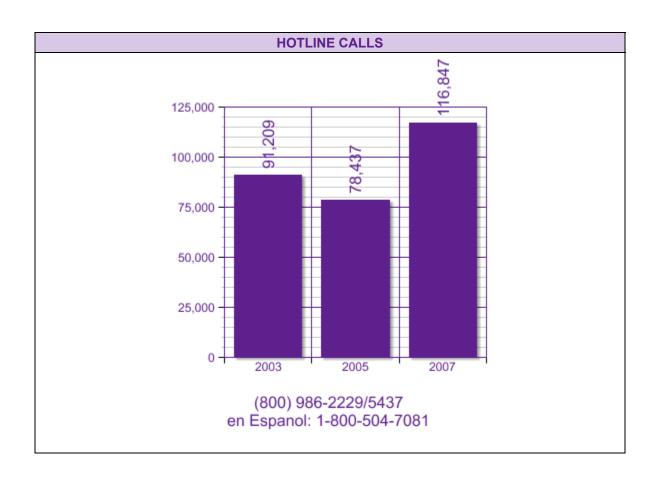
717-772-0323

mconnors@state.pa.us

www.health.state.pa.us

## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group				
Populations Served	Number of Individuals Served	Evnanditura		
Pregnant Women	12,016	\$2,703,608	3.2%	
Infants < 1 year old	150,801	\$5,535,796	6.6%	
Children 1 to 22 years old	175,929	\$47,427,030	56.9%	
Children with Special Healthcare Needs	24,962	\$12,922,025	15.5%	
Others	73,930	\$12,558,893	15.1%	
Administration		\$2,159,191	2.6%	
Totals	437,638	\$83,306,543	100%	
2 3	Federal Allocation 24,663,638 (29.6%)  State Funds 58,642,905 (70.4%)  Local MCH Funds 0 (0%)  Unobligated Balance 0 (0%)  Program Income 0 (0%)	70%	0%	
■ 6	Other Funds 0 (0%)			
	By Categ	ory of Services		
2. 3. 4.	Direct Health Care Prvices \$17,962,492 (21.6%) Enabling Services \$3,988,886 (4.8%) Population-Based Servic \$46,268,008 (55.5%) Infrastructure-Building Prvices \$15,087,157 (18.1%)	21.6% 4.8% 55.5%		



## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	2
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	2
FY 2007 Total:	15
Total Possible:	18

Scale: 0 = Not Met

> 1 = Partially Met 2 = Mostly Met 3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	*	7
The ratio of the black infant mortality rate to the white infant mortality rate.	*	2.5
The neonatal mortality rate per 1,000 live births.	*	4.6
The postneonatal mortality rate per 1,000 live births.	*	1.8
The perinatal mortality rate per 1,000 live births plus fetal deaths.	*	*
The child death rate per 100,000 children aged 1 through 14.	*	16.6
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percent of callers who have expressed satisfaction with the services provided by the Special Kids Network Helpline.	91.9%	93%
Rate of infant deaths as a result of Sudden Infant Death Syndrome (SIDS) and accidental suffocation and strangulation in bed per 1,000 live births.	*	0.5
The rate of pregnancy (per 1,000) among females ages 15-17	*	22
Percent of children ages 6 years and younger tested for elevated blood lead levels	*	15%
The percent of tested children ages 6 years and younger with confirmed elevated blood lead levels.	2.3%	2.1%
The percentage of statewide breastfeeding initiation	*	71%
The percentage of infants with failed hearing screenings that are lost to follow-up	*	17%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	60.6%	73.5%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	45.8%	54.2%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	66.2%	70%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	89.5%	89.5%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	46%	52%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	*	86.5%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	*	14.7
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	*	32.4%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	*	2.3
The percent of mothers who breastfeed their infants at 6 months of age.	*	44%
Percentage of newborns who have been screened for hearing before hospital discharge.	*	98%
Percent of children without health insurance.	*	6.7%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	*	13.4%
Percentage of women who smoke in the last three months of pregnancy.	*	13.7%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	*	5
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	*	82.9%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	*	81.4%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
Pennsylvania State Department of Public Health & Human Services
Harrisburg, PA
\$115,000
(EMSC Partnership Grants)

EMSC Targeted Issue Grants
THE CHILDREN'S HOSPITAL OF PHILADELPHIA
Philadelphia, PA
\$199,943
(EMSC Targeted Issue Grants)

EMSC Targeted Issue Grants
THE CHILDREN'S HOSPITAL OF PHILADELPHIA
Philadelphia, PA
\$199,966
(EMSC Targeted Issue Grants)

EMSC Targeted Issue Grants
THE CHILDREN'S HOSPITAL OF PHILADELPHIA
Philadelphia, PA
\$194,880
(EMSC Targeted Issue Grants)

## **Healthy Start**

HEALTHY START INITIATIVE: ELIMINATION DISPARITIES IN PERINATAL HEALTH HEALTHY START, INC Pittsburgh, PA \$750,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

HEALTHY START INITIATIVE: ELIMINATING DISPARITIES IN PERINATAL HEALTH PHILADELPHIA PUBLIC HEALTH DEPARTMENT Philadelphia, PA \$736,469 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH MCH CONSORTIUM OF CHESTER COUNTY West Chester, PA \$775,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH CROZER-KEYSTONE HEALTH SYSTEM Springfield, PA \$675,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERNATAL HEALTH PHILADELPHIA PUBLIC HEALTH DEPARTMENT Philadelphia, PA \$2,125,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

HEALTHY START INITIATIVE: ELIMINATION DISPARITIES IN PERINATAL HEALTH HEALTHY START, INC Pittsburgh, PA \$2,350,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### Research

Aggregated Complication Measure for Neonatal Quality of Care (MCH Research) THE CHILDREN'S HOSPITAL OF PHILADELPHIA Philadelphia, PA \$249,571 (MCH Research)

Single Home Visits to Improve Health Outcomes (MCH Research)
THE PENNSYLVANIA STATE UNIVERSITY
HERSHEY, PA
\$253,888
(MCH Research)

### Title V - Special Projects of Regional and National Significance (SPRANS)

Medical Home/CSHCN
PA CHAPTER/AMERICAN ACADEMY OF PEDIATRICS
Media, PA
\$150,000
(Medical Home/CSHCN)

Health Families Expansion Program
Pocono Health System
East Stroudsburg, PA
\$50,000
(Healthy Tomorrows Partnership for Children Program)

Healthy Tomorrows Partnership for Children Program PHILADELPHIA DEPARTMENT OF PUBLIC HEALTH PHILADELPHIA, PA \$50,000 (Healthy Tomorrows Partnership for Children Program)

MCHB State Systems Development Initiative Commonwealth of Pennsylvania Harrisburg, PA \$94,644 (State Systems Development Initiative)

GENETICS SERVICES CHILDREN'S HOSPITAL OF PITTSBURGH Pittsburgh, PA \$183,000 (Genetic Services Project)

Family Professional Partnership/CSHCN
Parent Education & Advocacy Leadership Center
Pittsburgh, PA
\$95,700
(Family Professional Partnership/CSHCN)

State Grants for Perinatal Depression FAMILY PLANNING COUNCIL SOUTHEASTERN PA PHILADELPHIA, PA \$209,607 (State Grants for Perinatal Depression)

### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation
Pennsylvania State Department of Public Health & Human Services
Harrisburg, PA
\$100,000
(Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy Disability Rights Network of Pennsylvania HARRISBURG, PA \$67,286 (Traumatic Brain Injury Protection and Advocacy)

### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING
PA ST DEPARTMENT OF PUBLIC HEALTH & HUMAN SERVICES
Harrisburg, PA
\$150,000
(Universal Newborn Hearing Screening and Intervention)

The Assistant Secretariat for Family Health and Integrated Services of the PRDoH administers the MCH/CSHCN programs. In Puerto Rico, the Title V Program supports direct services not covered by the GIP, such as the provision of contraceptive methods for low income population and subspecialty services for CSHCN. Title V funds are also used to support needs assessments and other activities geared to improve the health status of WCBA, infants, children, adolescents and CSHCN. Among the most relevant programs which are implemented with the Title V funds we want to highlight the following: the Home Visiting Program and the Comprehensive Adolescent Program. The Title V provides leadership and supervision to other related programs, such as SSDI, Healthy Start, "Comenzando Bien" of March of Dimes, Universal Newborn Hearing Screening, Early Intervention Program, Sexual Abstinence Education Program, Addressing Asthma from a Public Health Perspective and its Surveillance System, Early Childhood Comprehensive Systems and the Birth Defects Surveillance System.

State Population: 3,942,375

Live Births: 48,590

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$32,880,654 Other MCHB Grant Programs: \$1,099,644

Bioterrorism Grant Program: **\$0** 

Total MCH Partnership Funds: \$33,980,298

#### **CONTACT INFORMATION**

#### For More Information on Title V:

### **Title V Program, Contact:**

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### Title V Program's Services for Children with Special Health Care Needs, contact:

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**CSHCN** Director

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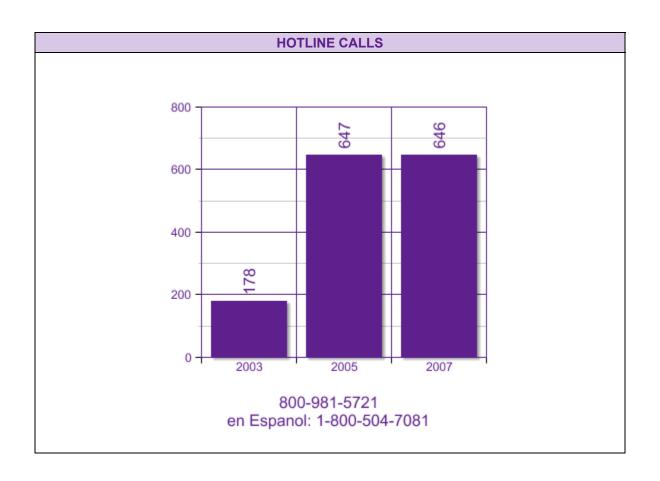
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## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By N	umber of Individuals Se	rved and Population Gro	ир
Populations Served	Number of Individuals Served	Expenditures	s FY 2007
Pregnant Women	42,148	\$4,515,957	13.7%
Infants < 1 year old	48,063	\$4,515,958	13.7%
Children 1 to 22 years old	77,235	\$10,602,683	32.2%
Children with Special Healthcare Needs	7,990	\$11,618,631	35.3%
Others	39,377	\$0	0%
Administration		\$1,627,425	4.9%
Totals	214,813	\$32,880,654	100%
<b>a</b> 4	. Local MCH Funds 7% 0 (0%) . Unobligated Balance 2,204,550 (6.7%) 42% . Program Income 542,749 (1.7%)	<b>—</b> 49	9%
6	Other Funds 0 (0%)		
	By Category	of Services	
2. 3.	Direct Health Care Prices \$19,012,484 (57.8%)  Enabling Services \$4,203,745 (12.8%)  Population-Based Services \$2,828,967 (8.6%)  Infrastructure-Building	57.8%	



## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	
Family members of diverse cultures are involved in all of the above activities.	1
FY 2007 Total:	13
Total Possible:	18

Scale: 0 = Not Met

> 1 = Partially Met 2 = Mostly Met

3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	5.2	6.3
The ratio of the black infant mortality rate to the white infant mortality rate.	0	0
The neonatal mortality rate per 1,000 live births.	3.5	5.1
The postneonatal mortality rate per 1,000 live births.	1.7	1.7
The perinatal mortality rate per 1,000 live births plus fetal deaths.	5.4	6.2
The child death rate per 100,000 children aged 1 through 14.	6.0	8
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The number of HIV positive pregnant women treated with AZT.	98.7%	100%
Establish a Home Visiting program in at least 90% of the Island by the year 2,010.	89.7%	95%
Prevalence of tobacco use among pregnant women	2.6%	1.5%
The birth rate among girls 10-14 years of age	0.9	1
The rate of cesarean section in Puerto Rico	49.1%	23.8%
Develop and maintain an active surveillance system for at least 55 birth defect diagnoses by 2010.	78.2%	100%
Reduce the prevalence at birth of neural tube defects (NTD's)	9.6	5
The rate of deaths to children aged 1-14 caused by asthma	0.3	0.1

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	44.8%	59%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	38.7%	49%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	17.0%	23%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	68.0%	77%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	9.1%	20%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	91.2%	96.5%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	29.5	30.2
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	5.1%	9%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	1.0	0.9
The percent of mothers who breastfeed their infants at 6 months of age.	26.5%	32%
Percentage of newborns who have been screened for hearing before hospital discharge.	97.5%	99%
Percent of children without health insurance.	0.4%	0.3%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	39.7%	34%
Percentage of women who smoke in the last three months of pregnancy.	1.5%	1.4%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	1.0	1
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	41.7%	57%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	82.0%	93%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

## **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants UNIVERSITY OF PUERTO RICO San Juan, PR \$115,000 (EMSC Partnership Grants)

### **Healthy Start**

ELIMINATING DISPARITIES IN PERINATAL HEALTH PUERTO RICO DEPARTMENT OF HEALTH San Juan, PR \$500,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
PUERTO RICO DEPARTMENT OF HEALTH
San Juan, PR
\$140,000
(Community-Based Integrated Service Systems (Local/State))

### Title V - Special Projects of Regional and National Significance (SPRANS)

Healthy Tomorrows Partnership for Children Program UNIVERSITY OF PUERTO RICO San Juan, PR \$50,000 (Healthy Tomorrows Partnership for Children Program)

PUERTO RICO STATE SYSTEMS DEVELOPMENT INITIATIVE PUERTO RICO DEPARTMENT OF HEALTH San Juan, PR \$94,644 (State Systems Development Initiative)

### **Traumatic Brain Injury**

Traumatic Brain Injury Protection and Advocacy
OFC OF THE OMBUDSMAN FOR PERSONS W/DISABILITIES
SAN JUAN, PR
\$50,000
(Traumatic Brain Injury Protection and Advocacy)

## **Universal Newborn Hearing Screening**

Universal Newborn Hearing Screening and Intervention PUERTO RICO DEPARTMENT OF HEALTH San Juan, PR \$150,000 (Universal Newborn Hearing Screening and Intervention)

# PALAU

#### MCH Administration:

Title V Maternal and Child Health Program is administered and implemented by the Ministry of Health, Bureau of Public Health under Family Health Unit of the Division of Primary and Preventive Services. The Family Health Unit is managed by the FHU Administrator. FHU is tasked with the implementation of this grant. It works in collaboration with different departments within the Ministry of Health (e.g., Bureau of Hospital and Clinical Services, Behavioral Health, Primary and Preventive Services, STI/HIV/AIDS Program) and with the communities (e.g., schools and parents of children with special health care needs)

State Population: 20,842

Live Births: 259

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: **\$265,414** Other MCHB Grant Programs: **\$359,644** 

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$625,058

### **CONTACT INFORMATION**

### For More Information on Title V:

### **Title V Program, Contact:**

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FHU/MCH Unit Administrator

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## Title V Program's Services for Children with Special Health Care Needs, contact:

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Chief, Pediatric Services

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(680) 488-2172

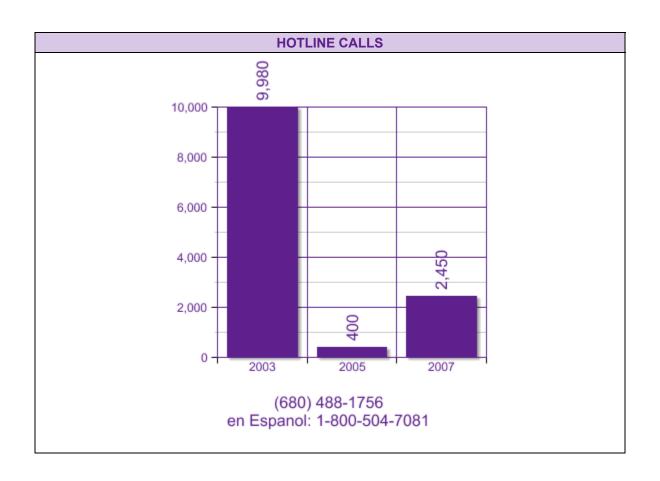
(680) 488-8135

y bechesrrak@palau-health.net

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By N	umber of Individuals Ser	ved and Population Gr	oup	
Populations Served	Number of Individuals Served Expenditures FY		Number of Individuals Served	es FY 2007
Pregnant Women	506	\$58,500	22%	
Infants < 1 year old	279	\$46,000	17.3%	
Children 1 to 22 years old	9,548	\$52,000	19.6%	
Children with Special Healthcare Needs	300	\$63,000	23.7%	
Others	1,238	\$30,000	11.3%	
Administration		\$15,914	6%	
Totals	11,871	\$265,414	100%	
	By Source	of Funds		
<b>.</b> '	. Federal Allocation 151,665 (57.1%)			
■ <sup>2</sup>	State Funds 0 (0%)			
■ 3	. Local MCH Funds 113,749 (42.9%)			
<b>■</b> <sup>4</sup>	. Unobligated Balance 0 (0%)		7%	
	. Program Income			

# 0 (0%) 6. Other Funds 0 (0%) **By Category of Services** 1. Direct Health Care Services \$53,000 (20%) 20% 2. Enabling Services \$52,000 (19.6%) 3. Population-Based Services \$70,000 (26.4%) 19.6% 26.4% 4. Infrastructure-Building Services 34.1% \$90,414 (34.1%)



# PALAU

### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	2
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	2
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	2
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	2
Family members of diverse cultures are involved in all of the above activities.	2
FY 2007 Total:	13
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# PALAU

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	7.1	5.9
The ratio of the black infant mortality rate to the white infant mortality rate.	0.0	0
The neonatal mortality rate per 1,000 live births.	7.1	5.5
The postneonatal mortality rate per 1,000 live births.	0.0	0
The perinatal mortality rate per 1,000 live births plus fetal deaths.	14.1	7
The child death rate per 100,000 children aged 1 through 14.	108.8	40
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percent of 0-2 years of age who test positive for hearing defects that receive further evaluation and treatment	0.0	0
Percentage of newborns screened positive for genetic disorder who receive further evaluation and treatment	0%	100%
Percent of adults women of reproductive age group whose BMI is over 27 are identified and provided onsite education and referred for weight management program.	0%	90%
Percent of children in 1st to 12th grade who receive annual health screening	68.7%	100%
The rate of depression for adolescents ages 11 - 19.	65.6	40
The percentage of children and adolescents ages 18 and under who report using (smoke and/or chew) tobacco products in the past 30 days.	*	28
Percent of pregnant women entering prenatal care in the first trimester	33.3%	48%
Percent of Pre-term delivery	9.0%	2%
Percent of parents/caretakers who report that their children with special healthcare needs receive quality health care	90.3%	93%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	0.0%	99%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	90.3%	92%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	57.7%	60%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	10.6%	15%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	57.7%	69%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	76.7%	85%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	95%	100%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	6.5	5.6
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	87.1%	94%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	0.0	0
The percent of mothers who breastfeed their infants at 6 months of age.	52.4%	72%
Percentage of newborns who have been screened for hearing before hospital discharge.	81.4%	95%
Percent of children without health insurance.	0%	0%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	*	2%
Percentage of women who smoke in the last three months of pregnancy.	57.4%	45%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	0.0	0
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	0.0%	0%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	33.3%	54%

# PALAU

### 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Title V - Community Integrated Service Systems (CISS)**

CISS - SECCS (PLANNING)
REPUBLIC OF PALAU BUREAU OF HEALTH SERVICES
Koror, PW
\$140,000
(Community-Based Integrated Service Systems (Local/State))

### Title V - Special Projects of Regional and National Significance (SPRANS)

PALAU INTERAGENCY PROJECT FOR CHILDREN WITH SPECIAL NEEDS REPUBLIC OF PALAU BUREAU OF HEALTH SERVICES Koror, PW \$94,644 (State Systems Development Initiative)

#### **Universal Newborn Hearing Screening**

Universal Newborn Hearing Screening and Intervention Republic of Palau Palau, PW \$125,000 (Universal Newborn Hearing Screening and Intervention)

RI Department of Health, Division of Community, Family Health and Equity administers RI's title V Program. It strives to preserve, protect and promote the health and development of all women of maternal age, children and families with a goal of reducing and preventing diseases and disabilities. The Division develops and supports community-based programs and systems of care that address the health and development needs for all children and their families, evaluates the health and development of children with a focus on policy development and planning, and invests in information, education, public engagement, and community partnership development with a focus on prevention. The Division involved parents in all aspects of Community, Family Health and Equity activities. The Division is home to several major public health programs and services for children and families, including WIC, Immunization, Lead Poisoning Prevention, School Health, Special Health Care Needs and Family Planning.

State Population: 1,057,832

Live Births: 12,379

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$12,287,418
Other MCHB Grant Programs: \$1,080,844

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$13,368,262

#### **CONTACT INFORMATION**

#### For More Information on Title V:

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#### Title V Program's Services for Children with Special Health Care Needs, contact:

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Chief, Spec Health Care Needs

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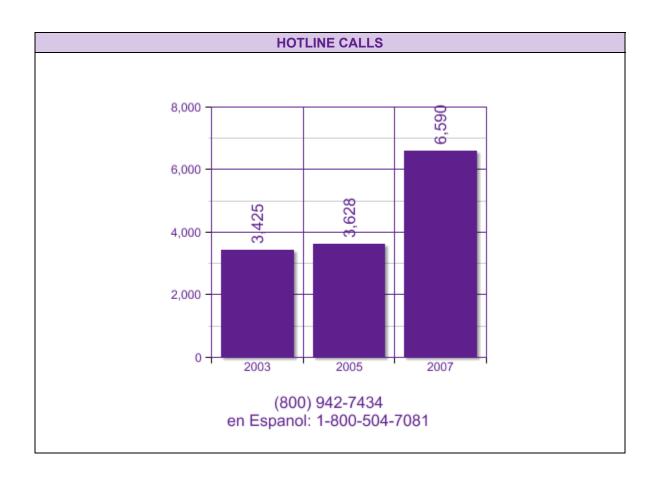
401-222-5929

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### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group			
Populations Served	Number of Individuals Served	Expenditure	es FY 2007
Pregnant Women	7,358	\$653,125	5.3%
Infants < 1 year old	13,191	\$2,172,603	17.7%
Children 1 to 22 years old	38,131	\$6,885,949	56%
Children with Special Healthcare Needs	8,024	\$2,205,451	17.9%
Others	11,467	\$196,430	1.6%
Administration		\$173,860	1.4%
Totals	78,171	\$12,287,418	100%
	By Source	e of Funds	
<b>■</b> <sup>1</sup>	. Federal Allocation 2,036,820 (16.6%)		
2	State Funds 2,929,653 (23.8%)		17%
3	. Local MCH Funds 0 (0%)		
<b>4</b>	. Unobligated Balance 56% 458,166 (3.7%)	6-	24%
	. Program Income 6,862,779 (55.9%)		4%
<b>6</b>	Other Funds 0 (0%)		
	By Category	of Services	
	Direct Health Care rvices \$296,338 (2.4%)	2.4%	
2.	Enabling Services \$290,889 (2.4%)		
3.	Population-Based Services \$8,299,280 (67.5%)	67.5%	
	Infrastructure-Building rvices \$3,400,911 (27.7%)	27.7%	



### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	2
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	2
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	3
FY 2007 Total:	16
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	7.3	6.3
The ratio of the black infant mortality rate to the white infant mortality rate.	2.2	2.3
The neonatal mortality rate per 1,000 live births.	5.4	5
The postneonatal mortality rate per 1,000 live births.	1.9	1.4
The perinatal mortality rate per 1,000 live births plus fetal deaths.	6.4	6.2
The child death rate per 100,000 children aged 1 through 14.	7.7	12.2
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percent of PRAMS population who had a diagnosis of depression before or during pregnancy.	13.1%	13.2%
Percent of children aged 2-5 enrolled in the WIC Program with BMI's >=95th percentile	17.4%	17%
Percent of Rhode Island resident families with at-risk newborns that received a home visit from the Family Outreach Program within the newborn period (<=90 days)	45.3%	52.7%
Percent of children aged less than 6 who live in the core cities and have blood lead levels at or above 10ug/dL	4.0%	3.7%
Ratio of the Black or African American prematurity rate to the White prematurity rate	1.2	1.2
Percent of children (who have had at least one immunization from a primary care provider) with complete immunization series (4:3:1:3) and at least one lead screening by age 2	49.7%	53.2%
Percent of at-risk newborns who live in a neighborhood or community with MCH community systems building partnerships	36.4%	37.2%
Percent of licensed child care providers with on-site health consultants	0.4%	55%
Percentage of students who felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities during the past 12 months.	23.6%	24.8%
Percent of families of CSHCN served by the Pediatric Practice Enhancement Project (PPEP).	5.3%	7.1%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	99.6%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	61.4%	63%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	50.9%	55.5%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	68.2%	70.2%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	87.6%	80%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	37.6%	38.4%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	84.4%	85%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	18.0	18.5
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	36.3%	37.2%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	*	1.5
The percent of mothers who breastfeed their infants at 6 months of age.	31.2%	33%
Percentage of newborns who have been screened for hearing before hospital discharge.	97.3%	96.8%
Percent of children without health insurance.	5.2%	6%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	35.6%	35.8%
Percentage of women who smoke in the last three months of pregnancy.	13.4%	12.4%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	*	4
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	92.5%	93%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	82.1%	85.2%

### 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants Rhode Island Department of Health Providence, RI \$115,000 (EMSC Partnership Grants)

#### **Title V - Community Integrated Service Systems (CISS)**

CISS - SECCS (PLANNING) STATE OF RHODE ISLAND DEPARTMENT OF HEALTH PROVIDENCE, RI \$140,000 (Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

State Implementation Grants for Integrated Community Systems for CSHCN Rhode Island Department of Health Providence, RI \$295,500 (State Implementation Grants for Integrated Community Systems for CSHCN)

Healthy Tomorrows Partnership for Children Program State of Rhode Island Department of Health Providence, RI \$50,000 (Healthy Tomorrows Partnership for Children Program)

LINKING DATA AND COMMUNITIES STATE OF RHODE ISLAND DEPARTMENT OF HEALTH PROVIDENCE, RI \$94,644 (State Systems Development Initiative)

Family Professional Partnership/CSHCN Rhode Island Parent Information Network, Inc. Pawtucket, RI \$95,700 (Family Professional Partnership/CSHCN) Training CED/COR Pediatric and Child Psychiatry MEMORIAL HOSPITAL OF RHODE ISLAND PAWTUCKET, RI \$15,000 (Training CED/COR Pediatric and Child Psychiatry)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation RHODE ISLAND DEPT OF HUMAN SERVICES Cranston, RI \$100,000 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy RHODE ISLAND DISABILITY LAW CENTER, INC Providence, RI \$50,000 (Traumatic Brain Injury Protection and Advocacy)

### **Universal Newborn Hearing Screening**

Universal Newborn Hearing Screening and Intervention STATE OF RHODE ISLAND DEPARTMENT OF HEALTH PROVIDENCE, RI \$125,000 (Universal Newborn Hearing Screening and Intervention)

The General Assembly created the South Carolina Department of Health and Environmental Control (DHEC) in 1973 when it reunited the Board of Health and the Pollution Control Authority. The agency's mission is to promote and protect the health of the public and the environment. Every South Carolinian is touched by DHEC everyday. The agency is under the supevision of the Board of Health and Environmental Control. Seven members are appointed by the Governor representing each congressional district and one at large member. After 3 years of consolidation from 12 districts to 8 regions, the streamlined administration has resulted in efficiencies and increased effectiveness, specifically resulting in cost savings, increased accountability and improved customer service. DHEC continues to strive toward maximum usage and improvement of quality services to its customers. A focus on performance management has strengthened its activities. DHEC continues to operate local health departments and clinics to ensure that the many programs and services it provides meet the needs of the local areas. Decisions for service delivery are targeted toward best practices and are data driven. The central office is located in Columbia, the state capitol.

State Population: 4,407,709

Live Births: **62,271** 

### MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: **\$52,545,905** Other MCHB Grant Programs: **\$4,323,781** 

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$56,869,686

#### **CONTACT INFORMATION**

#### For More Information on Title V:

**Title V Program, Contact:** 

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803-898-3780 803-898-0613

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# Title V Program's Services for Children with Special Health Care Needs, contact:

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Director, CSHCN Division

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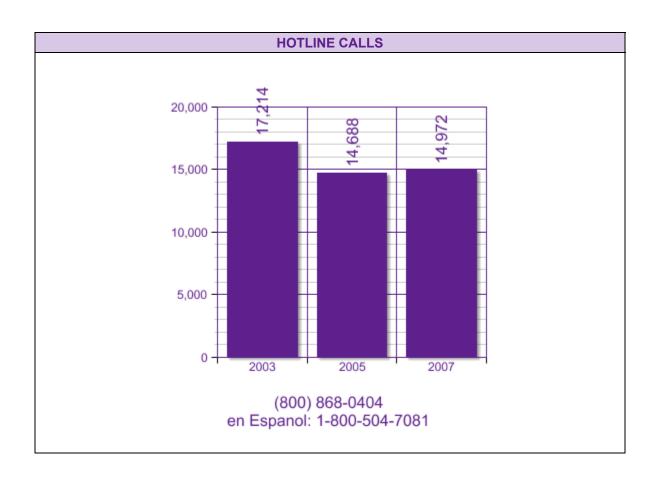
803-898-0789

803-898-0613

wallercj@dhec.sc.gov

### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group				
Populations Served	Number of Individuals Served	Expenditure	es FY 2007	
Pregnant Women	23,144	\$2,855,365	5.4%	
Infants < 1 year old	20,100	\$3,381,707	6.4%	
Children 1 to 22 years old	52,671	\$9,968,355	19%	
Children with Special Healthcare Needs	9,420	\$13,098,271	24.9%	
Others	94,916	\$21,216,367	40.4%	
Administration		\$2,025,840	3.9%	
Totals	200,251	\$52,545,905	100%	
-	. Federal Allocation 11,531,205 (21.9%) . State Funds 14,519,427 (27.6%)			
<b>a</b> 4	24% Local MCH Funds 13,248,063 (25.2%) Lunobligated Balance 429,253 (0.8%) Program Income 12,568,451 (23.9%)		2%	
<b>6</b>	. Other Funds 249,506 (0.5%)			
	By Category	of Services		
2. 3. 4.	Direct Health Care ervices \$7,946,034 (15.1%)  Enabling Services \$44,196,287 (84.1%)  Population-Based Services \$380,496 (0.7%)  Infrastructure-Building ervices \$23,088 (0%)	15.1% 84.1% 0.7% 0%		



### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	2
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	1
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	1
Family members are involved in service training of CSHCN staff and providers.	1
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	1
Family members of diverse cultures are involved in all of the above activities.	1
FY 2007 Total:	7
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	0.0	7
The ratio of the black infant mortality rate to the white infant mortality rate.	0.0	1.7
The neonatal mortality rate per 1,000 live births.	0.0	5.8
The postneonatal mortality rate per 1,000 live births.	0.0	2
The perinatal mortality rate per 1,000 live births plus fetal deaths.	*	*
The child death rate per 100,000 children aged 1 through 14.	0.0	20
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Increase the percent of newborns receiving a newborn home visit.	40.4%	65%
Increase the number of comprehensive medical home partnerships for pregnant women, children and CYSHCN.	*	90
Decrease the percent of family planning clients served by health departments whose pregnancy was unintended.	0.0%	45%
Increase the number of MCH programs that utilized research findings to better target programs to vulnerable populations.	34.3%	80%
Increase the number of health departments who implemented a review process for fetal and infant deaths.	19.6%	75%
Increase the percent of infants who are breastfed at birth and thereafter.	0.0%	60%
Increase the percent of pregnant women who are health department clients who are linked and referred for prenatal care.	100.0%	100%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	59.4%	85%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	50.6%	95%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	60.1%	90%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	59.8%	85%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	41.4%	96%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	81.6%	90%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	0.0	24
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	23.7%	50%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	0.0	3.5
The percent of mothers who breastfeed their infants at 6 months of age.	0.0%	65%
Percentage of newborns who have been screened for hearing before hospital discharge.	97.9%	100%
Percent of children without health insurance.	10.7%	7%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	100.0%	28%
Percentage of women who smoke in the last three months of pregnancy.	0.0%	10%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	0.0	5.5
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	0.0%	86%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	0.0%	90%

### 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants SOUTH CAROLINA DEPT. OF HEALTH AND ENVIRONMENT Columbia, SC \$115,000 (EMSC Partnership Grants)

EMSC Targeted Issue Grants Medical University of South Carolina Charleston, SC \$199,778 (EMSC Targeted Issue Grants)

#### **Healthy Start**

ELIMINATING DISPARITIES IN PERINATAL HEALTH SOUTH CAROLINA STATE OFFICE Lexington, SC \$1,150,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH PALMETTO HEALTH ALLIANCE Columbia, SC \$1,175,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH
PEE DEE HEALTHY START INC.
FLORENCE, SC
\$750,000
(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### Research

MCH Research UNIVERSITY OF SC RESEARCH FOUNDATION COLUMBIA, SC \$105,759 (MCH Research)

#### Title V - Community Integrated Service Systems (CISS)

Community-Based Integrated Service Systems (Local/State) STATE OF SOUTH CAROLINA Columbia, SC \$100,000 (Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

State Implementation Grants for Integrated Community Systems for CSHCN South Carolina Dept. of Health and Environment, Columbia Columbia, SC \$300,000 (State Implementation Grants for Integrated Community Systems for CSHCN)

STRENGTHENING OUR TITLE V INFO. INFRASTRUCTURE STATE OF SOUTH CAROLINA Columbia, SC \$94,644 (State Systems Development Initiative)

Training CED/COR Pediatric and Child Psychiatry MEDICAL UNIVERSITY OF SOUTH CAROLINA Charleston, SC \$15,000 (Training CED/COR Pediatric and Child Psychiatry)

### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation South Carolina Department of Disabilities and Special Needs Columbia, SC \$118,600 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy PROTECTION & ADV FOR PPL W/DISABILITIES INC Columbia, SC \$50,000 (Traumatic Brain Injury Protection and Advocacy)

#### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING STATE OF SOUTH CAROLINA Columbia, SC \$150,000 (Universal Newborn Hearing Screening and Intervention)

The South Dakota Title V Maternal and Child Health Block Grant is administered through the Department of Health, Division of Health and Medical Services, Office of Family Health (OFH). The program conducts a statewide assessment of needs, develops policies and plans and provides for programs to improve the health of women, infants, children, adolescents, and families in South Dakota. OFH is also responsible for WIC, family planning, children with special health care needs (CSHCN), perinatal health, child/adolescent health, and newborn metabolic and hearing screening. Additional information regarding MCH programs as well as other programs administered by the division (i.e., communicable disease, immunizations, Ryan White, health promotion, and disease prevention programs) can be found at www. doh.sd.gov.

State Population: **796,214** Live Births: **11,917** 

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: **\$5,455,904**Other MCHB Grant Programs: **\$1,705,144** 

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$7,161,048

#### **CONTACT INFORMATION**

#### For More Information on Title V:

#### **Title V Program, Contact:**

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605-773-5683

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#### Title V Program's Services for Children with Special Health Care Needs, contact:

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MCH Project Coordinator

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Pierre, SD 57501-2536

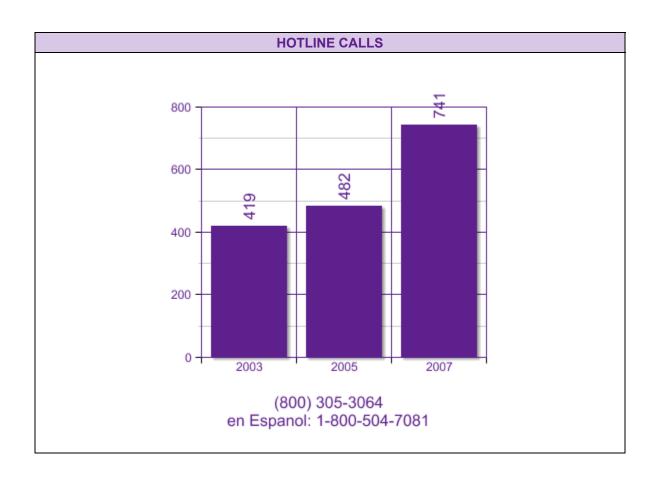
605-773-4749

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### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By N	umber of Individuals	Served and Population G	roup
Populations Served	Number of Individuals Served	Evpanditur	-
Pregnant Women	9,568	\$747,641	13.7%
Infants < 1 year old	12,814	\$331,244	6.1%
Children 1 to 22 years old	19,940	\$1,707,666	31.3%
Children with Special Healthcare Needs	15,737	\$2,244,303	41.1%
Others	14,615	\$259,140	4.7%
Administration		\$165,910	3%
Totals	72,674	\$5,455,904	100%
= 4 = 5	Unobligated Balance 656,770 (12%) Program Income 392,815 (7.2%)	7%/22%/33% —	39%
6	Other Funds 0 (0%)		
	By Catego	ory of Services	
	Direct Health Care rvices \$359,305 (6.6%)	6.6%	



### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	2
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	2
Family members of diverse cultures are involved in all of the above activities.	2
FY 2007 Total:	14
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	6.4	6
The ratio of the black infant mortality rate to the white infant mortality rate.	2.0	2.2
The neonatal mortality rate per 1,000 live births.	4.2	3
The postneonatal mortality rate per 1,000 live births.	2.3	2.9
The perinatal mortality rate per 1,000 live births plus fetal deaths.	6.8	5
The child death rate per 100,000 children aged 1 through 14.	27.8	28.5
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The rate (per 1,000 live births)of infants under age one who die as a result of Sudden Infant Death Syndrome.	0.8	0.7
Percent of pregnancies which are unintended (mistimed or unwanted) and result in live birth or abortion.	33.4%	33%
Percent of high school youth who self-report tobacco use in the past 30 days.	24.7%	24.4%
Percent of school-aged children and adolescents with a Body Mass Index (BMI) at or above the 95th percentile.	16.3%	15.4%
Percentage of mothers who breastfeed their infants at hospital discharge.	73.9%	74.1%
Percent of singleton birth mothers who achieve a recommended weight gain during pregnancy.	29.5%	30%
Percent of infants exposed to secondhand smoke.	9.4%	9.2%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	98.5%	99%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	97.3%	97.5%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	89.6%	90%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	88.0%	89%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	86.2%	86.5%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	74.9%	76%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	19.8	15
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	61.1%	62%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	5.1	5
The percent of mothers who breastfeed their infants at 6 months of age.	40.5%	44%
Percentage of newborns who have been screened for hearing before hospital discharge.	97.3%	98%
Percent of children without health insurance.	2.8%	2.6%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	34.6%	31%
Percentage of women who smoke in the last three months of pregnancy.	14.2%	14%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	22.2	21.6
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	86.6%	87.5%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	69.7%	70.3%

### 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants UNIVERSITY OF SOUTH DAKOTA Vermillion, SD \$115,000 (EMSC Partnership Grants)

#### **Healthy Start**

ELIMINATING DISPARITIES IN PERINATAL HEALTH ABERDEEN AREA TRIBAL CHAIRMAN'S HEALTH BOARD Rapid City, SD \$1,250,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### Title V - Special Projects of Regional and National Significance (SPRANS)

Health Families Expansion Program South Dakota Dental Association Pierre, SD \$49,800 (Healthy Tomorrows Partnership for Children Program)

Healthy Tomorrows Partnership for Children Program YOUTH AND FAMILY SERVICES, INC. RAPID CITY, SD \$50,000 (Healthy Tomorrows Partnership for Children Program)

SOUTH DAKOTA STATE SYSTEMS DEVELOPMENT INITIATIVE SOUTH DAKOTA STATE DEPT OF HEALTH Pierre, SD \$94,644

(State Systems Development Initiative)

Family Professional Partnership/CSHCN South Dakota Parent Connection, Inc. Sioux Falls, SD \$95,700 (Family Professional Partnership/CSHCN)

# **Traumatic Brain Injury**

Traumatic Brain Injury Protection and Advocacy SOUTH DAKOTA ADVOCACY SERVICES PIERRE, SD \$50,000 (Traumatic Brain Injury Protection and Advocacy)

# TENNESSEE

Maternal and Child Health, within the Bureau of health Services in the Tennessee Department of health, consists of two sections; Child and Adolescent Health, Abstinence Only Education, SIDS, Early Childhood Comprehensive Systems Planning, School Health, Child Fatality Review, Child Care Resource and Referral Centers, EPSDT, and Childhood Lead Poisoning Prevention. Services for CSHCN (called Children's Special Services) include; medical and other health needs; care coordination/case management; and a Parent Support Network (PEP). The Women's Health/Genetics section includes comprehensive family planning services; prenatal care, adolescent pregnancy prevention, perinatal regionalization, women's health, newborn screening follow-up, newborn hearing screening follow-up, and the network of the genetics and sickle cell centers.

State Population: 6,156,719

Live Births: **84,345** 

### MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$33,379,703 Other MCHB Grant Programs: \$1,766,196

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$35,145,899

#### **CONTACT INFORMATION**

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(615) 741-1063

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Jacqueline Johnson

Director, Children's Special Services 425 5 Th Avenue North, 5 TH Floor

Nashville, TN 37247-4701

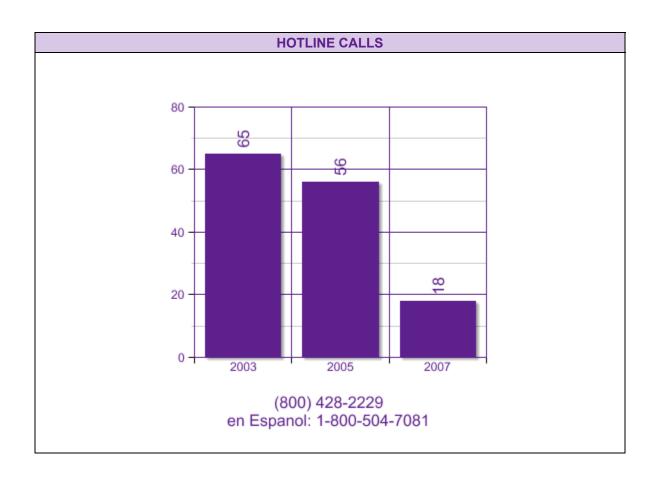
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### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By N	umber of Individuals	Served and Population Gr	oup
Populations Served	Number of Individuals Served	Expenditure	es FY 2007
Pregnant Women	16,315	\$1,134,910	3.4%
Infants < 1 year old	54,388	\$3,805,286	11.4%
Children 1 to 22 years old	251,971	\$12,327,096	36.9%
Children with Special Healthcare Needs	8,583	\$4,729,932	14.2%
Others	147,430	\$10,280,949	30.8%
Administration		\$1,101,530	3.3%
Totals	478,687	\$33,379,703	100%
■ <sup>4</sup>	. Local MCH Funds 0 (0%) . Unobligated Balance 0 (0%)	-4	4%
■ 6	Other Funds 0 (0%)		
	By Catego	ory of Services	
	Direct Health Care rvices \$24,166,905 (72.4%)		
	Enabling Services \$3,872,046 (11.6%)		
3.	Population-Based Servic \$2,803,895 (8.4%)	es / 72.4%	
	Infrastructure-Building rvices \$2,536,857 (7.6%)	11.6% 8.4% 7.6%	



# TENNESSEE

### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	3
FY 2007 Total:	18
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

# TENNESSEE

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	8.2	7
The ratio of the black infant mortality rate to the white infant mortality rate.	2.4	2.1
The neonatal mortality rate per 1,000 live births.	5.1	4.3
The postneonatal mortality rate per 1,000 live births.	3.1	2.6
The perinatal mortality rate per 1,000 live births plus fetal deaths.	9.9	8
The child death rate per 100,000 children aged 1 through 14.	20.1	15
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Reduce the percentage of high school students using tobacco (cigarettes and smokeless tobacco).	27.4%	26%
Reduce the percentage of high school students using alcohol.	41.8%	34%
Reduce the incidence of maltreatment of children younger than age 18 including physical, sexual, emotional abuse and neglect to a rate no more than 8 per 1,000.	10.7	7
Increase percentage of children with complete EPSDT annual examinations by 3 percent each year.	73.3%	95%
Reduce the proportion of teens and young adults ages 15 to 24 with chlamydia trachomatis infections attending family planning clinics	6.5	5.2
Reduce the number of babies born prematurely.	11.7%	10%
Increase percentage of adolescents with complete Early Periodic Screening, Diagnosis and Treatment(EPSDT) annual examinations by 5% each year.	39.4%	65%
Reduce the number of pregnant women who smoke and or use illicit drugs.	10.1%	5%
Reduce the number of overweight and obese children and adolescents.	39.9%	25%
Increase the percentage of youth with special health care needs, age 14 and older, who receive formal plans for transition to adulthood.	100.0%	100%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	60.7%	62%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	52.7%	65%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	67.7%	70%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	91.8%	93%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	100.0%	100%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	86.7%	89%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	27.8	25
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	21.8%	25%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	3.3	2
The percent of mothers who breastfeed their infants at 6 months of age.	31.4%	50%
Percentage of newborns who have been screened for hearing before hospital discharge.	92.5%	99%
Percent of children without health insurance.	6.4%	6%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	34.0%	27%
Percentage of women who smoke in the last three months of pregnancy.	19.4%	4%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	5.4	5
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	68.5%	80%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	63.7%	90%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC PARTNERSHIP GRANTS Vanderbilt University School of Medicine Nashville, TN \$115,000 (EMSC Partnership Grants)

#### **Healthy Start**

HEALTHY START INITIATIVE: ELIMINATING DISPARITIES IN PERINATAL HEALTH SHELBY COUNTY GOVERNMENT MEMPHIS, TN \$746,834 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
TENNESSEE STATE DEPARTMENT OF HEALTH
Nashville, TN
\$100,000
(Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

STATE SYSTEMS DEVELOPMENT INITIATIVE (SSDI) TENNESSEE STATE DEPARTMENT OF HEALTH Nashville, TN \$94,644 (State Systems Development Initiative)

Genetic Services Project St. Jude Children's Research Hospital Memphis, TN \$183,000 (Genetic Services Project)

HLTH CARE INFORMATION & EDUCATION FOR FAMILIES OF CHILDREN W/SPECIAL HLTH CARE N
TENNESSEE DISABILITY COALITION
NASHVILLE, TN
\$95,700
(Family Professional Partnership/CSHCN)

Continuing Education/Distance Learning
UNIVERSITY OF TENNESSEE HEALTH SCIENCES CENTER
Memphis, TN
\$98,992
(MCH Distance Learning)

MCH Knowledge to Practice University of Tennessee at Chatanooga Chattanooga, TN \$29,999 (MCH Continuing Education)

### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation Tennessee Department of Health Nashville, TN \$100,000 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy Disability Law & Advocacy Center of Tennessee Nashville, TN \$52,027 (Traumatic Brain Injury Protection and Advocacy)

#### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING TENNESSEE STATE DEPARTMENT OF HEALTH Nashville, TN \$150,000 (Universal Newborn Hearing Screening and Intervention)

The Texas Department of State Health Services (DSHS) is the state agency responsible for administration of the Title V program and is one of four state health and human service agencies under the umbrella of the Health and Human Services Commission. Within DSHS, the Division for Family and Community Health Services is responsible for most women's and children's programs. The Division administers the Newborn Screening and the Texas Early Hearing Detection and Intervention Program; the Genetic Services Program; the Family Planning Program under Titles V, X, XIX and XX; Texas Health Steps (EPSDT) Medical, Dental, and Medical Case Management; the Children with Special Health Care Needs Services Program (CSHCN SP); the Oral Health Program; the Vision and Hearing Screening Program; the Program for the Amplification for Children of Texas; Women, Infants and Children Nutrition Program (WIC); the Breast and Cervical Cancer Services Program; Title V Women's Health and Child Health Programs; Texas Primary Care Office; the Primary Health Care Program; and the County Indigent Health Care Program.

State Population: 23,904,380

Live Births: **399,612** 

# MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$86,076,731 Other MCHB Grant Programs: \$8,644,993

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$94,721,724

#### **CONTACT INFORMATION**

#### For More Information on Title V:

#### **Title V Program, Contact:**

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512-458-7443
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# Title V Program's Services for Children with Special Health Care Needs, contact:

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State CSHCN Director

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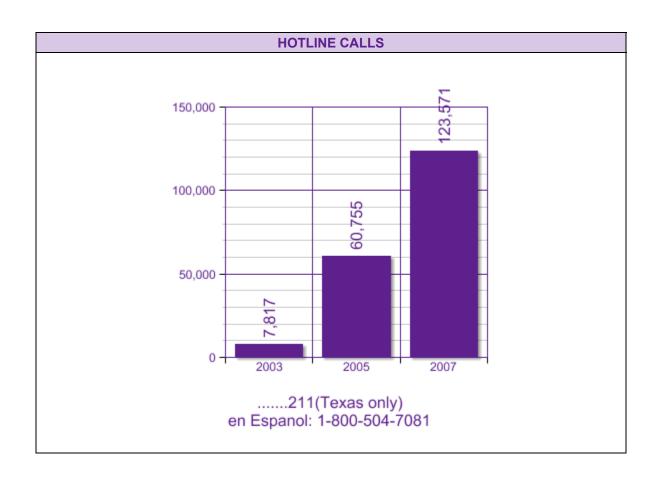
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## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group			
Populations Served	Number of Individuals Served	Expenditure	s FY 2007
Pregnant Women	159,425	\$15,567,424	18.1%
Infants < 1 year old	414,161	\$152,145	.2%
Children 1 to 22 years old	6,073,452	\$21,388,600	24.8%
Children with Special Healthcare Needs	81,622	\$36,137,635	42%
Others	137,412	\$7,414,872	8.6%
Administration		\$5,416,055	6.3%
Totals	6,866,072	\$86,076,731	100%
2 3	Federal Allocation 30,877,981 (35.9%)  State Funds 43,239,363 (50.2%)  Local MCH Funds 0 (0%)  Unobligated Balance 9,060,369 (10.5%)	0% —	%
	Program Income 2,577,984 (3%) Other Funds 321,034 (0.4%)	3%	
	By Catego	ory of Services	_
2. 3. 4.	Direct Health Care rivices \$58,046,356 (67.4%)  Enabling Services \$6,805,843 (7.9%)  Population-Based Service \$11,740,467 (13.6%)  Infrastructure-Building rivices \$9,484,065 (11%)	7.9% 13.6% 11%	



## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	2
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	2
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	2
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	0
Family members of diverse cultures are involved in all of the above activities.	2
FY 2007 Total:	10
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	6.5	5.5
The ratio of the black infant mortality rate to the white infant mortality rate.	2.7	1.7
The neonatal mortality rate per 1,000 live births.	4.2	3.5
The postneonatal mortality rate per 1,000 live births.	2.1	2
The perinatal mortality rate per 1,000 live births plus fetal deaths.	9.7	8.9
The child death rate per 100,000 children aged 1 through 14.	21.4	20
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Change in percentage of CSHCN living in congregate care settings as percent of base year 2003	99.4%	80%
The percent of obesity among women ages 18 to 44	25.5%	20.5%
Percent of licensed child care centers in metropolitan counties that have no deficiencies in operational policies that address health and safety of children.	30.1%	92%
The proportion of women between the ages of 18 and 44 who are current cigarette smokers.	19.3%	14.5%
The prevalence of at-risk for obesity and obesity among adolescents enrolled in high school	31.6%	22%
The percent of children provided preventive dental services.	42.1%	45%
Rate of family violence incidents involving females victims per 1,000 women in Texas	13.1	11.1

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	57.9%	58.4%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	46.3%	46.8%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	58.2%	58.7%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	88.2%	88.7%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	37.1%	37.6%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	76.4%	80%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	33.6	30
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	22.7%	35%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	4.8	4.5
The percent of mothers who breastfeed their infants at 6 months of age.	34.2%	39%
Percentage of newborns who have been screened for hearing before hospital discharge.	95.0%	96.5%
Percent of children without health insurance.	20.7%	18%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	21.3%	20%
Percentage of women who smoke in the last three months of pregnancy.	7.8%	7.1%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	6.4	4
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	49.7%	55%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	72.2%	75%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants
Texas Department of State Health Services
Austin, TX
\$115,000
(EMSC Partnership Grants)

EMSC Targeted Issue Grants
The University of Texas Southwestern Medical Center at Dallas
Dallas, TX
\$199,999
(EMSC Targeted Issue Grants)

EMSC Targeted Issue Grants Baylor College of Medicine Houston, TX \$198,645 (EMSC Targeted Issue Grants)

#### **Healthy Start**

ELIMINATING DISPARITIES IN PERINATAL HEALTH NEIGHBORHOOD CENTERS, INC.
Bellaire, TX
\$750,000
(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

HEALTHY START INITIATIVE SAN ANTONIO CITY DEPARTMENT OF FINANCE SAN ANTONIO, TX \$750,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH CATHOLIC CHARITIES DIOCESE OF FORT WORTH, INC. FORT WORTH, TX \$750,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH DALLAS COUNTY HOSPITAL DISTRICT DALLAS, TX \$900,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

HEALTHY START INITIATIVE- ELIMINATING DISPARITIES IN PERINATAL HEALTH -

**BORDER H** 

**BAPTIST CHILDRENS HOME MINISTRIES** 

San Antonio, TX

\$870,000

(Disparities in Perinatal Health-Border Initiatives)

HEALTHY START INITIATIVE- ELIMINATING DISPARITIES IN PERINATAL HEALTH -

**BORDER H** 

VALLEY PRIMARY CARE NETWORK

Harlingen, TX

\$844,425

(Disparities in Perinatal Health-Border Initiatives)

#### Research

IMPROVING ADOLESCENT ADHERENCE TO HORMONAL CONTRACEPTION

UNIV OF TEXAS MEDICAL BRANCH

GALVESTON, TX

\$254,991

(MCH Research)

### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)

TEXAS HEALTH & HUMAN SERVICES COMMISSION

Austin, TX

\$140.000

(Community-Based Integrated Service Systems (Local/State))

### Title V - Special Projects of Regional and National Significance (SPRANS)

Healthy Tomorrows Partnership for Children Program

People's Community Clinic

Austin, TX

\$50,000

(Healthy Tomorrows Partnership for Children Program)

TEXAS STATE SYSTEMS DEVELOPMENT INITIATIVE PROJECT

Texas Department of State Health Services

Austin, TX

\$94.570

(State Systems Development Initiative)

REGION VI COMPREHENSIVE HEMOPHILIA PROGRAM

UNIVERSITY OF TEXAS HSC AT HOUSTON

Houston, TX

\$497,344

(Hemophilia Treatment Centers (SPRANS))

Family Professional Partnership/CSHCN

Texas Parent to Parent

Austin, TX

\$95.700

(Family Professional Partnership/CSHCN)

LEADERSHIP EDUCATION IN ADOLESCENT HEALTH BAYLOR COLLEGE OF MEDICINE Houston, TX \$372,000 (Leadership Education in Adolescent Health)

TRAINING LONG TERM - NUTRITION BAYLOR COLLEGE OF MEDICINE Houston, TX \$135,000 (Leadership Training in Pediatric Nutrition)

Heritable Disorders Texas Health Institute Austin, TX \$435,961 (Heritable Disorders)

NATIONAL NEWBORN SCREENING AND GENETICS CENTER UNIVERSITY OF TEXAS HEALTH SCI CTR SAN ANTONIO, TX \$850,000 (National Newborn Screening and Genetics Resource Center)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation
Texas Department of State Health Services
Austin, TX
\$118,000
(Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy ADVOCACY INCORPORATED AUSTIN, TX \$87,128 (Traumatic Brain Injury Protection and Advocacy)

## **Universal Newborn Hearing Screening**

Universal Newborn Hearing Screening and Intervention Texas Department of Assistive and Rehabilitative Services Austin, TX \$136,230 (Universal Newborn Hearing Screening and Intervention)

The Utah Department of Health is the state Title V agency. The Department's Division of Community and Family Health Services includes all Title V programs in Utah as mandated by state and federal law, including Children with Special Health Care Needs. The Division also is responsible for the Individuals with Disabilities Education Act (IDEA) - Part C, the WIC program funded through the U.S. Department of Agriculture, the Immunization Program funded through the Centers for Disease Control and Prevention (CDC), and the CDC Preventive Block Grant, which includes program activities directed, in part, to MCH populations. Title V-funded programs include: Reproductive Health, Child Adolescent and School Health; Data Resources, Oral Health, Hearing, Speech and Vision, Newborn Screening, Birth Defects and Genetics, Violence and Injury Prevention, Child Development Clinic, Neonatal Follow-up, Community-based Services, and School Age and Specialty Services. Programs that provide direct services include: Hearing, Speech and Vision, Newborn Screening, Neonatal Follow-up, Community-based Services, and School Age and Specialty Services. In addition, some Title V funds are allocated for health promotion efforts, such as obesity prevention in children. With Title V administering other federally funded programs, such as WIC, Immunizations and part C, the staff of these programs are integrated into the "MCH" world to maximize resources and to promote more integration of services. For example, WIC staff are involved in working on the national and state specific performance measures related to healthy weight in women and childhood obesity. The expertise of WIC staff in nutrition and breastfeeding is very helpful for developing strategies that impact the WIC population, but also the general population. We have been able to provide WIC with knowledge and expertise in areas of MCH that they may not be so familiar with, making the relationship mutually beneficial. The same is true for MCH and the other federally funded programs, such as immunizations, etc. We promote collaboration among programs in the agency as well as outside the agency. It provides a more efficient system, a much richer plan for action and also increases skills and knowledge of staff that otherwise would not happen. We are very fortunate to have the state Medicaid agency in the Department of Health and have a productive working relationship with them.

State Population: 2.645.330

Live Births: **53,499** 

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$52,434,471 Other MCHB Grant Programs: \$4,252,443

Bioterrorism Grant Program: **\$0** 

Total MCH Partnership Funds: \$56,686,914

## **CONTACT INFORMATION**

#### For More Information on Title V:

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801-538-9409

nanstreeter@utah.gov

# Title V Program's Services for Children with Special Health Care Needs, contact:

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**CSHCN** Director

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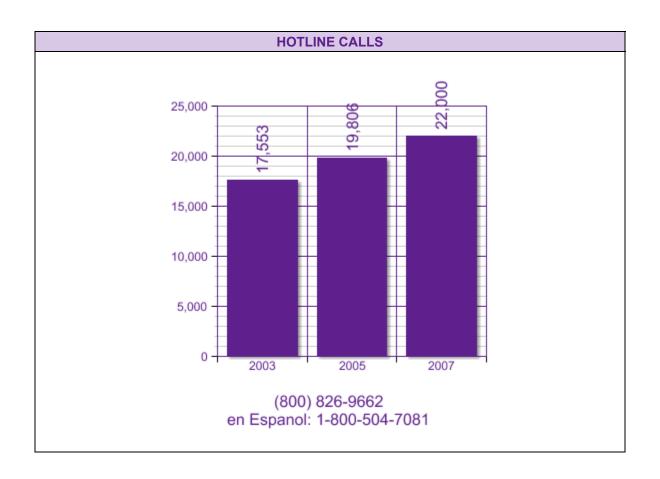
801-584-8202

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## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group			
Populations Served	Number of Individuals Served	Expenditure	es FY 2007
Pregnant Women	7,442	\$6,636,539	12.7%
Infants < 1 year old	54,532	\$6,972,260	13.3%
Children 1 to 22 years old	49,652	\$22,447,411	42.8%
Children with Special Healthcare Needs	5,079	\$12,385,097	23.6%
Others	3,348	\$2,944,772	5.6%
Administration		\$1,048,392	2%
Totals	120,053	\$52,434,471	100%
-	Federal Allocation 5,185,321 (9.9%) State Funds 19,741,724 (37.7%)		0%
_ 2	5,185,321 (9.9%) . State Funds	1	0%
	. Local MCH Funds 5,462,581 (10.4%)	7%	
		4%—	8%
	7,165,556 (13.7%)	2%	
6	. Other Funds 13,926,425 (26.6%)		
	By Catego	ry of Services	
	Direct Health Care ervices \$9,148,811 (17.4%)	17,4%	
2.	Enabling Services \$18,937,324 (36.1%)	11.4%	
3.	Population-Based Service \$15,133,366 (28.9%)	36.1%	
	Infrastructure-Building ervices \$9,214,970 (17.6%)	28.9%	



## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	2
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	2
Family members of diverse cultures are involved in all of the above activities.	2
FY 2007 Total:	15
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	5.0	4.7
The ratio of the black infant mortality rate to the white infant mortality rate.	2.9	3.8
The neonatal mortality rate per 1,000 live births.	3.5	3.2
The postneonatal mortality rate per 1,000 live births.	1.6	1.3
The perinatal mortality rate per 1,000 live births plus fetal deaths.	4.7	3.5
The child death rate per 100,000 children aged 1 through 14.	17.9	17.8
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The percent of women of reproductive age (18-44) who are uninsured.	16.1%	12%
The proportion of pregnancies that result in a live birth that are intended.	65.8	66.3
The percent of women who are at a normal weight prior to pregnancy.	55.9%	57.2%
The percent of pregnant women with appropriate weight gain who deliver live born infants.	33.0%	35.1%
The proportion of women who deliver a live born infant reporting postpartum depression who seek help from a doctor, nurse or other health care worker.	38.6%	41%
The percent of children who are at risk of overweight and overweight.	22.5%	21%
The percent of youth during the last 12 months who feel so sad or hopeless almost every day for two weeks or more in a row that they stopped doing usual activities.	25.9%	27%
The percent of children six through nine years of age enrolled in Medicaid receiving a dental visit in the past year.	51.2%	55%
The percent of children with special health care needs in the rural areas of the state receiving direct clinical services through the state CSHCN program.	11.1	13

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	55.1%	55%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	52.3%	51%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	59.5%	59%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	86.2%	84%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	42.5%	40%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	80.4%	85%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	16.6	16.2
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	45.1%	50%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	2.9	4.1
The percent of mothers who breastfeed their infants at 6 months of age.	55.6%	58%
Percentage of newborns who have been screened for hearing before hospital discharge.	98.0%	98%
Percent of children without health insurance.	9.1%	8.9%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	21.8%	21.5%
Percentage of women who smoke in the last three months of pregnancy.	4.3%	3.8%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	11.3	13
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	84.4%	86%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	79.0%	79.4%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants Utah State Department of Health Salt Lake City, UT \$115,000 (EMSC Partnership Grants)

EMERGENCY MEDICAL SERVICE FOR CHILDREN NETWORK DEVELOPMENT UNIVERSITY OF UTAH
Salt Lake City, UT
\$1,113,499
(Emergency Medical Services for Children: Network Development Demonstration Project)

National Emergency Medical Services for Children (EMSC) Data Analysis Resource Center Demonstration

UNIVERSITY OF UTAH SALT LAKE CITY, UT

\$1,200,000

(National Emergency Medical Services for Children (EMSC) Data Analysis Resource Center Demonstration)

#### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
UTAH DEPARTMENT OF HEALTH
Salt Lake City, UT
\$140,000
(Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

State Agency Partnerships for Promoting Child and Adolescent Mental Health Utah Department of Health Salt Lake City, UT \$85,000 (State Agency Partnerships for Promoting Child and Adolescent Mental Health)

Healthy Tomorrows Partnership for Children Program UNIVERSITY OF UTAH Salt Lake City, UT \$50,000 (Healthy Tomorrows Partnership for Children Program)

UTAH STATE SYSTEMS DEVELOPMENT INITIATIVE UTAH DEPARTMENT OF HEALTH Salt Lake City, UT \$94,644 (State Systems Development Initiative)

Family Professional Partnership/CSHCN Utah Parent Center Salt Lake City, UT \$95,700 (Family Professional Partnership/CSHCN)

Integrated Community Service Systems /CSHCN UTAH STATE UNIVERSITY Logan, UT \$400,000 (Integrated Community Service Systems /CSHCN)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation State of Utah Salt Lake City, UT \$118,600 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy DISABILITY LAW CENTER Salt Lake City, UT \$50,000 (Traumatic Brain Injury Protection and Advocacy)

#### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING UTAH DEPARTMENT OF HEALTH Salt Lake City, UT \$150,000 (Universal Newborn Hearing Screening and Intervention)

Universal Newborn Hearing Screening - Cooperative Agreement UTAH STATE UNIVERSITY Logan, UT \$640,000 (Universal Newborn Hearing Screening - Cooperative Agreement)

The Virginia Department of Health (VDH) is authorized by Section 32.1-77 of the Code of Virginia to administer the Maternal and Child Health Services Block Grant funds. Within the department, the block grant is managed by the Office of Family Health Services. The services provided with this funding include preventive and primary care srvices for pregnant women and mothers, preventive and primary care services for infants, children and adolescents, and non-pregnant women of childbearing age. Services are also provided for children with special health care needs (CSHCN).

State Population: **7,712,091** Live Births: **107,817** 

# MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$26,025,535 Other MCHB Grant Programs: \$3,353,664

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$29,379,199

#### **CONTACT INFORMATION**

#### For More Information on Title V:

#### **Title V Program, Contact:**

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## Title V Program's Services for Children with Special Health Care Needs, contact:

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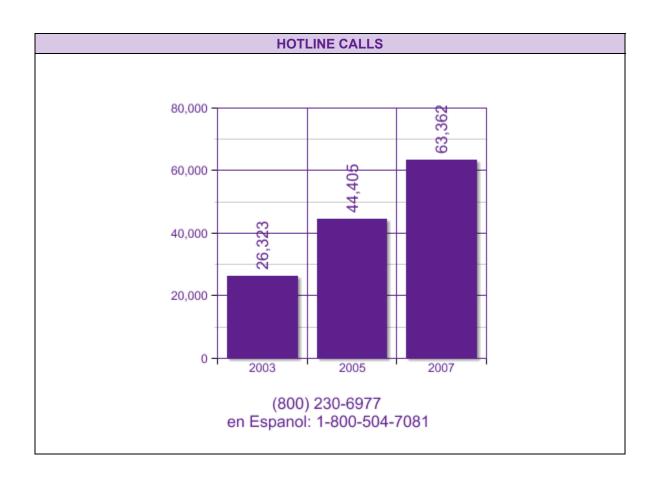
(804) 864-7704

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www.vahealth.org

## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By N	umber of Individuals Se	rved and Population Gro	oup
Populations Served	Number of Individuals Served	Expenditure	-
Pregnant Women	10,676	\$457,493	1.8%
Infants < 1 year old	106,474	\$4,562,671	17.5%
Children 1 to 22 years old	58,120	\$7,641,380	29.4%
Children with Special Healthcare Needs	9,773	\$11,821,174	45.4%
Others	46,679	\$1,542,817	5.9%
Administration		\$0	0%
Totals	231,722	\$26,025,535	100%
■ 4 ■ 5	0%  3. Local MCH Funds 0 (0%)  4. Unobligated Balance 0 (0%)  5. Program Income 60,765 (0.2%)		3%
<b>=</b> 6	6. Other Funds 0 (0%)		
By Category of Services			
	by category	of Services	



## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	2
FY 2007 Total:	16
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	7.4	6.5
The ratio of the black infant mortality rate to the white infant mortality rate.	2.3	1.6
The neonatal mortality rate per 1,000 live births.	5.1	4.4
The postneonatal mortality rate per 1,000 live births.	2.3	2
The perinatal mortality rate per 1,000 live births plus fetal deaths.	6.5	6.1
The child death rate per 100,000 children aged 1 through 14.	16.9	12.5
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The percent of children and adolescents who have a specific source of ongoing primary care for coordination of their preventive and episodic health care.	85.1%	85%
The percent of children who are overweight or obese.	32.4%	13%
The percent of newborns who fail the hearing screening and who receive a diagnosis before three months of age.	62.8%	95%
The unintentional injury hospitalization rate for children aged 1-14 per 100,000.	120.1	130
The percent of low income children (ages 0-5) with dental caries.	21.3%	11.9%
The ratio of dentists to population in underserved areas.	0.3	0.8
The proportion of children (0-21 years) who receive genetic testing.	34.5%	42%
The percent of women reporting substance use during pregnancy.	6.7	5.2
The percent of women with an ongoing source of primary care.	88.9%	94%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	59.8%	65%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	43.9%	60%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	63.7%	75%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	89.6%	90%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	37.8%	45%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	86.2%	88%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	16.6	15.2
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	29.6%	40%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	2.1	1.8
The percent of mothers who breastfeed their infants at 6 months of age.	49.8%	53%
Percentage of newborns who have been screened for hearing before hospital discharge.	96.7%	100%
Percent of children without health insurance.	7.3%	4.8%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	32.4%	28%
Percentage of women who smoke in the last three months of pregnancy.	6.3%	5.8%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	5.4	5.1
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	83.7%	92.5%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	83.5%	92%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants VIRGINIA STATE DEPT OF HEALTH Richmond, VA \$115,000 (EMSC Partnership Grants)

#### **Healthy Start**

RICHMOND HEALTHY START INITIATIVE RICHMOND HEALTHY START INITIATIVE RICHMOND, VA \$900,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH VIRGINIA STATE DEPARTMENT OF HEALTH RICHMOND, VA \$1,050,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

#### Research

MCH Research Ambulatory Pediatric Association Mc Lean, VA \$165,199 (MCH Research)

# Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
VIRGINIA STATE DEPT OF HEALTH
Richmond, VA
\$140,000
(Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

Improving Understanding of Maternal and Child Health and Health Care Issues ASSOC OF STATE/TERRITORIAL HEALTH OFFICIALS Arlington, VA \$200,000 (Improving Understanding of Maternal and Child Health and Health Care Issues)

(improving officerstanding of Maternal and Child Health and Health Care issues

STATE SYSTEMS DEVELOPMENT INITIATIVE VIRGINIA STATE DEPARTMENT OF HEALTH RICHMOND, VA \$94,644 (State Systems Development Initiative)

Children's Oral Healthcare Access Program Virginia Department of Health Richmond, VA \$159,978 (Childrens Oral Healthcare Access Program)

MCH Knowledge to Practice VIRGINIA COMMONWEALTH UNIVERSITY RICHMOND, VA \$30,000 (MCH Continuing Education)

Sudden Infant Death Syndrome Association of SIDS and Infant Mortality Programs McLean, VA \$200,000 (Sudden Infant Death Syndrome)

### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation
VIRGINIA DEPT OF REHABILITATIVE SERVICES
Richmond, VA
\$118,600
(Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy Virginia Office for Protection & Advocacy Richmond, VA \$55,243 (Traumatic Brain Injury Protection and Advocacy)

## **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING VIRGINIA STATE DEPT OF HEALTH Richmond, VA \$125,000 (Universal Newborn Hearing Screening and Intervention)

# **VIRGINISLANDS**

The Department of Health (DOH) functions as both the state regulatory agency and the territorial public health agency for the U.S. Virgin Islands. As set forth by the Virgin Islands Code, Titles 3 and 19, the Department of Health (DOH) has direct responsibility for conducting programs of preventive medicine, including special programs in Maternal and Child Health, Family Planning, Environmental Sanitation, Mental Health, and Drug and Substance Abuse Prevention. The Virgin Island Department of Health is designated as the agency in the Virgin Islands for administering the Maternal and Child Health and Children With Special Health Care Needs Program (MCH & CSHCN) pursuant to Title 19, Chapter 7, Section 151 of the Virgin Islands Code. The MCH & CSHCN Program is a unit within the Department of Health, one of 14 government departments. The Department of Health is headed by the Commissioner of Health. The Title V MCH & CSHCN Program is administered as one integrated program within the Department of Health. The MCH & CSHCN Program is operated as a single organizational unit and serves as both local and state agency.

The MCH & CSHCN Program reports directly to the Deputy Commissioner for Public Health Services. This single State agency is authorized to administer Title V funds and is responsible for both Maternal and Child Health and Special Needs Children Services. The Administrative Unit is composed of the Director of MCH & CSHCN, Program Administrator St. Croix who has responsibility for clinic services management, Territorial Financial Manager St. Thomas who has responsibility for all fiscal, budgetary and financial management and Office Manager, St. Thomas.

State Population: 108,448

Live Births: 1,431

# MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$2,882,891 Other MCHB Grant Programs: \$135,000

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$3,017,891

#### **CONTACT INFORMATION**

#### For More Information on Title V:

## **Title V Program, Contact:**

Vivian I. Ebbesen-Fludd, RN, BSN,MS Commissioner of Health 9048 Sugar Estate St. Thomas, VI 00802 (340) 774-0117 (340) 777-4001

CommissionerFludd@usvi-doh.org

# Title V Program's Services for Children with Special Health Care Needs, contact:

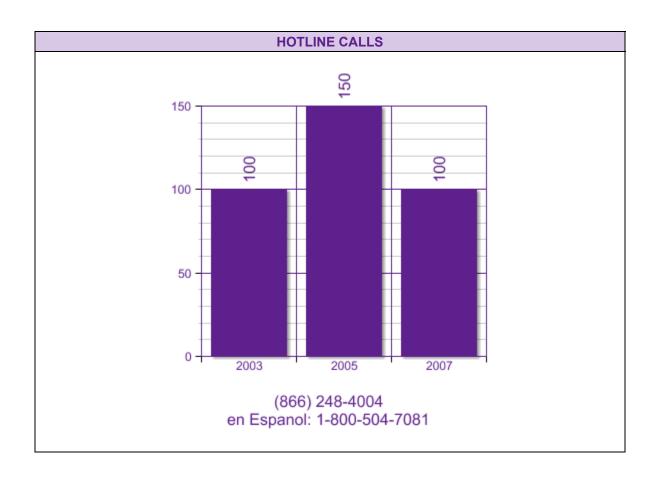
C. Patricia Penn Director, MCH & CSHCN Program #2C Contant, AQ Bldg., 2nd Floor St. Thomas, VI 00802

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patricia.penn@usvi-doh.org

## TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By N	umber of Individuals Se	rved and Population Gr	oup
Populations Served	Number of Individuals Served	Expenditure	-
Pregnant Women	732	\$460,048	16%
Infants < 1 year old	1,772	\$460,048	16%
Children 1 to 22 years old	3,412	\$820,288	28.5%
Children with Special Healthcare Needs	1,248	\$854,218	29.6%
Others	852	\$0	0%
Administration		\$288,289	10%
Totals	8,016	\$2,882,891	100%
■ <sup>4</sup>	4% Local MCH Funds 0 (0%) Unobligated Balance 0 (0%) Program Income 119,700 (4.2%)		3%
6	Other Funds 0 (0%)		
	By Category	of Services	
	Direct Health Care ervices \$2,647,891 (91.8%)		



# **VIRGINISLANDS**

## **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	1
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	0
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	0
Family members of diverse cultures are involved in all of the above activities.	2
FY 2007 Total:	8
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

# **VIRGINISLANDS**

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	5.1	5
The ratio of the black infant mortality rate to the white infant mortality rate.	9.6	*
The neonatal mortality rate per 1,000 live births.	2.8	4
The postneonatal mortality rate per 1,000 live births.	2.3	1
The perinatal mortality rate per 1,000 live births plus fetal deaths.	6.8	7
The child death rate per 100,000 children aged 1 through 14.	15.5	20
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The percent of CSHCN clients who access family support services.	30.0%	60%
Increase the percent of CSHCN families' participation in transition planning to at least 50%.	1.2%	50%
The percent of CSHCN who receive coordinated, comprehensive care in a medical home.	38.1%	65%
The percent of teen mothers who received parenting skills training.	36.2%	40%
Percent of infants identified with hearing loss who are receiving appropriate intervention services by age 6 months.	*	95
Increase the rate of pregnant women who enroll in prenatal care in the first trimester.	415.9	700
The rate per 10000 of hospitalizations due to asthma in children 0-14.	2.0	5

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	86.7%	95%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	20.0%	40%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	38.1%	60%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	25.0%	40%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	14.8%	40%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	1.2%	50%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	80.0%	75%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	16.4	15
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	1.1%	20%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	11.6	1
The percent of mothers who breastfeed their infants at 6 months of age.	43.7%	50%
Percentage of newborns who have been screened for hearing before hospital discharge.	79.3%	95%
Percent of children without health insurance.	8.8%	10%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	4.4%	10%
Percentage of women who smoke in the last three months of pregnancy.	0.7%	1%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	0.0	1
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	0.0%	0%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	41.6%	75%

# **VIRGINISLANDS**

# 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

## **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants VI DEPARTMENT OF HEALTH St. Thomas, VI \$115,000 (EMSC Partnership Grants)

### **Traumatic Brain Injury**

Traumatic Brain Injury Protection and Advocacy VI ADVOCACY INCORPORATED FREDERIKSTED, VI \$20,000 (Traumatic Brain Injury Protection and Advocacy)

Title V is administered by the Vermont Department of Health, within the Agency of Human Services. Title V related services include: Direct services: multi disciplinary clinic-based services to CSHN of all ages, immunization services for children with marginal access to preventative health care, collaboration with Healthy Babies, Kids, and Families for care coordination and services for pregnant women and young children. Enabling services: outreach, information, and referral and administrative case management for children enrolled in Medicaid, nursing, social work, care coordination, and respite care for CSHN, Medicaid prior authorization of certain medical and dental services (in collaboration with Medicaid and managed care,) primary care medical home support. Population Services: Newborn metabolic and hearing screening, breastfeeding support programs, lead screening. Infrastructure: Statewide interagency and community based health care system and public health planning for the MCH population, including CSHCN.

State Population: 621,254

Live Births: 6,509

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: **\$3,913,448**Other MCHB Grant Programs: **\$613,519** 

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$4,526,967

## **CONTACT INFORMATION**

### For More Information on Title V:

### **Title V Program, Contact:**

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Burlington, VT 05401
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# Title V Program's Services for Children with Special Health Care Needs, contact:

Dr. Carol Hassler

Medical Director, CSHN

VDH, 108 Cherry St

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802-863-7338

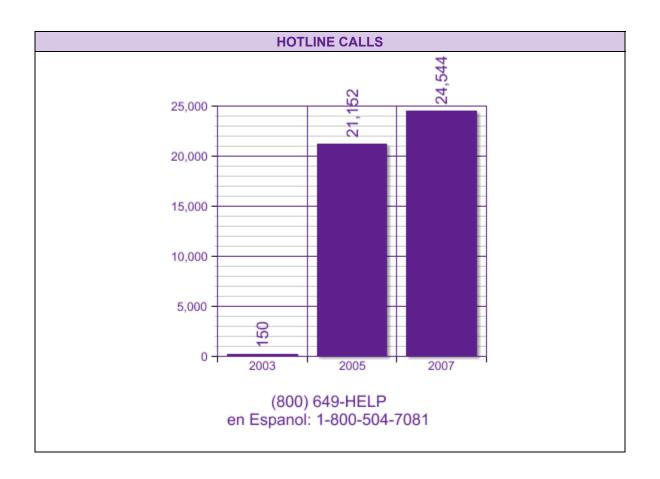
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# TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group			
Populations Served	Number of Individuals Served	Expenditure	s FY 2007
Pregnant Women	7,898	\$42,443	1.1%
Infants < 1 year old	6,339	\$68,518	1.8%
Children 1 to 22 years old	173,599	\$1,658,156	42.4%
Children with Special Healthcare Needs	4,825	\$1,999,576	51.1%
Others	1	\$0	0%
Administration		\$144,755	3.7%
Totals	192,662	\$3,913,448	100%
= <sup>2</sup>	. Federal Allocation 1,705,136 (43.6%) . State Funds 2,208,312 (56.4%) . Local MCH Funds 0 (0%) . Unobligated Balance 0 (0%)		4%
	Program Income 0 (0%) Other Funds 0 (0%) By Category	y of Sorvices	
	by Category	OI Services	
2. 3. 4.	Direct Health Care ervices \$2,096,160 (53.6%)  Enabling Services \$1,109,726 (28.4%)  Population-Based Services \$421,628 (10.8%)  Infrastructure-Building ervices \$285,934 (7.3%)	53.6% 28.4% 10.8%	



### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	2
FY 2007 Total:	16
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	*	5
The ratio of the black infant mortality rate to the white infant mortality rate.	*	*
The neonatal mortality rate per 1,000 live births.	*	3.2
The postneonatal mortality rate per 1,000 live births.	*	1
The perinatal mortality rate per 1,000 live births plus fetal deaths.	*	5.5
The child death rate per 100,000 children aged 1 through 14.	*	14
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The percent of Vermont women who indicate that their pregnancies are intended.	67.6%	75%
The percent of licensed child care centers serving children age birth to five who have on-site consultation.	16.2%	65%
The percent of youth who do not binge drink on alcoholic beverages.	77.0%	85%
The percent of women of childbearing age who consume at least two servings of fruit and three servings of vegetables daily.	35.0%	38%
The percent of youth who feel like they matter to people.	47.4%	50%
The percent of Vermont towns (population of 2,000 or more) who have at least one organized physical activity program in place that is open to all and promoted as a family activity	40.7%	50%
The percent of children with SSI who receive an annual care plan.	11.2%	15%
The percent of low income children (with Medicaid) who utilize dental services in a year.	50.2%	55%
The percent of children with emotional, developmental, or behavioral problems that require treatment or counseling who received needed mental health services in the past year.	70.0%	75%
The percent of one year old children who are screened for blood lead poisoning.	80.0%	90%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	59.8%	70%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	51.6%	65%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	69.4%	75%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	89.3%	95%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	52%	60%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	*	*
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	*	5
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	66.3%	75%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	*	2
The percent of mothers who breastfeed their infants at 6 months of age.	55.3%	65%
Percentage of newborns who have been screened for hearing before hospital discharge.	*	98%
Percent of children without health insurance.	*	2%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	28.7%	22%
Percentage of women who smoke in the last three months of pregnancy.	*	10%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	*	3
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	*	95%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	*	95%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants STATE OF VERMONT Burlington, VT \$114,575 (EMSC Partnership Grants)

#### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
VERMONT STATE DEPARTMENT OF HEALTH
Waterbury, VT
\$140,000
(Community-Based Integrated Service Systems (Local/State))

## Title V - Special Projects of Regional and National Significance (SPRANS)

VERMONT STATE SYSTEMS DEVELOPMENT INITIATIVE VERMONT STATE AGENCY FOR HUMAN SERVICES Burlington, VT \$94,644 (State Systems Development Initiative)

HEALTH CARE INFO & EDUCATION FOR FAMILIES OF CHILDREN WITH SPECIAL HEALTH CARE N
PARENT TO PARENT OF VERMONT
Williston, VT
\$95,700
(Family Professional Partnership/CSHCN)

### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation VERMONT AGENCY OF HUMAN SERVICES WATERBURY, VT \$118,600 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy VERMONT PROTECTION & ADVOCACY INC MONTPELIER, VT \$50,000 (Traumatic Brain Injury Protection and Advocacy)

The Department of Health (DOH) administers the MCH Block Grant in the state of Washington. The Office of Maternal and Child Health (OMCH) is located in the Division of Community and Family Health, one of four divisions in DOH. There are seven sections in OMCH: Administration, Assessment, Child and Adolescent Health, Children with Special Health Care Needs, Genetic Services, Immunization Program CHILD Profile, and Maternal and Infant Health. These sections mainly focus on infrastructre building. Direct health care services, enabling services, and population-based services are provided by 35 local health jurisdictions and other agencies in Washington who receive block grant funds to support this work.

State Population: 6,468,424

Live Births: **86,848** 

### MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$29,145,614 Other MCHB Grant Programs: \$2,166,337

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$31,311,951

#### **CONTACT INFORMATION**

#### For More Information on Title V:

### **Title V Program, Contact:**

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## Title V Program's Services for Children with Special Health Care Needs, contact:

Maria Nardella

**CSHCN Section Manager** 

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360-236-3573

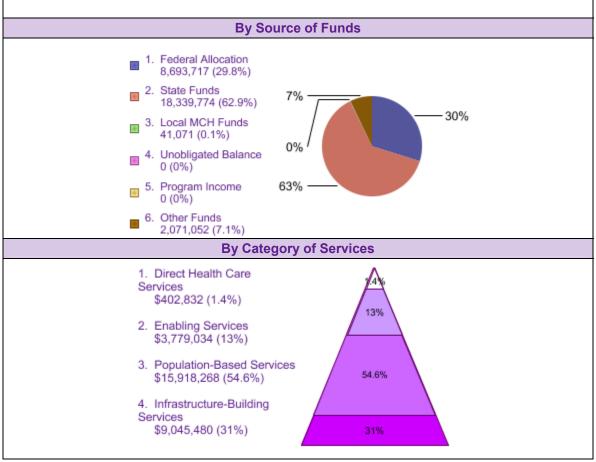
360-586-7868

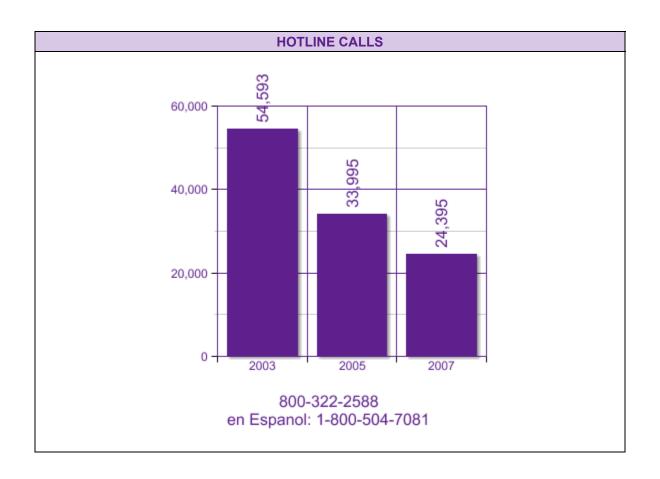
maria.nardella@doh.wa.gov

http://www.doh.wa.gov/cfh/mch/default.htm

### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

Populations Served	Number of Individuals Served	Expenditures FY 2007	
Pregnant Women	21,604	\$1,654,486	5.7%
Infants < 1 year old	86,845	\$7,777,543	26.7%
hildren 1 to 22 years old	352,519	\$10,543,388	36.2%
Children with Special Healthcare Needs	11,775	\$6,999,920	24%
Others	8,306	\$745,742	2.6%
Administration		\$1,424,535	4.9%
Totals	481,049	\$29,145,614	100%





### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	3
FY 2007 Total:	18
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met 3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	4.7	4.8
The ratio of the black infant mortality rate to the white infant mortality rate.	1.6	1.5
The neonatal mortality rate per 1,000 live births.	3	3.3
The postneonatal mortality rate per 1,000 live births.	1.9	1.8
The perinatal mortality rate per 1,000 live births plus fetal deaths.	8.1	8.2
The child death rate per 100,000 children aged 1 through 14.	13.8	14.1
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
The percent of pregnancies (live births, fetal deaths, abortions) that are unintended.	*	52%
Promote the use of Bright Futures materials and principles by health, social service, and education providers in Washington State.	80%	100%
Percent of children 6-8 years old with dental caries experience in primary and permanent teeth.	59.0%	53%
Strengthen statewide system capacity to promote health, safety, and school readiness of children birth to kindergarten entry.	86.4%	100%
Use an established framework for ensuring quality screening, identification, intervention, and care coordination for women, infants, children, adolescents, and their families.	*	*
Develop an outcome measure for the Washington State maternal and child health priority of Optimal Mental Health and Healthy Relationships.	*	*
Identify health disparities, develop and implement interventions to address disparities, and evaluate the effectiveness of interventions in achieving health equity.	*	*

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	55.7%	55.7%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	48.3%	49%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	65.3%	73.5%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	85.4%	85.9%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	47.3%	47.8%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	77.6%	81%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	15.2	14.9
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	50.4%	50%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	1.7	2.3
The percent of mothers who breastfeed their infants at 6 months of age.	58.8%	54%
Percentage of newborns who have been screened for hearing before hospital discharge.	95.3%	99%
Percent of children without health insurance.	4.4%	3%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	29.4%	29%
Percentage of women who smoke in the last three months of pregnancy.	9.2%	8.9%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	8.5	8.3
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	*	86.3%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	78.5%	83%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

## **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants State of Washington Department of Health Kent, WA \$115,000 (EMSC Partnership Grants)

EMSC Targeted Issue Grants University of Washington Seattle, WA \$198,677 (EMSC Targeted Issue Grants)

#### Research

MCH Research UNIVERSITY OF WASHINGTON Seattle, WA \$238,089 (MCH Research)

MCH Research University of Washington Seattle, WA \$271,026 (MCH Research)

### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
WASHINGTON STATE DEPARTMENT OF HEALTH
Olympia, WA
\$140,000
(Community-Based Integrated Service Systems (Local/State))

### **Title V - Special Projects of Regional and National Significance (SPRANS)**

STATE SYSTEMS DEVELOPMENT INITIATIVE (SSDI) PROJECT WASHINGTON STATE DEPARTMENT OF HEALTH Olympia, WA \$94,644 (State Systems Development Initiative)

Genetic Services Project CHILDREN'S HOSPITAL & REGIONAL MED CTR Seattle, WA \$183,000 (Genetic Services Project)

Children's Oral Healthcare Access Program Washington State Department of Health Olympia, WA \$160,000 (Childrens Oral Healthcare Access Program)

Awareness and Access to Care for Children and Youths with Epilepsy WASHINGTON STATE DEPARTMENT OF HEALTH Olympia, WA \$235,000 (Awareness and Access to Care for Children and Youths with Epilepsy)

TRAINING LONG TERM - PEDIATRIC DENTISTRY UNIVERSITY OF WASHINGTON SEATTLE, WA \$200,000 (Leadership Training in Pediatric Dentistry)

Training CED/COR Pediatric and Child Psychiatry CHILDREN'S HOSPITAL & REGIONAL MED CTR Seattle, WA \$15,000 (Training CED/COR Pediatric and Child Psychiatry)

### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation
WA ST DEPARTMENT OF SOCIAL & HEALTH SERVICES
OLYMPIA, WA
\$113,400
(Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy WASHINGTON PROTECTION & ADVOCACY SYSTEM Seattle, WA \$52,501 (Traumatic Brain Injury Protection and Advocacy)

## **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING WASHINGTON STATE DEPARTMENT OF HEALTH Olympia, WA \$150,000 (Universal Newborn Hearing Screening and Intervention)

# WISCONSIN

The Title V MCH/CSHCN Block Grants funds are administered by the Wisconsin Division of Public Health, Bureau of Community Health Promotion, Family Health Section. The FHS is clearly demarcated within the Division as the designee for administration of the Title V activities. This clear demarcation serves as a critical component to ensure comprehensive program activity and a single point of accountability for the state. The Family Health Section contains the MCH Unit which includes the MCH Program and the CSHCN Program.

State Population: 5,601,640

Live Births: **72,335** 

## MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$25,810,019
Other MCHB Grant Programs: \$4,185,223

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$29,995,242

#### **CONTACT INFORMATION**

#### For More Information on Title V:

### **Title V Program, Contact:**

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## Title V Program's Services for Children with Special Health Care Needs, contact:

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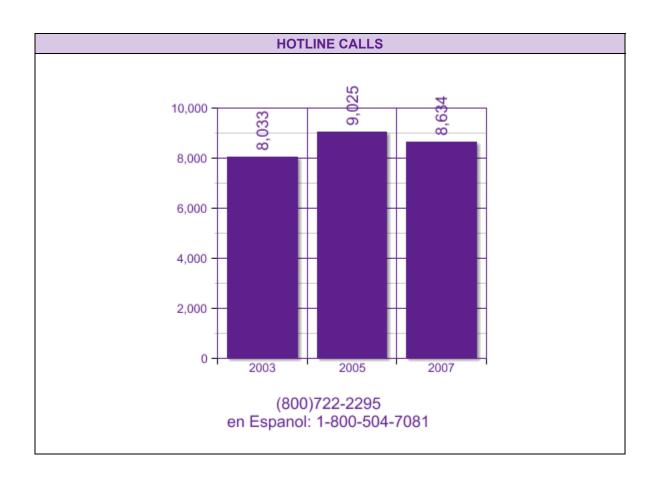
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### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group			
Populations Served	Number of Individuals Served	Expenditures	s FY 2007
Pregnant Women	6,032	\$1,738,188	6.7%
Infants < 1 year old	71,720	\$2,269,531	8.8%
Children 1 to 22 years old	38,872	\$8,823,384	34.2%
Children with Special Healthcare Needs	2,465	\$6,898,617	26.7%
Others	29,801	\$5,453,482	21.1%
Administration		\$626,817	2.4%
Totals	148,890	\$25,810,019	100%
= 4 = 5	9,384,863 (36.4%) Local MCH Funds 0 (0%) Unobligated Balance 0 (0%) Program Income 5,504,165 (21.3%) Other Funds	—42	%
•	0 (0%)  By Category	of Services	
2. 3.	Direct Health Care rvices \$13,454,017 (52.1%)  Enabling Services \$3,810,888 (14.8%)  Population-Based Services \$1,036,700 (4%)  Infrastructure-Building	52.1% 14.8% 4%	



# WISCONSIN

### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	3
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	2
FY 2007 Total:	17
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

# WISCONSIN

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	6.4	6
The ratio of the black infant mortality rate to the white infant mortality rate.	3.5	2.7
The neonatal mortality rate per 1,000 live births.	4.3	4
The postneonatal mortality rate per 1,000 live births.	2.1	2.2
The perinatal mortality rate per 1,000 live births plus fetal deaths.	7.1	6.4
The child death rate per 100,000 children aged 1 through 14.	15.3	20
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percent of eligible women enrolled in the Wisconsin Medicaid Family Planning Waiver during the year.	21.1%	31%
Percent of Medicaid and BadgerCare recipients, ages 3-20, who received any dental service during the reporting year.	22.4%	30%
Percent of children, ages 6 months-5 years, who have age-appropriate social and emotional developmental levels.	94.3%	94.4%
Rate per 1,000 of substantiated reports of child maltreatment to Wisconsin children, ages 0 - 17, during the year.	5.5	6
Percent of children who receive coordinated, ongoing comprehensive care within a medical home.	52.5%	58%
Percent of children less than 12 years of age who receive one physical exam a year.	77.1%	81.5%
Percent of women who use tobacco during pregnancy.	14.9%	12%
Percent of children, ages 2-4, who are obese or overweight at or above the 95th percentile.	13.1%	11.4%
Ratio of the black infant mortality rate to the white infant mortality rate.	3.5	2.7
Death rate per 100,000 among youth, ages 15-19, due to motor vehicle crashes.	24.5	19

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	65.3%	71%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	54.6%	60%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	63.0%	68%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	90.0%	93%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	44.5%	56%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	86.8%	83.7%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	15.6	14.5
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	47.0%	50%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	1.8	2.5
The percent of mothers who breastfeed their infants at 6 months of age.	26.6%	32%
Percentage of newborns who have been screened for hearing before hospital discharge.	97.2%	98%
Percent of children without health insurance.	3.8%	2.5%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	29.2%	24%
Percentage of women who smoke in the last three months of pregnancy.	14.9%	12%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	8.4	8.5
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	74.8%	83%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	83.8%	88%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants Wisconsin Department of Health & Family Services Madison, WI \$115,000 (EMSC Partnership Grants)

#### **Healthy Start**

ELIMINATING DESPARITIES
BLACK HEALTH COALITION OF WISCONSIN
Milwaukee, WI
\$900,000
(Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

ELIMINATING DISPARITIES IN PERINATAL HEALTH GREAT LAKES INTER-TRIBAL COUNCIL INC Lac Du Flambeau, WI \$900,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

### Title V - Community Integrated Service Systems (CISS)

CISS - SECCS (PLANNING)
WI ST DEPARTMENT OF HEALTH & SOCIAL SERVICES
Madison, WI
\$140,000
(Community-Based Integrated Service Systems (Local/State))

### Title V - Special Projects of Regional and National Significance (SPRANS)

State Implementation Grants for Integrated Community Systems for CSHCN WISCONSIN DEPARTMENT OF HEALTH Madison, WI \$292,579
(State Implementation Grants for Integrated Community Systems for CSHCN)

Health Families Expansion Program
Fond du Lac Scool District
Fond Du Lac, WI
\$50,000
(Healthy Tomorrows Partnership for Children Program)

Health Families Expansion Program
SIXTEENTH STREET COMMUNITY HEALTH CENTER
Milwaukee, WI
\$50,000
(Healthy Tomorrows Partnership for Children Program)

STATE SYSTEMS DEVELOPMENT INITIATIVE WISCONSIN DEPARTMENT OF HEALTH Madison, WI \$94,644 (State Systems Development Initiative)

REGION V - WEST HEMOPHILIA TREATMENT CENTER NETWORK GREAT LAKES HEMOPHILIA FOUNDATION INC Milwaukee, WI \$487,143 (Hemophilia Treatment Centers (SPRANS))

EP SCREENING AND BLOOD LEAD PROFICIENCY TESTING PROGRAM UNIVERSITY OF WISCONSIN, LABORATORY OF HYGIENE Madison, WI \$250,000 (Lead Screening and Proficiency Testing Program)

Children's Oral Healthcare Access Program
CHILDREN'S HOSPITAL OF WISCONSIN, INC.
Milwaukee, WI
\$135,886
(Childrens Oral Healthcare Access Program)

Family Professional Partnership/CSHCN
The Arc Wisconsin Disability Association
Madison, WI
\$95,700
(Family Professional Partnership/CSHCN)

MCH Pipeline Training Program
UNIVERSITY OF WISCONSIN - MILWAUKEE
Milwaukee, WI
\$169,492
(MCH Pipeline Training Program)

Integrated Services for Young Children with Special Health Care Needs Board of Regents of the University of Wisconsin System Madison, WI \$200,000 (Medical Home Capacity Building for CSHCN)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation
Wisconsin Department of Health & Family Services
Madison, WI
\$118,457
(Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy Disability Rights Wisconsin Madison, WI \$51,322 (Traumatic Brain Injury Protection and Advocacy)

# **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING WISCONSIN DEPARTMENT OF HEALTH Madison, WI \$135,000 (Universal Newborn Hearing Screening and Intervention)

The Office of Maternal, Child, and Family Health (OMCFH) is the agency in West Virginia State government which administers Title V. The OMCFH is located within the State's Bureau for Public Health. The Bureau's overall goal is to attain and maintain a healthier environment for West Virginians by placing special emphasis on community-based programming that facilitates an accessible service delivery system. In line with the Bureau for Public Health, the Office of Maternal, Child and Family Health provides operational guidance and support to providers throughout West Virginia to improve the health of families. In addition to providing funding support for actual service delivery, the Office of Maternal, Child and Family health funds projects intended to develop new knowledge that will ultimately improve the service delivery of the health community. The Office of Maternal, Child and Family Health is comprised of multiple divisions, programs, and projects all designed to promote improved health care access and increased utilization of preventive care. OMCFH's organizational structure includes the Division of Women's Services; Division of Infant, Child and Adolescent Health including the CSHCN Program; Division of Research, Evaluation and Planning; and the Division of Financial Services. Among the services included within the OMCFH's Administrative control are: administration of the State's EPSDT Program; administration of the State's perinatal program, Right From the Start, for indigent and uninsured women; the State's Early Intervention/Part C Program; a SPRANS grant focusing on eary childhood; an SSDI Project focusing on integration of Program data; the Birth Defects Surveillance System; the Newborn Metabolic and Hearing Screening Programs; and in partnership with the Centers for Disease Control and Prevention, the State's Breast and Cervical Cancer Screening Program as well as the State's Childhood Lead Poisoning Prevention Project and PRAMS, a surveillance system for Pregnancy Risk Monitoring.

State Population: 1,812,035

Live Births: 20,928

# MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: **\$42,120,035**Other MCHB Grant Programs: **\$1,312,961** 

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$43,432,996

### **CONTACT INFORMATION**

### For More Information on Title V:

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# Title V Program's Services for Children with Special Health Care Needs, contact:

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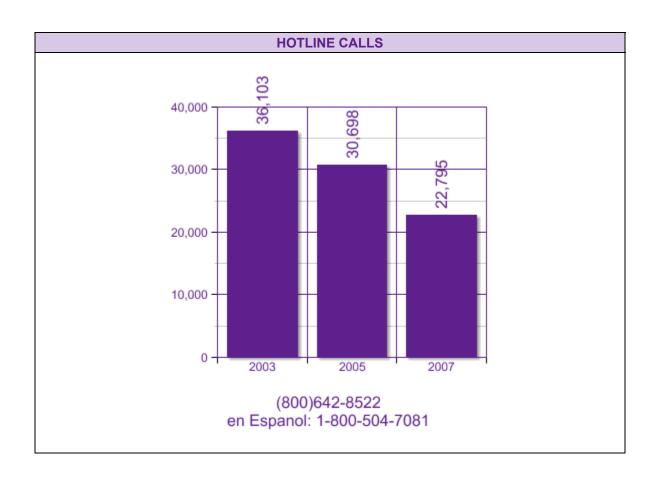
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### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group			
Populations Served	Number of Individuals Served	Expenditure	s FY 2007
Pregnant Women	21,101	\$3,108,683	7.4%
Infants < 1 year old	20,176	\$760,918	1.8%
Children 1 to 22 years old	511,771	\$2,878,370	6.8%
Children with Special Healthcare Needs	5,650	\$25,909,156	61.5%
Others	62,030	\$8,430,155	20%
Administration		\$1,032,753	2.5%
Totals	620,728	\$42,120,035	100%
2 3	. Federal Allocation 6,414,162 (15.2%) . State Funds 9,556,976 (22.7%) . Local MCH Funds 0 (0%) . Unobligated Balance 0 (0%)		5% 3%
	Program Income 0 (0%) Other Funds 26,148,897 (62.1%)		
	By Catego	ory of Services	
2. 3. 4.	Direct Health Care ervices \$25,311,360 (60.1%)  Enabling Services \$6,011,288 (14.3%)  Population-Based Servic \$2,293,434 (5.4%)  Infrastructure-Building ervices \$8,503,953 (20.2%)	60.1% 14.3% 5.4% 20.2%	



### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	3
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	2
Family members are involved in service training of CSHCN staff and providers.	3
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	3
Family members of diverse cultures are involved in all of the above activities.	1
FY 2007 Total:	15
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	71.4	6.7
The ratio of the black infant mortality rate to the white infant mortality rate.	2.1	0.7
The neonatal mortality rate per 1,000 live births.	3.8	3
The postneonatal mortality rate per 1,000 live births.	3.3	2
The perinatal mortality rate per 1,000 live births plus fetal deaths.	8.3	5
The child death rate per 100,000 children aged 1 through 14.	16.2	15
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Decrease the percentage of high school students in grades 9-12 who are overweight or obese.	14.7%	10%
Decrease the percentage of high school students who smoke cigarettes daily.	19.5%	16%
Decrease the percentage of pregnant women who smoke.	26.2%	20%
Increase the percentage of women who breastfeed their infants for at least six (6) weeks after birth.	57.1%	59%
Decrease the percentage of high school students who drink alcohol and drive.	10.0%	8%
Decrease the number of high school students who never or rarely wear a seatbelt when riding in a car driven by someone else.	16.6%	12%
Increase the percentage of the state's children <18 who are government sponsored beneficiaries who have at least one primary care visit in a 12-month period.	89.6%	93%
Increase the percentage of high school students who participate in physical activity for at least 20 minutes a day, 3 days a week.	42.8%	60%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	59.2%	65%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	50.5%	65%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	64.2%	65%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	89.7%	90%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	41.3%	43%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	93.3%	96%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	19.8	17
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	28.1%	32%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	3.9	3.5
The percent of mothers who breastfeed their infants at 6 months of age.	57.1%	60%
Percentage of newborns who have been screened for hearing before hospital discharge.	93.2%	99%
Percent of children without health insurance.	4.5%	3.5%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	24.0%	22%
Percentage of women who smoke in the last three months of pregnancy.	28.6%	25%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	8.0	7
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	95.4%	99%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	88.1%	90%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Healthy Start**

HEALTHY START: ELIMINATING DISPARITIES IN PERINATAL HEALTH WEST VIRGINIA UNIVERSITY RSCH CORP MORGANTOWN, WV \$700,000 (Healthy Start Initiative-Eliminating Racial/Ethnic Disparities)

### Title V - Community Integrated Service Systems (CISS)

Community-Based Integrated Service Systems (Local/State) West Virginia, Department of Health and Human Services CHARLESTON, WV \$140,000 (Community-Based Integrated Service Systems (Local/State))

### Title V - Special Projects of Regional and National Significance (SPRANS)

Healthy Tomorrows Partnership for Children Program
Marshall University Research Corporation/Marshall University
Huntington, WV
\$49,896
(Healthy Tomorrows Partnership for Children Program)

MATERNAL & CHILD HEALTH IMPROVEMENT PROJECTS WV Dept. of Health & Human Resources Charleston, WV \$94,644 (State Systems Development Initiative)

### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation
WEST VIRGINIA DEPARTMENT OF REHAB SERVICES
INSTITUTE, WV
\$118,600
(Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy West Virginia Advocates, Inc Charleston, WV \$50,000 (Traumatic Brain Injury Protection and Advocacy)

# **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING WV Dept. of Health & Human Resources Charleston, WV \$159,821 (Universal Newborn Hearing Screening and Intervention)

# WYOMING

The Wyoming Department of Health administers the Title V block grant through the Community and PublicHealth Division, Maternal and Family Health Section. With a small staff of 14, the MFH section offers state-wide programs and services including Perinatal Services including systems building, high risk maternal/infant, and home visiting programs, care coordination, Children's Special Health Services, and parental outreach. Funding is also provided to the Safe Kids Wyoming Program, as well as Oral Health Services Section of the division for dental sealants and severe crippling malocclusion services. The Colorado State Laboratory is contracted through MFH for Genetic Services (screening) and counseling.

State Population: **522,830** 

Live Births: 7,670

### MCH PARTNERSHIP FUNDS - FY 2007

Title V Federal-State Block Grant: \$3,840,049
Other MCHB Grant Programs: \$648,213

Bioterrorism Grant Program: \$0

Total MCH Partnership Funds: \$4,488,262

#### **CONTACT INFORMATION**

#### For More Information on Title V:

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**CSH Program Manager** 

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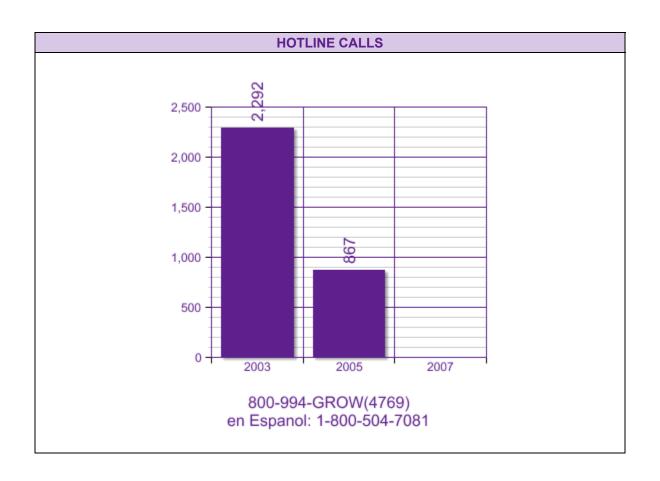
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### TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

By Number of Individuals Served and Population Group			
Populations Served	Number of Individuals Served	Expenditure	es FY 2007
Pregnant Women	7,555	\$439,617	11.4%
Infants < 1 year old	6,735	\$502,117	13.1%
Children 1 to 22 years old	149,429	\$831,633	21.7%
Children with Special Healthcare Needs	1,603	\$1,151,970	30%
Others	7,500	\$0	0%
Administration		\$914,712	23.8%
Totals	172,822	\$3,840,049	100%
_ 1	By Source  . Federal Allocation	e of Funds	
■ '	1,268,017 (33%)		
■ <sup>2</sup>	. State Funds 2,572,032 (67%)		
3. Local MCH Funds 0 (0%)			33%
<b>4</b>	. Unobligated Balance 0 (0%) 67%	6	
5	Program Income 0 (0%)		
■ 6	Other Funds 0 (0%)		
	By Category	of Services	
	Direct Health Care ervices \$904,000 (23.5%)	$\wedge$	
2.	Enabling Services \$628,759 (16.4%)	23.5%	
3.	Population-Based Services \$388,087 (10.1%)	16.4%	
	Infrastructure-Building rvices \$1,919,203 (50%)	50%	



# WYOMING

### **FAMILY PARTICIPATION IN CSHCN PROGRAM**

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.	1
Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.	3
Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.	1
Family members are involved in service training of CSHCN staff and providers.	0
Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).	2
Family members of diverse cultures are involved in all of the above activities.	0
FY 2007 Total:	7
Total Possible:	18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

# WYOMING

# MATERNAL & CHILD HEALTH (MCH) MEASURES

Title V – MCH National Outcome Measures	State 2007 Results	State 2012 Goal
The infant mortality rate per 1,000 live births.	7.6	7.3
The ratio of the black infant mortality rate to the white infant mortality rate.	1.6	1
The neonatal mortality rate per 1,000 live births.	4.7	4
The postneonatal mortality rate per 1,000 live births.	2.6	2.3
The perinatal mortality rate per 1,000 live births plus fetal deaths.	9.4	8.5
The child death rate per 100,000 children aged 1 through 14.	26.0	20
Title V - MCH State Performance Measures	State 2007 Results	State 2012 Goal
Percent of deaths in children and youth ages 1-24 due to non-motor vehicle related unintentional injuries.	15.3%	13%
Percent of high school students using alcohol in the past 30 days.	42.4%	38%
Percent of high school students who report tobacco smoking in the past 30 days.	20.8%	19%
Percent of infants born to women who smoked during pregnancy.	20.4%	17%
Percent of Wyoming high school students who are overweight.	9.3%	8.3%
Percent of high school students using methamphetamines in the past 30 days.	3.8%	3%
The percent of infants born preterm (before 37 weeks gestation)	10.6%	9.5%
Percent of infants identified at birth with a congenital anomaly.	0.5%	0.3%
Percent of postpartum women reporting multivitamin use four or more times per week in the month before getting pregnant.	37.4%	40%

Title V - MCH National Performance Measures	State 2007 Results	State 2012 Goal
The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their Statesponsored newborn screening programs.	100.0%	100%
The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)	57.5%	58%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	49.1%	50%
The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)	60%	65%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	88.8%	90%
The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.	47%	50%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	75.4%	79%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	17.7	16
Percent of third grade children who have received protective sealants on at least one permanent molar tooth.	71.3%	75%
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	4.9	4
The percent of mothers who breastfeed their infants at 6 months of age.	42.9%	45%
Percentage of newborns who have been screened for hearing before hospital discharge.	96.4%	98%
Percent of children without health insurance.	8.2%	7%
Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.	19.5%	18%
Percentage of women who smoke in the last three months of pregnancy.	15.3%	14%
The rate (per 100,000) of suicide deaths among youths aged 15 through 19.	14.0	13
Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.	59.1%	64%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	64.9%	67%

## 2007 TITLE V AND MCHB DISCRETIONARY GRANTS

#### **Emergency Medical Services for Children (EMSC)**

EMSC Partnership Grants WYOMING DEPARTMENT OF HEALTH Cheyenne, WY \$114,829 (EMSC Partnership Grants)

#### **Title V - Community Integrated Service Systems (CISS)**

CISS - SECCS (PLANNING)
WYOMING STATE DEPARTMENT OF HEALTH
Cheyenne, WY
\$138,000
(Community-Based Integrated Service Systems (Local/State))

#### Title V - Special Projects of Regional and National Significance (SPRANS)

STATE SYSTEMS DEVELOPMENT INITIATIVE (SSDI) WYOMING STATE DEPARTMENT OF HEALTH Cheyenne, WY \$94,644 (State Systems Development Initiative)

#### **Traumatic Brain Injury**

Traumatic Brain Injury Implementation WYOMING DEPARTMENT OF HEALTH Cheyenne, WY \$118,600 (Traumatic Brain Injury Implementation)

Traumatic Brain Injury Protection and Advocacy PROTECTION & ADVOCACY SYSTEM INC CHEYENNE, WY \$50,000 (Traumatic Brain Injury Protection and Advocacy)

#### **Universal Newborn Hearing Screening**

UNIVERSAL NEWBORN HEARING SCREENING WYOMING STATE DEPARTMENT OF HEALTH Cheyenne, WY \$132,140 (Universal Newborn Hearing Screening and Intervention)