

Year 2024 Template Objectives for Maternal and Child Health Block Grant

Legend

A Objective Statment	D Input Activities	G For your Information
B Deliverable	E Base Line for Measurement	
C Context	F Data Source for Measurement	

1.

- A. Objective 1: Adolescent Well-Being
By December 31, 2024, the agency, in collaboration with community partners, will implement and evaluate Strategy 1 (from Required Input Activities) to decrease rates of adolescent emotional distress.
- B. Data is submitted quarterly in Alchemer to document activity progress, successes, barriers, outcomes, Learning Community Call attendance, and other technical assistance sessions.
- C. This work will address the:
- Title V National Performance Measure for adolescent injury prevention: Rate of hospitalization for non-fatal injury per 100,000 adolescents ages 10 through 19,
 - Title V State Performance Measure for adolescent well-being: Percentage of adolescents reporting feeling so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities in the last 12 months and report a decrease in being bullied on school property; and
 - Title V State Performance Measure for Representative Participation: Percent of performance measures with family, youth, and community engagement embedded into programs and policies.

C. Anticipated Budget:

Personnel:

Fringe:

Travel:

Equipment:

Supplies:

Contractual:

Indirect:

Other:

A detailed budget outlining your expenses should be completed using an excel template your contract monitor will send to you and submitted to your contract monitor no later than 90 days from the date your contract is finalized. Your contract monitor will send an email confirming they have received it. Any budget category changes should be communicated with your contract monitor. If you plan to make any major changes to your budget, you must inform your contract monitor.

- D. 1. Implement and evaluate the selected strategy as outlined below with activity details that your agency identified in the 2024 MCH Objectives Supplement.

Strategy 1: Collaborate with community coalitions, schools, healthcare, UW-Division of Extension, and/or other partners to implement skill-based, gate keeper, risk behavior recognition, peer to peer, social emotional-learning, bullying prevention, or other evidence-based suicide prevention and mental health promotion programs that promote belonging and safety.

Core Activities:

- Conduct outreach, recruit, and support collaborative partnerships to collaboratively offer programs that accomplish this strategy and improve adolescent well-being and youth leadership.
- Complete the Youth Engagement Assessment Tool and implement at least one practice change, informed by the results, that increases youth leadership and engagement.
- Collaborate with law enforcement and other partners on efforts to restrict means for suicide such as distribution of firearm locks and access to medication drop boxes.
- Promote peer support resources such as The Prism Program, Youthline, and Iris Place peer support warmline.
- Actively encourage area middle and high schools to participate in the Youth Risk Behavior Survey and School Health Profiles through the Department of Public Instruction and utilize results in program planning.

2. Participate in all Learning Community Calls to support progress on the Title V State and National Performance Measures related to Adolescent Well-Being.

- E. Baseline information as identified in the 2024 MCH Objectives Supplement.

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F. Quarterly Alchemer reports and learning community attendee list.

G.

2.

A. Objective 2: Breastfeeding

By December 31, 2024, the agency, in collaboration with community partners, will implement and evaluate strategy(ies) (insert strategy number(s) from Required Input Activities) to improve breastfeeding initiation and duration rates in their community.

B. Data is submitted quarterly in Alchemer to document activity progress, successes, barriers, outcomes, Learning Community Call attendance, and other technical assistance sessions.

C. This work will address the:

- Title V National Performance Measures for Breastfeeding: Percent of infants who are ever breastfed and percent of infants breastfed exclusively through 6 months), and the
- Title V State Performance Measure for Representative Participation: Percent of performance measures with family, youth, and community engagement embedded into programs and policies.

C. Anticipated Budget:

Personnel:

Fringe:

Travel:

Equipment:

Supplies:

Contractual:

Indirect:

Other:

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- D. 1. Implement and evaluate the selected strategy as outlined below with activity details that your agency identified in the 2024 Maternal Child Health (MCH) Objectives Supplement.

Strategy 1: Partner with worksites and/or childcare sites to improve their support for human milk feeding.

Core Activities:

- Utilize available resources from the Wisconsin Breastfeeding Coalition.
- Conduct outreach, recruit, and support sustained partnerships.
- Assist site with completing an assessment and in making improvements to policies and practices based on assessment results.
- Assure recognition of breastfeeding friendly status, if applicable.

Strategy 2: Enhance local community coordination to improve continuity of care by strengthening consistent implementation of prenatal, maternity, and postpartum care practices that support breastfeeding.

Core Activities:

- Conduct outreach, recruit, and support sustained partnerships with community stakeholder(s) (e.g., parent/family organizations, home visiting agencies, faith-based organizations, hospitals, and clinics).
- Facilitate local connections and improvements to breastfeeding-supportive policies and practices.

2. Enhance community engagement to inform breastfeeding strategies and activities. When possible, include family and community representatives who are engaged with breastfeeding activities in the process.

3. Collaborate with community partners to promote consistent messaging throughout the community.

4. Participate in all Learning Community Calls to support progress on the MCH National Performance Measure related to Breastfeeding.

5. Attend webinars provided by the Michigan Breastfeeding Network.

- E. Baseline information as identified in the 2024 MCH Objectives Supplement.

- F. Quarterly Alchemer reports and Learning Community Call attendee list.

G.

3.

- A. Objective 3: Developmental Screening

By December 31, 2024, the agency, in collaboration with community partners, will implement and evaluate strategy(ies) (insert strategy number(s) from Required Input Activities) to improve rates of developmental screening in their community.

- B. Data is submitted quarterly in Alchemer to document activity progress, successes, barriers, outcomes, Learning Community Call attendance, and other technical assistance sessions.

- C. This work will address the:

- Title V National Performance Measure for Developmental Screening: Percent of children, ages 9 months through 35 months, receiving a developmental screening using a parent-completed screening tool, and the
- Title V State Performance Measure for Representative Participation: Percent of performance measures with family, youth, and community engagement embedded into programs and policies.

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- C. Anticipated Budget:
Personnel:
Fringe:
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Equipment:
Supplies:
Contractual:
Indirect:
Other:

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- D. 1. Implement and evaluate the selected strategy as outlined below with activity details that your agency identified in the 2024 Maternal Child Health (MCH) Objectives Supplement.

Strategy 1: Collaborate to promote community awareness, education, and programming for advancing developmental monitoring and screening.

Core Activities:

- Utilize and promote the CDC Learn the Signs. Act Early materials.
- Conduct outreach and recruit community groups (e.g., parent/family organizations, home visiting agencies, churches, businesses) to promote developmental monitoring and screening.
- Provide training/education for community groups to support implementation of developmental monitoring and screening practices using tools and resources with common messaging.
- Promote other resources such as HealthCheck, Lead Screening, and resources for coordinated referrals and follow up services.

Strategy 2: Promote education and training of the public health workforce to increase skills and competencies in completing an evidence-based developmental screening.

Core Activities:

- Utilize and promote the CDC Learn the Signs. Act Early materials.
- Coordinate, organize, and host a professional developmental screening training.
- Partner with an expert (e.g., Brookes Professional Development Coordinator) to provide training to event participants on the fundamentals of ASQ-3 developmental screening administration.
- Conduct outreach to promote developmental screening training with multiple agencies (e.g., childcare providers/agencies, bordering health departments, home visiting agencies, Tribal health communities).

Strategy 3: Implement the CDC WIC Developmental Milestones Checklist Program to promote developmental monitoring.

Core Activities:

- Communicate with your agency's WIC program staff to establish a collaborative partnership for this strategy.
- Implement the CDC's WIC Developmental Milestone Checklist Program in WIC clinic(s) utilizing tools and resources available at: Implementation Tools and Templates for the WIC Milestone Checklist Program CDC or developmental Milestone Checklist Program - Online Implementation Guide for WIC Program Staff CDC
- Participate in a training video from the CDC, available at: LTSAE-WIC-Clinic-Training.pptx (live.com)
- Obtain resources needed for the Learn the Signs. Act Early WIC Checklist Program, available at: Learn-the-Signs.-Act-Early.-Milestone-Checklist-Instructions.png (asphn.org)
- Collect checklist data and track referrals using your preferred data collection tool.

2. Enhance community engagement to inform developmental monitoring and screening strategies and activities. When possible, include family and community representatives who are engaged with developmental monitoring and screening activities in the process.

3. Collaborate with the statewide technical assistance provider and community partners to promote consistent messaging throughout the community.

4. Participate in all Learning Community Calls to support progress on the MCH National Performance Measure related to Developmental Screening.

- E. Baseline information as identified in the 2024 MCH Objectives Supplement.

- F. Quarterly Alchemer reports and learning community attendee list.

- G.

4.

- A. Objective 4: Health Equity and Community Engagement

By December 31, 2024, the agency, in collaboration with community partners, will implement and evaluate Strategy 1 (from Required Input Activities) to advance health equity and enhance community engagement for the MCH population.

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- B. Data is submitted quarterly in Alchemer to document activity progress, successes, barriers, outcomes, Learning Community Call attendance, and other technical assistance sessions.
- C. This work will address the:
- Title V State Performance Measure for Representative Participation: Percent of performance measures with family, youth, and community engagement embedded into programs and policies.
- C. Anticipated Budget:
- Personnel:
- Fringe:
- Travel:
- Equipment:
- Supplies:
- Contractual:
- Indirect:
- Other:

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- D. 1. Implement and evaluate the selected strategy as outlined below with activity details that your agency identified in the 2024 Maternal Child Health (MCH) Objectives Supplement.

Strategy 1: Implement an action plan to advance health equity and enhance community engagement for the MCH population.

Core Activities:

-Select an area of focus from the options below to advance health equity. (Complete in Quarter 1):

- Identify data available to inform efforts to advance health equity.
- Assess staff skills and training needed to address health equity.
- Identify existing policies and interventions designed to reduce and eliminate disparities between populations.
- Support partnerships to advance health equity.
- Use data to advance health equity.
- Assess and improve internal policies or programs using an equity lens.
- Other strategy determined by the agency.
- Identify opportunities to integrate community voice in planning and decision-making.
- Develop and implement an action plan to strengthen the selected health equity strategy and enhance community engagement.

2. Collaborate with the technical assistance provider and utilize available training and tools to integrate community voice in agency programs and to improve health equity.

3. Participate in all Learning Community Calls to support progress on the Title V State Performance Measures related to Health Equity and Community Engagement.

- E. Baseline information as identified in the 2024 MCH Objectives Supplement.
- F. Quarterly Alchemer reports and learning community attendee list.
- G.

5.

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- A. Objective 5: Perinatal Mental Health
By December 31, 2024, agency will implement and evaluate strategies (insert minimum of two strategy numbers from Required Input Activities) to establish and/or improve screening and follow-up services for perinatal mood and anxiety disorders either, within a program area that currently provides screening for perinatal mood and anxiety disorders (e.g., PNCC, Home Visiting), or by implementing new services within a program area that engages pregnant and post-partum women but does not currently provide screening and follow-ups for perinatal mood and anxiety disorders (e.g., WIC, well-child services, immunization appointments).
- B. Data is submitted quarterly in Alchemer to document activity progress, successes, barriers, outcomes and Learning Community Call attendance.
- C. This work will address the:
 - Title V State Performance Measure for High Quality Perinatal Care: Percent of women receiving care within the first trimester and percent of birthing persons receiving a quality postpartum visit, and the
 - Title V State Performance Measure for Representative Participation: Percent of performance measures with family, youth, and community engagement embedded into programs and policies.
- C. Anticipated Budget:
 Personnel:
 Fringe:
 Travel:
 Equipment:
 Supplies:
 Contractual:
 Indirect:
 Other:

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- D. 1. Implement and evaluate the selected strategies as outlined below with activity details that your agency identified in the 2024 Maternal Child Health (MCH) Objectives Supplement.

Strategy 1: Utilize a quality improvement approach to test and implement a practice change around screening for perinatal mood and anxiety disorders (PMADS).

Core Activities:

- Develop a policy and procedure for screening for PMADS that includes:
 - Validated and evidence-based screening tools for the perinatal population, such as the Edinburgh Postpartum Depression Scale (EPDS) and the Perinatal Health Questionnaire (PHQ-9), and for further screening and symptom assessment, the Perinatal Anxiety Screening Scale (PASS), Generalized Anxiety Disorder-7 (GAD-7), and the Mood Disorder Questionnaire (MDQ),
 - A frequency schedule for screening for PMADS,
 - A procedure for initiating the screening process that focuses on building relationships and ongoing conversations with clients,
 - Guidance on how screening results will be shared with clients and families, and
 - Rescreening protocol to include who is rescreened and when.
- Implement a practice change around screening for PMADS and modify policy and procedure as needed.

Strategy 2: Utilize a quality improvement approach to test and implement a practice change around referrals and follow-up for perinatal mood and anxiety disorders (PMADS).

Core Activities:

- Identify providers accepting referrals for evidence-based treatment for PMADS and other support service providers within the community.
- Develop a policy and procedure for referrals and follow-up support services for individuals who screen positive for PMADS that includes:
 - A procedure for referrals to evidence-based treatments (e.g., therapy, medical providers, psychiatry, prescribers) and linkages to other support services (e.g., peer support groups),
 - A procedure to assess and respond to imminent and/or suicide risk in individuals who screen positive via suicide screening tools, a Periscope Project consultant, or an assessment for postpartum psychosis, and
 - A method to track referrals. Suggested data to track: client name, organization/ agency/clinic being referred to, type of referral, follow-up completed, client follow-through (if possible).
- Implement a practice change around referrals and follow-up for PMADS and modify policy and procedure as needed.

- E. Baseline information as identified in the 2024 MCH Objectives Supplement.
- F. Quarterly Alchemer reports and learning community attendee list.

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G. Input Activities Continued:

Strategy 3: Strengthen support and education for clients/families experiencing perinatal mood and anxiety disorders (PMADS).

Core Activities:

- Develop a policy and procedure for providing support and education to clients/families experiencing perinatal mood and anxiety disorders.
- Provide culturally relevant materials, resources, and education to improve and protect mental wellness in pregnant and post-partum individuals such as post-partum self-care strategies, strategies to identify support systems, proper nutrition & sleep habits, and other supportive strategies for individuals who screen positive for PMADS with your agency staff.

Strategy 4: Collaborate with statewide technical assistance provider and other training partners to strengthen public health and health care provider workforce capacity and knowledge around perinatal mood and anxiety disorders.

Core Activities:

- Provide culturally relevant education to public health and other health care providers utilizing Perinatal Mental Health training modules, virtual training sessions, and other tools shared by the Technical Assistance provider and other training partners.
- Recruit public health and other health care providers from the community to enroll in The Periscope Project, a free resource for providers caring for pregnant and postpartum individuals in Wisconsin who are struggling with mental health or substance use disorders. Services include consultations with a perinatal psychiatrist, information on community resources, and utilization of provider toolkits and education.

2. Enhance community engagement by integrating community voice throughout project planning and implementation.

3. Participate in all Learning Community Calls to support progress on the Title V State Performance Measure related to perinatal mental health.

6.

A. Objective 6 Physical Activity and Nutrition

By December 31, 2024, agency will implement and evaluate strategy (insert strategy number from Required Input Activities) to improve physical activity and nutrition for children ages 6-11 in their community.

B. Data is submitted quarterly in Alchemer to document activity progress, successes, barriers, outcomes and Learning Community Call attendance.

C. This work will address the:

- Title V National Performance Measure for Physical Activity: Percent of children ages 6-11 who are physically active at least 60 minutes each day),
- Title V State Performance Measure for Representative Participation: Percent of performance measures with family, youth, and community engagement embedded into programs and policies.

C. Anticipated Budget:

Personnel:

Fringe:

Travel:

Equipment:

Supplies:

Contractual:

Indirect:

Other:

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- D. 1. Implement and evaluate the selected strategy as outlined below with activity details that your agency identified in the 2024 Maternal Child Health (MCH) Objectives Supplement.

Strategy 1: Strengthen MCH public health workforce capacity and community engagement and partnerships to support new or expanded opportunities for physical activity and improved nutrition in children ages 6-11 years old, with a focus on policy, systems, and environmental changes. (Intended for agencies new to this objective.)

Core Activities:

- Complete the University of Minnesota Extension Systems Approaches for Healthy Communities course and participate in Learning Community Calls corresponding to course modules and content. (Not applicable to staff who have completed the course in previous years.)
- Develop, strengthen, and/or expand community partnerships by engaging regularly with agencies & programs that serve children ages 6-11, to include local partners from the UW-Madison Division of Extension and local setting specific partners such as K-5 schools, afterschool/out-of-school time providers, community coalitions, transportation planners, health advocates, community-based organizations, etc.
- Using local data and assessment information, identify populations disproportionately affected by PAN issues and determine project focus and setting.
- Collaborate with internal and external partners to identify needs related to PAN in children ages 6-11 by completing assessments related to project focus and setting (e.g. Alliance for a Healthier Generation, CDC Healthy Schools, Action for Healthy Kids, Walking & Biking Audits, etc.).
- Using assessment results, collaborate with internal and external partners to develop an action plan outlining steps agency will take to:
 - Implement at least one policy, systems, or environmental change related to improving PAN in children ages 6-11.

Strategy 2: Collaborate with community partners to establish new or expand existing opportunities for physical activity and improved nutrition in children ages 6-11 years old, with a focus on policy, systems, and environmental changes. (Intended for agencies who have completed Strategy 1 activities.)

Core Activities:

- Complete the University of Minnesota Extension Systems Approaches for Healthy Communities course and participate in Learning Community Calls corresponding to course modules and content. (Not applicable to staff who have completed the course in previous years.)
- Develop, strengthen, and/or expand community partnerships by engaging regularly with agencies & programs that serve children ages 6-11, to include local partners from the UW-Madison Division of Extension and local setting specific partners such as K-5 schools, afterschool/out-of-school time providers, community coalitions, transportation planners, health advocates, community-based organizations, etc.
- Collaborate with internal and external partners to implement at least one policy, systems, or environmental change related to PAN in children ages 6-11 and update action plan (if needed).

2. Enhance community engagement by integrating community member voice throughout project planning and implementation.

3. Participate in Learning Community Calls relevant to the selected strategy to support progress on the Title V National Performance Measure related to Physical Activity (and Nutrition).

4. Participate in additional technical assistance opportunities offered by statewide technical assistance provider.

- E. Baseline information as identified in the 2024 MCH Objectives Supplement.

- F. Quarterly Alchemer reports and learning community attendee list.

G.

7.

- A. Objective 7: Social Connections

By December 31, 2024, the agency, in collaboration with community partners, will implement and evaluate strategy(ies) (insert strategy number from Required Input Activities) to improve social connections in their community.

- B. Data is submitted quarterly in Alchemer to document activity progress, successes, barriers, outcomes, Learning Community Call attendance, and other technical assistance sessions.

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- C. This work will address the:
- Title V State Performance Measure for Social Connections: Percent of Wisconsin adults who report that they "usually" or "always" get the social and emotional support that they need.
 - Title V State Performance Measure for Representative Participation: Percent of performance measures with family, youth, and community engagement embedded into programs and policies.

- C. Anticipated Budget:

Personnel:

Fringe:

Travel:

Equipment:

Supplies:

Contractual:

Other:

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- D. 1. Implement and evaluate the selected strategy as outlined below with activity details that your agency identified in the 2024 Maternal Child Health (MCH) Objectives Supplement.

Strategy 1: Assess need for improvement with social connections within community.

Core Activities:

- Assess need for improvement for social connections within community may be related to:

- Environment
- Safe, Stable Housing
- Community Connections
- Social Support
- Social Isolation
- Schools & Childcare
- Community Development
- Neighborhood Safety

- Use the results from needs assessment (community health assessment or community health improvement plan can be used) to develop an action plan.

- Conduct outreach, recruit, and support sustained partnerships.

Strategy 2: Implementation of action plan and practice change.

Core Activities:

- Implement action plan and practice change.

- Conduct outreach, recruit, and support sustained partnerships.

2. Enhance community engagement to inform, develop, and implement social connections and activities.

3. Collaborate with community partners to promote social connections throughout the community.

4. Participate in all Learning Community Calls to support progress on the Title V State Performance Measure related to Social Connections.

- E. Baseline information as identified in the 2024 MCH Objectives Supplement.

- F. Quarterly Alchemer reports and learning community attendee list.

- G.