



TOMÁS J. ARAGÓN, M.D., Dr.P.H
Director and State Public Health Officer

State of California—Health and Human Services Agency
California Department of Public Health



GAVIN NEWSOM
Governor

October 11, 2021

Ms. Asuncion Williams
MCAH Director
County of San Bernardino
606 East Mill Street, 2nd Floor
San Bernardino, CA 92415-0011

Dear Ms. Williams:

**APPROVAL OF AGREEMENT FUNDING APPLICATION (AFA) FOR AGREEMENT
#202136 – FISCAL YEAR 2021-22**

The California Department of Public Health, Maternal, Child and Adolescent Health (CDPH/MCAH) Division approves your Agency's AFA. Attached are the most current Scope(s) of Work (SOW) and Budget(s) that were approved for administration of MCAH related programs.

To carry out the program(s) outlined in the enclosed SOW(s) and Budget(s), during the period of July 1, 2021 through June 30, 2022, the CDPH/MCAH Division will reimburse expenditures up to the following amounts:

Maternal Child and Adolescent Health\$830,906.58

The availability of Title V funds and State General funds (BIH only) are based upon funds appropriated in the FY 2021-22 Budget Act. The availability of Federal Financial Participation (FFP), also known as Title XIX, are based upon the dissemination of funds from the Department of Healthcare Services that administers the FFP Medicaid Program. Reimbursement of invoices is subject to compliance with all federal and state requirements pertaining to the CDPH/MCAH related programs and adherence to all applicable regulations, policies and procedures. Your Agency agrees to invoice actual and documented expenditures and to follow all the conditions of compliance stated in the current CDPH/MCAH Program and Fiscal Policies and Procedures manuals, including the ability to substantiate all funds claimed.

CDPH Maternal, Child and Adolescent Health Division/Center for Family Health
MS 8300 • P.O. Box 997420 • Sacramento, CA 95899-7420
(916) 650-0300 • (916) 650-0305 FAX
Department Website (www.cdph.ca.gov)



For agencies claiming Title XIX funds, you also agree to maintain secondary documentation that clearly substantiates time study activities as being non-program related, unmatched, non-enhanced or enhanced. You also agree to use either:

1. The web-posted CDPH/MCAH, BIH Base Medi-Cal Factor (MCF), and/or
2. A Variable Base MCF for specific staff who serve a unique client population, and who verify and document 100% of their Medi-Cal enrolled and non-Medi-Cal enrolled clients during each time study period (MCAH Program only).

Please ensure that all necessary individuals within your Agency are notified of this approval and that the enclosed documents are carefully reviewed. This approval letter constitutes a binding agreement. If any of the information contained in the enclosed SOW and Budget is incorrect or different from that negotiated, please contact your contract manager, Jing Yuan, at (916) 650-0340 or by e-mail at jing.yuan@cdph.ca.gov within 14 calendar days from the date of this letter. Non-response constitutes acceptance of the enclosed documents.

Sincerely,

Angelica Jimenez-Bean

Angelica Jimenez-Bean
Section Chief – Contract Management and Allocations Process
Maternal, Child and Adolescent Health Division
Center for Family Health
California Department of Public Health

Attachment(s)

cc: Mr. Stewart Hunter
Administrative Supervisor I

Ms. Jing Yuan
Contract Manager

Ms. Mary DeSouza
Program Chief

Local Health Jurisdiction: San Bernardino
Agreement Number: 202136

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**California Department of Public Health (CDPH)
Maternal, Child and Adolescent Health (MCAH) Division
Local MCAH Scope of Work (SOW)**

The Local Health Jurisdiction (LHJ), in collaboration with the CDPH/MCAH Division, shall strive to develop systems that protect and improve the health of California's women of reproductive age, infants, children, adolescents and their families.

The development of the Local MCAH SOW was guided by several public health frameworks including the ones listed below. Please consider integrating these approaches when conceptualizing and organizing local program, policy, and evaluation efforts.

- o The Ten Essential Services of Public Health and Toolkit
- o The Spectrum of Prevention
- o Life Course Perspective
- o Social Determinants of Health
- o The Social-Ecological Model
- o Strengthening Families

All Title V programs must comply with the MCAH Fiscal Policy and Procedures Manual and the MCAH Program Policy and Procedures Manual.

Certification by MCAH Director:	Name: Asuncion Williams Title: RN, MCAH Interim Director Date: 6/3/2021 <i>I certify that I have seen and reviewed this Scope of Work for compliance with CDPH/MCAH Program Policies and Procedures.</i>
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Note: The Title V Maternal and Child Health Block Grant is the federal program that provides core funding to California to improve the health of mothers and children. The Title V Block Grant is federally administered by the Health Resources and Services Administration.

CDPH/MCAH may post SOWs on the CDPH/MCAH website.

Section A: General requirements and activities for all LHJs

Aligns With	General Requirement(s)	Required Local Activities	Time Frame	Deliverable Description
CDPH/MCAH Requirement	Annual Progress Report and Year-End Survey	Complete and submit an Annual Progress Report with the included Year-End Survey each fiscal year to report on Scope of Work activities.	Annually, each fiscal year Due: August 15th	The Annual Progress Report will report on progress of program activities and the extent to which the LHJ met the SOW goals and deliverables and how funds were expended.
CDPH/MCAH Requirement	Community Profiles and Data Information	Complete and submit a Community Profile for each fiscal year for posting on the CDPH/MCAH website.	Annually, each fiscal year Due with Agreement Funding Application (AFA)	Community Profiles (also known as Program Narratives) provide insight into the health and environment (community, home, and school) of California mothers, babies, children and teens. A template is provided to the LHJs for them to complete and submit each year. Use the most recent data available.
Title V Requirement	Toll-Free Line	Provide a toll-free telephone number or "no cost to the calling party" number (and other appropriate methods) which provides a current list of culturally and linguistically appropriate information and referrals to community health and human resources for the general public regarding access to prenatal care.	Annually, each fiscal year	Include on Local MCAH budget during the AFA cycle. Report in Annual Report: <ul style="list-style-type: none"> List toll-free telephone number Number of calls received
Title V Requirement	MCAH Website	Share link, if available, to the appropriate Local MCAH Title V Program website.	Annually, each fiscal year	Report in the Annual Report: <ul style="list-style-type: none"> List the URL for the Local MCAH Title V program website Enter the number of hits to the website, if known
Title V Requirement CDPH/MCAH Requirement	Workforce Development and Training	Attend required trainings/meetings as outlined in the MCAH Program Policies and Procedures.	Annually, each fiscal year	Report in Annual Report on attendance at: <ul style="list-style-type: none"> MCAH Director's meeting SIDS Coordinators meeting

CDPH/MCAH Requirement	Recruitment and Retention	Maintain required key leadership personnel and recruit and retain qualified Title V program staff by as outlined in the MCAH Policies and Procedures.	Ongoing	If the LHJ is not able to meet key personnel requirements, the LHJ should submit a waiver request letter, as applicable per the MCAH Policies and Procedures. <ul style="list-style-type: none"> Key Personnel leadership consists of the MCAH Director and the MCAH Coordinator, if the LHJ has one.
CDPH/MCAH Requirement	Community Resource and Referral Guide	Develop a comprehensive MCAH resource and referral guide of available health, mental health, emergency resources, and social services.	By end of 2025	<ul style="list-style-type: none"> Submit/upload a copy or link to the existing resource and referral guide
Title V Requirement	Conduct Local Needs Assessment	Conduct a Local Needs Assessment to acquire an accurate, thorough picture of the strengths and weaknesses of the local public health system that can be used in response to the preventive and primary care services needs for ALL pregnant women, mothers, infants (up to age one), and children, including children with special health care needs.	Once in five-year cycle	Complete Needs Assessment Deliverable Packet and Forms provided by CDPH/MCAH when requested by CDPH/MCAH.

Section B: Domain specific requirements and activities

CDPH/MCAH Requirement	Sudden Infant Death Syndrome (SIDS)	<p>Required for Infant Domain - all LHJs Provide Sudden Infant Death Syndrome/Sudden Unexpected Infant Death (SIDS/SUID) grief and bereavement services and supports through home visits and/or mail resource packets to families suffering an infant loss.</p> <p>Required for Child Domain - all LHJs Partner with CDPH/MCAH to identify, review and monitor local developmental screening rates.</p>	Annually, each fiscal year	Report on SIDS/SUID activities in the Annual Report/Year-End Survey
CDPH/MCAH Requirement	Child Health - Developmental Screening	<p>Required for Child Domain - all LHJs Link and refer families in MCAH programs to safety net and public health care programs such as Family Planning, Access, Care, and Treatment (PACT), Medi-Cal, and Denti-Cal.</p>	Annually, each fiscal year	Report on activities in the Annual Report/Year-End Survey
CDPH/MCAH Requirement	Child Health -- Family Economic Supports	<p>Required for Child Domain - all LHJs Link and refer families in MCAH programs to safety net and public health care programs such as Family Planning, Access, Care, and Treatment (PACT), Medi-Cal, and Denti-Cal.</p>	Annually, each fiscal year	Report on activities in the Annual Report/Year-End Survey
CDPH/MCAH Requirement	Children and Youth with Special Health Care needs (CYSHCN)	<p>Required for CYSHCN Domain - all LHJs Link and refer children in families served by Local MCAH programs to services if results of a developmental or trauma screening indicates that the child needs follow-up.</p>	Annually, each fiscal year	Report on activities in the Annual Report/Year-End Survey
CDPH/MCAH Requirement	Children and Youth with Special	<p>Required for CYSHCN Domain - all LHJs</p>	Annually, each fiscal year	Report on activities in the Annual Report/Year-End Survey

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	Health Care needs (CYSHCN)	Outreach to and connect with your local or regional family resource center to understand needs of CYSHCN and their families and the resources available to them. http://www.frnca.org/frnca-directory/		
CDPH/MCAH Requirement	Fetal Infant Mortality Review (FIMR)	Required for FIMR funded LHJs only LHJs funded for Fetal Infant Mortality Review (FIMR) will implement the FIMR Program in accordance with FIMR Policies and Procedures.	Annually, each fiscal year	Report on FIMR activities in the Annual Report/Year-End Survey
CDPH/MCAH Requirement	Black Infant Health (BIH)	Required for BIH funded LHJs only LHJs funded for Black Infant Health (BIH) will implement the BIH Program in accordance with BIH Policies and Procedures.	Annually, each fiscal year	Report on BIH activities in the Annual Reports.
CDPH/MCAH Requirement	Adolescent Family Life Program (AFLP)	Required for AFLP funded LHJs only LHJs funded for Adolescent Family Life Program (AFLP) will implement the AFLP Program in accordance with AFLP Policies and Procedures.	Annually, each fiscal year	Report on AFLP activities in the Annual Report.

Section C: Local Activities by Domain

At least one activity must be selected or the LHJ must develop at least one activity of their own in the Women/Maternal Health Domain

Women/Maternal Health Domain	
<p>Women/Maternal Priority Need: Ensure women in California are healthy before, during and after pregnancy. <i>Women/Maternal Focus Area 1: Reduce the impact of chronic conditions related to maternal mortality.</i></p> <p>Performance Measures (National/State Performance Measures and Evidence-Based Strategy Measure)</p> <p>NPM 1: Well-woman visit (Percent of women with a preventive medical visit in the past year).</p>	
<p>By 2025, reduce the rate of pregnancy-related deaths (up to 1 year after the end of pregnancy) from 11.3 deaths per 100,000 live births (2013 CA-PMISS) to 10.8 deaths per 100,000 live births.</p> <p>Women/Maternal State Objective 1: Strategy 1: Lead surveillance and research associated with pregnancy-related deaths (up to 1 year after the end of pregnancy) in California.</p>	<p>Women/Maternal State Objective 1: Partner to translate findings from pregnancy-related mortality surveillance and research into recommendations for action to improve maternal health and perinatal clinical practices.</p>
<p>Local Activities for Women/Maternal Objective 1: Strategy 1: <input type="checkbox"/> Partner with CDPH/MCAH on dissemination of data findings, guidance and education to the public and local partners, including perinatal obstetric providers.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p> <p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p>	<p>Local Activities for Women/Maternal Objective 1: Strategy 2: <input type="checkbox"/> Partner with CDPH/MCAH on dissemination of recommendations to improve maternal health and perinatal clinical practices, including quality improvement toolkits.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p> <p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p>

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How will impacts be measured?	How will impacts be measured?
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If you have additional local activities, please add a row.

Women/Maternal Health Domain

<p>Priority Need: Ensure women in California are healthy before, during and after pregnancy. <i>Women/Maternal Focus Area 2: Reduce the impact of chronic conditions related to maternal morbidity.</i></p>	
<p>Performance Measures (National/State Performance Measures and Evidence-Based Strategy Measure)</p>	<p>NPM 1: Well-woman visit (Percent of women with a preventive medical visit in the past year).</p>
<p>Women/Maternal State Objective 2: By 2025, reduce the rate of severe maternal morbidity from 91.0 per 10,000 delivery hospitalizations (2015 PDD) to 86.5 per 10,000 delivery hospitalizations.</p>	
<p>Women/Maternal State Objective 2: Strategy 1: Lead surveillance and research related to maternal morbidity in California.</p>	<p>Women/Maternal State Objective 2: Strategy 2: Lead statewide regionalization of maternal care to ensure women receive appropriate care for childbirth.</p>
<p>Local Activities for Women/Maternal Objective 2: Strategy 1 <input type="checkbox"/> Partner with CDPH/MCAH on dissemination of data findings, guidance and education to the public and local partners.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>Local Activities for Women/Maternal Objective 2: Strategy 2 <input type="checkbox"/> Partner with local Regional Perinatal Programs of California (RPPC) Director to understand and promote efforts to establish Maternal Levels of Care.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p>Local Activities for Women/Maternal Objective 2: Strategy 3 <input type="checkbox"/> Partner with CDPH/MCAH to pilot test educational materials addressing chronic health conditions during pregnancy and disseminate to consumers and providers.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>Local Activities for Women/Maternal Objective 2: Strategy 3 <input type="checkbox"/> Partner with CDPH/MCAH to pilot test educational materials addressing chronic health conditions during pregnancy and disseminate to consumers and providers.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>

<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Partner with CDPH/MCAH, RPPC, and Comprehensive Perinatal Services Program (CPSP) to coordinate resources and quality improvement efforts.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> For Black Infant Health (BIH) funded sites only, develop and disseminate statewide media campaigns to inform Black women on chronic health conditions.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Perinatal Service Coordinator (PSC) will partner with Women Infant Children (WIC), RPPC, CDPH/MCAH, Medi-Cal, and other key stakeholders to ensure a coordinated delivery system for women during and after pregnancy.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>

<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input checked="" type="checkbox"/> Other local activity (Please Specify/Optional): Collaborate with San Bernardino County Health officer, Communicable Disease Section, and San Bernardino Medical Society to create a protocol to implement universal syphilis rapid testing screening and treatment for pregnant women presenting to Emergency Departments (ED)</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>Collaborative meetings will be scheduled bi-monthly to plan and track progress.</p> <p>What is your anticipated outcome?</p> <p>Creation of universal syphilis screening protocol for pregnant women presenting to the ED.</p> <p>How will impacts be measured?</p> <p>At least one hospital in high risk area for syphilis will implement universal syphilis screening protocol for pregnant women presenting to the ED.</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
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If you have additional local activities, please add a row.

Woman/Maternal Health Domain	
Priority Need: Ensure women in California are healthy before, during and after pregnancy. Women/Maternal Focus Area 3: Improve mental health for all mothers in California.	
Performance Measures (National/State Performance Measures and Evidence-Based Strategy Measure)	NPM 1: Well-woman visit (Percent of women with a preventive medical visit in the past year).
Women/Maternal State Objective 3: By 2025, increase the receipt of mental health services among women who reported needing help for emotional well-being or mental health concerns during the perinatal period from 49.6% (provisional 2018 MIHA) to 52.1%.	
<p>Women/Maternal State Objective 3: Strategy 1: Partner with state and local programs responsible for the provision of mental health services and early intervention programs to reduce mental health conditions in the perinatal period.</p> <p>Local Activities for Women/Maternal Objective 3: Strategy 1 <input type="checkbox"/> Partner with local programs responsible for the provision of mental health services and early intervention programs to promote mental health services in the perinatal period.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>Women/Maternal State Objective 3: Strategy 2: Partner to strengthen knowledge and skill among health care providers, individuals and families to identify signs of maternal mental health-related needs.</p> <p>Local Activities for Women/Maternal Objective 3: Strategy 2 <input checked="" type="checkbox"/> Perinatal Service Coordinators (PSCs) will provide technical assistance to CPSP providers on new requirements for provider screening of mental health.</p> <p>How will this activity be tracked and measured by the LHJ? During QA/TA visits, PSC will provide assistance on new requirements for provider screening of mental health.</p> <p>What is your anticipated outcome? By June 30, 2022 90% of providers will receive technical assistance related to new requirement of maternal mental health screenings.</p> <p>How will impacts be measured? 70% of CPSP providers that received technical assistance will implement new requirements of maternal mental health screenings.</p> <p><input type="checkbox"/> Partner with local Mental Health Services Act (MHSA)/Prop. 63 funded programs to increase available services to women during perinatal period.</p> <p>How will this activity be tracked and measured by the LHJ?</p>
<p>Women/Maternal State Objective 3: Strategy 3: Partner to ensure pregnant and parenting women are screened utilizing standardized and validated tools and linked to needed services for mental health conditions in the perinatal period.</p> <p>Local Activities for Women/Maternal Objective 3: Strategy 3 <input type="checkbox"/> Implement and utilize standardized and validated mental health screening tools for pregnant and parenting women in MCAH programs.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>Local Activities for Women/Maternal Objective 3: Strategy 3 <input type="checkbox"/> Implement and utilize standardized and validated mental health screening tools for pregnant and parenting women in MCAH programs.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p> <p><input type="checkbox"/> Lead the development of a county maternal mental health algorithm that outlines a referral system and the services available to address maternal mental health.</p>

<p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p> <p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p> <p><input checked="" type="checkbox"/> Partner with CDPH/MCAH to disseminate mental health promotional messages that educate women and families to recognize early signs and symptoms of mental health disorders.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>MCAH Health Education Specialist (HES) will log all the mental health promotional messages posted in our social media and will track traffic related to the posts.</p> <p>What is your anticipated outcome?</p> <p>San Bernardino County women and families will have access to mental health promotional messages from CDPH/MCAH to recognize early signs of mental health disorders.</p> <p>How will impacts be measured?</p> <p>Social media messages will be tracked by number of views and likes.</p>	<p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p> <p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p> <p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p> <p><input checked="" type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>In partnership with RPPC, introduce book "Feelings in Motherhood" (FIM) in birthing hospitals L&D family waiting rooms and NICU units to help family members and friends to recognize early signs of mental health disorders.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>Number of hospitals contacted to request permission to place FIM books in their L&D and NICU family waiting areas, and number of hospitals keeping FIM books in L&D family waiting rooms and NICU.</p>	<p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p> <p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>

	<p>What is your anticipated outcome? Relatives and friends of new parents will have access to FIM books and will understand early signs and symptoms of mental health disorders.</p> <p>How will impacts be measured? Number of hospital participating in this project.</p>	
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if you have additional local activities, please add a row.

Woman/Maternal Health Domain		
<p>Priority Need: Ensure women in California are healthy before, during and after pregnancy. <i>Women/Maternal Focus Area 4: Ensure optimal health before pregnancy and improve pregnancy planning and birth spacing.</i></p>		
<p>Performance Measures (National/State Performance Measures and Evidence-Based Strategy Measure)</p> <p>NPM 1: Well-woman visit (Percent of women with a preventive medical visit in the past year). ESM: The number of Local Health Jurisdictions (LHJs) that report developing or adopting a protocol to link clients (women 22-44) to a provider to access a preventive visit.</p>		
<p>Women/Maternal State Objective 4: By 2025, increase the percent of women who had an optimal interpregnancy interval of at least 18 months from 73.6% (2017 CCMBF) to 76.4%.</p>		
<p>Women/Maternal State Objective 4: Strategy 1: Partner to increase provider and individual knowledge and skill to improve health and health care before and between pregnancies.</p>	<p>Women/Maternal State Objective 4: Strategy 2: Lead a population-based assessment of mothers in California, the Maternal and Infant Health Assessment Survey (MIHA), to provide data to guide programs and services.</p>	<p>Women/Maternal State Objective 4: Strategy 3: Lead the implementation of the Comprehensive Perinatal Service Provider (CPSP) program to ensure access to comprehensive prenatal care for Medi-Cal Fee-for-Service clients.</p>
<p>Local Activities for Women/Maternal Objective 4: Strategy 1 <input checked="" type="checkbox"/> Partner with CDPH/MCAH to disseminate and promote best practices and resources from key preconception initiatives.</p>	<p>Local Activities for Women/Maternal Objective 4: Strategy 2 <input type="checkbox"/> Partner with CDPH/MCAH in the development of the Maternal Infant Health Assessment (MIHA) Survey.</p>	<p>Local Activities for Women/Maternal Objective 4: Strategy 3 <input type="checkbox"/> Partner with Perinatal Service Coordinators (PSCs) to identify and recruit providers in medically underserved areas to increase access to care.</p>
		<p>Local Activities for Women/Maternal Objective 4: Strategy 4 <input type="checkbox"/> Other local activity (Please Specify/Optional):</p>

<p>How will this activity be tracked and measured by the LHJ? Dissemination of promotional messages will be tracked through distribution lists to CPSP providers and to woman and families through social media messages</p> <p>What is your anticipated outcome? Providers and families will have access to CDPH/MCAH preconception best practices and resources.</p> <p>How will impacts be measured? 100% of preconception messages from CDPH/MCAH will be shared with CPSP and shared on social media</p>	<p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p><input type="checkbox"/> Coordinate with CDPH/MCAH to identify uninsured populations, and conduct outreach and awareness of health insurance options.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Partner with CDPH/MCAH to disseminate MIHA data findings and guidance to the general public and local partners.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input checked="" type="checkbox"/> Lead in implementing the local CPSP program and provide monitoring and oversight of providers to ensure quality of care for CPSP clients.</p> <p>How will this activity be tracked and measured by the LHJ? PSC will conduct QA activities through in-person and virtual visits using CPSP QA Form to ensure quality of care.</p> <p>What is your anticipated outcome? 80% of CPSP providers will receive QA visits and have CPSP QA Form completed.</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>

<p><input type="checkbox"/> Partner with CDPH/MCAH to disseminate Healthier Her campaign materials.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>CSP Providers that receive QA visit will score above 80/100 pts on CPSP QA Form</p> <p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p><input type="checkbox"/> Partner with CDPH/MCAH to promote preconception/inter-conception health programs.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p><input checked="" type="checkbox"/> Other local activity (Please Specify/Optional): Will develop a CPSP Preconception Survey to determine baseline of preconception care and identify barriers to implementation</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p>

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 Agreement Number: 202.136

Fiscal Year: SFY 2021-22

<p>How will this activity be tracked and measured by the LHJ? PSC will follow-up with CPSP providers who received survey and collect survey findings through fax or email.</p> <p>What is your anticipated outcome? By June 30, 2022, 30/43 providers will complete a survey.</p> <p>How will impacts be measured? PSC will collect CPSP preconception surveys to determine baseline and barriers to implementation.</p>	<p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
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If you have additional local activities, please add a row.

Woman/Maternal Health Domain			
<p>Performance Measures (National/State Performance Measures and Evidence-Based Strategy Measure)</p>	<p>Priority Need: Ensure women in California are healthy before, during and after pregnancy. <i>Women/Maternal Focus Area 5: Reduce maternal substance use.</i></p> <p>NPM 1: Well-woman visit (Percent of women with preventive medical visit in the a past year).</p>		
<p>By 2025, reduce the rate of maternal substance use from 20.7 per 1,000 delivery hospitalizations (2018 PDD) to 19.7 per 1,000 delivery hospitalizations.</p>	<p>Women/Maternal State Objective 5: Strategy 1: Lead surveillance and research on maternal substance use in California.</p>	<p>Women/Maternal State Objective 5: Strategy 2: Partner at the state and local level to increase prevention and treatment of maternal opioid and other substance use.</p>	
<p><input type="checkbox"/> Coordinate with CDPH/MCAH to disseminate data findings, guidance and education to the public and local partners.</p>	<p><input checked="" type="checkbox"/> Identify county specific resources on treatment and best practices to address substance use and collaborate to improve referral and linkages to services.</p>	<p>Local Activities for Women/Maternal Objective 5: Strategy 2</p>	

<p>How will this activity be tracked and measured by the LHJ? Treatment list will be ready for distribution by end of fiscal year.</p> <p>What is your anticipated outcome? Complete a county wide treatment resource list and best practices.</p> <p>How will impacts be measured? Comprehensive list will be ready by end of fiscal year to be used for future collaborative activities</p> <p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p>	<p>How will this activity be tracked and measured by the LHJ? <input type="checkbox"/> Partner with CDPH/MCAH to disseminate a social media campaign on maternal opioid use.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p> <p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p>	<p>How will this activity be tracked and measured by the LHJ? <input type="checkbox"/> Disseminate the Association of State and Territorial Health Officials (ASTHO) Public Health Perinatal Opioid Toolkit.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p> <p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p>	<p>How will this activity be tracked and measured by the LHJ? <input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p>

<p>What is your anticipated outcome? How will impacts be measured?</p>	<p>What is your anticipated outcome? How will impacts be measured?</p>
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If you have additional local activities, please add a row.

Section C: Local Activities by Domain

At least one activity must be selected or the LHJ must develop at least one activity of their own in the Perinatal/Infant Health Domain

Perinatal/Infant Health Domain	
<p>Perinatal/Infant Priority Need: Ensure all infants are born healthy and thrive in their first year of life. <i>Perinatal/Infant Focus Area 1: Improve healthy infant development through breastfeeding and caregiver/infant bonding.</i></p>	
<p>Performance Measures (National/State Performance Measures and Evidence-Based Strategy Measure)</p> <p>NPM 4a: Percent of infants who are ever breastfed. NPM 4b: Percent of infants breastfed exclusively through 6 months. ESM 4.1: Number of online views/hits to the "Lactation Support for Low-Wage Workers".</p>	
<p>Perinatal/Infant State Objective 1: By 2025, increase the percent of women who report exclusive in-hospital breastfeeding from 70.2% (2018 GDSP) to 73.0%.</p>	
<p>Perinatal/Infant State Objective 1: Strategy 1: Lead surveillance of breastfeeding practices and assessment of initiation and duration trends.</p>	<p>Perinatal/Infant State Objective 1: Strategy 2: Lead technical assistance and training to support breastfeeding initiation, including the implementation of the Model Hospital Policy or Baby Friendly in all California birthing hospitals by 2025.</p>
<p>Local Activities for Perinatal/Infant Objective 1: Strategy 1 <input type="checkbox"/> Monitor and track breastfeeding initiation and duration rates and disseminate data to community and local partners. How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?</p>	<p>Local Activities for Perinatal/Infant Objective 1: Strategy 2 <input type="checkbox"/> Promote breastfeeding education to prenatal women in local MCAH programs. How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?</p>
<p>Local Activities for Perinatal/Infant Objective 1: Strategy 3 <input type="checkbox"/> Partner to develop and disseminate information and resources about policies and best practices to promote extending breastfeeding duration, including lactation accommodation within local MCAH programs. How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?</p>	<p>Local Activities for Perinatal/Infant Objective 1: Strategy 3 <input type="checkbox"/> Partner to develop and disseminate information and resources about policies and best practices to promote extending breastfeeding duration, including lactation accommodation within local MCAH programs. How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?</p>
<p>Local Activities for Perinatal/Infant Objective 1: Strategy 4 <input type="checkbox"/> Partner with Regional Perinatal Program of California (RPPC) Directors to work with local birthing hospitals on messaging related to infant bonding with an emphasis on a client-centered approach. How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?</p>	<p>Local Activities for Perinatal/Infant Objective 1: Strategy 4 <input type="checkbox"/> Partner with birthing hospitals to support infant/caregiver bonding. How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?</p>

<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Partner to disseminate information to the community regarding evidence-based breastfeeding initiation guidance.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Partner with community leaders to promote infant bonding, skin to skin training and outreach activities to dads, partners, and caretakers.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Partner with Regional Perinatal Programs of California (RPPC) Directors to track and assess implementation and technical assistance needs of birthing hospitals related to the implementation of Model Hospital Policy or Baby Friendly.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>

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If you have additional local activities, please add a row.

Perinatal/Infant Health Domain		
Perinatal/Infant Priority Need: Reduce infant mortality with a focus on eliminating disparities. Perinatal/Infant Focus Area 2: Reduce infant mortality with a focus on reducing disparities.		
Performance Measures (National/State Performance Measures and Evidence-Based Strategy Measure)	SPM 1: Preterm birth rate among infants born to non-Hispanic Black women.	
Perinatal/Infant State Objective 2:		
By 2025, reduce the rate of infant deaths from 4.2 per 1,000 live births (2017 BSMF/DSMF) to 4.0.		
<p>Perinatal/Infant State Objective 2: Strategy 1: Lead research and surveillance related to fetal and infant mortality in California.</p> <p>Local Activities for Perinatal/Infant Objective 2: Strategy 1 <input checked="" type="checkbox"/> Monitor and track fetal and infant mortality and disseminate data to community and local partners. How will this activity be tracked and measured by the LHJ? The local fetal mortality rate (FMR) and infant mortality rate (IMR) is tabulated on an annual basis following death statistical master file and fetal death registration system file updates provided by CDPH. Additional IMR measurements include city level stratification and multi-year trend analysis. Accordingly, the LHJ will monitor fetal and infant mortality rates for significant changes, and disseminate rates/trends to local MCAH partners/stakeholders accordingly.</p> <p>What is your anticipated outcome? The LHJ anticipates a fetal and infant mortality rate decline based on strategic planning efforts that identify high-risk populations for public health program service provision.</p> <p>How will impacts be measured? The LHJ will monitor FMR and IMR changes on an annual basis to include geographical stratification for comparison purposes and disseminate indicator updates to local MCAH partners and stakeholders.</p>	<p>Perinatal/Infant State Objective 2: Strategy 2: Fund the implementation of local fetal infant review programs to identify state and local strategies to reduce infant mortality.</p> <p>Local Activities for Perinatal/Infant Objective 2: Strategy 2 <input type="checkbox"/> For non-FIMR funded LHJs, utilize a FIMR-like framework to reduce infant mortality. How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?</p>	<p>Perinatal/Infant State Objective 2: Strategy 3: Lead the California SIDS Program to provide grief and bereavement support to parents, technical assistance, resources and training on infant safe sleep to reduce infant mortality.</p> <p>Local Activities for Perinatal/Infant Objective 2: Strategy 3 <input checked="" type="checkbox"/> Promote and disseminate information and resources related to SIDS/SUID risk factors and reduction strategies. How will this activity be tracked and measured by the LHJ? Number and names of pediatric care providers attending the Child Health and Disability Prevention program overview training will receive SIDS/SUID risks factors and reduction strategies information and resources for their patients. What is your anticipated outcome? Pediatric providers will educate parents on SIDS/SUID risk factors and reduction strategies. How will impacts be measured? Pediatricians that attend CHDP overview training will be surveyed at the end of the year and asked if they used resources to educate parent on SIDS/SUID risk factors and reduction strategies.</p>

<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> For non-FIMR funded LHJs, develop guidelines for investigating fetal and infant death and implement best practices and strategies to reduce infant mortality.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input checked="" type="checkbox"/> Disseminate Safe to Sleep® campaign and Safe Sleep strategies that address SIDS and other sleep-related causes of infant death.</p> <p>How will this activity be tracked and measured by the LHJ? Health Educator Specialist (HES) will compile list of agencies that receive Safe Sleep strategies and information.</p> <p>What is your anticipated outcome? HES will complete 8 safe sleep presentations to foster care agencies.</p> <p>How will impacts be measured? HES will measure knowledge increase after participating in Safe Sleep presentations using pre/post presentation test with agency.</p>
<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Partner with Regional Perinatal Programs of California (RPPC) to work with birthing hospitals to disseminate Sudden Infant Death Syndrome/Sudden Unexpected Infant Death (SIDS/SUID) risk reduction information to parents or guardians of newborns upon discharge.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p>	<p><input type="checkbox"/> Partner with local childcare licensing, birthing facilities, clinics, Women Infant Children (WIC) sites, and medical providers to provide SIDS/SUID and Safe Sleep education.</p> <p>How will this activity be tracked and measured by the LHJ?</p>

<p>How will impacts be measured?</p> <p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>How will impacts be measured?</p> <p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p> <p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
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If you have additional local activities, please add a row.

Perinatal/Infant Health Domain

Perinatal/Infant Priority Need: Reduce infant mortality with a focus on eliminating disparities.
Perinatal/Infant Focus Area 3: Reduce preterm births.

Performance Measures

(National/State Performance Measures and Evidence-Based Strategy Measure)

SPM 1: Preterm birth rate among infants born to non-Hispanic Black women.

Perinatal/Infant State Objective 3:

By 2025, reduce the percentage of preterm births from 8.7% (2017 BSMF) to 8.4%.

Perinatal/Infant State Objective 3:

Strategy 1:
 Lead research and surveillance on disparities in preterm birth rates in California.

Strategy 2:
 Lead the implementation of the Black Infant Health (BIH) Program to reduce the impact of stress due to structural racism to improve Black birth outcomes.

Strategy 3:
 Lead the implementation of the Perinatal Equity Initiative (PEI) to increase perinatal equity in California.

Strategy 4:
 Lead the implementation of the Community Birth Plan (CBP), being piloted in Los Angeles, to build community systems to galvanize health care, public health sectors and communities to collaboratively reduce Black preterm birth.

Strategy 5:
 Lead the development and dissemination of preterm birth reduction strategies across California.

Local Activities for Perinatal/Infant Objective 3: Strategy 1

Local Activities for Perinatal/Infant Objective 3: Strategy 2

Local Activities for Perinatal/Infant Objective 3: Strategy 3

Local Activities for Perinatal/Infant Objective 3: Strategy 4

Local Activities for Perinatal/Infant Objective 3: Strategy 5

<p><input checked="" type="checkbox"/> Monitor and track local preterm birth rates and disseminate data to community and local partners.</p> <p>How will this activity be tracked and measured by the LHJ? The local preterm birth rate is tabulated on an annual basis following birth statistical master file updates provided by CDPH. Additional preterm birth rate measurements include city level stratification and multi-year trend analysis. Accordingly, the LHJ will monitor preterm birth rates for significant changes, and disseminate rates/trends to local MCAH partners/stakeholders accordingly.</p> <p>What is your anticipated outcome? The LHJ anticipates a preterm birth rate decline based on strategic planning efforts that identify high risk populations for public health program service provision.</p> <p>How will impacts be measured? The LHJ will monitor preterm birth rate changes on an annual basis to include geographical stratification for comparison purposes and disseminate indicator updates to local MCAH partners and stakeholders.</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Develop and disseminate preterm birth reduction materials and resources to the Black community (moms, fathers, grandparents, community leaders, and churches) and agencies providing services to Black moms and babies.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Partner with local birthing hospitals, and community stakeholders to disseminate social media campaigns about preterm birth reduction strategies.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
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<input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?	<input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?	<input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?	<input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?	<input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?
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If you have additional local activities, please add a row.

Section C: Local Activities by Domain

At least one activity must be selected or the LHJ must develop at least one activity of their own in the Child Health Domain

Child Health Domain			
<p>Child Priority Need: Optimize the healthy development of all children so they can flourish and reach their full potential. <i>Child Focus Area 1: Expand and support developmental screening.</i></p>			
<p>(National/State Performance Measures and Evidence-Based Strategy Measure)</p> <p>NPM 6: Percentage of children, ages 9 through 35 months, who received a developmental screening using a parent-completed screening tool in the past year.</p> <p>ESM 6.1: Percent of children enrolled in CHVP with at least one developmental screen using a validated instrument within AAP-defined age range (10 months, 18 months, or 24 months' time points) during the reporting period.</p>			
<p>Child State Objective 1: By 2025, increase the percentage of children, ages 9 through 35 months, who received a developmental screening from a health care provider using a parent-completed screening tool in the past year from 25.9% (NSCH 2017-18) to 32.4%.</p>			
<p>Child State Objective 1: Strategy 1: Partner to build data capacity for public health surveillance and program monitoring and evaluation related to developmental screening in California.</p>	<p>Child State Objective 1: Strategy 2: Partner to foster coordination and collaboration between systems to improve developmental screening for young children.</p>	<p>Child State Objective 1: Strategy 3: Partner to educate and build capacity among providers and families to understand developmental milestones and implement best practices in developmental screening and monitoring within MCAH programs.</p>	<p>Child State Objective 1: Strategy 4: Support Implementation of Department of Health Care Services (DHCS) policies regarding developmental screening quality measure and reimbursements to health care providers.</p>
<p>Local Activities for Child Objective 1: Strategy 1: <input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>Local Activities for Child Objective 1: Strategy 2: <input type="checkbox"/> Partner with CDPH/MCAH, Statewide Screening Collaborative, and local stakeholders, such as the local First 5 program or Help Me Grow system, to identify key local resources for developmental screening/linkage.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>Local Activities for Child Objective 1: Strategy 3: <input type="checkbox"/> Partner with CDPH/MCAH and early childhood and family-serving programs to assess current policies and practices on developmental screening and monitoring of developmental milestones to determine whether additional monitoring or screening can be incorporated into the programs.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p>	<p>Local Activities for Child Objective 1: Strategy 4: <input type="checkbox"/> Build capacity by partnering with local Medi-Cal managed care health plans to educate and share information with providers about Medi-Cal developmental screening reimbursement and quality measures.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>

<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Lead the development of a community resource map that links referrals to services.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Partner with providers to educate families in MCAH programs about specific milestones and developmental screening needs.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Track county Medi-Cal managed care health plan developmental screening data.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Develop a social media campaign or other outreach activity for families who missed well-child visits and/or developmental screening due to COVID-19 to educate families on the importance of resuming preventive services.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Partner with Help Me Grow (HMG) and other key partners to educate providers and families about developmental screening recommendations and tools.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Support provider organizations or health plans to implement quality improvement learning collaboratives to improve rates of developmental screening.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p>	<p><input type="checkbox"/> Partner with Women Infant Children (WIC) and other stakeholders to disseminate developmental</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p>

<p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>milestone information, educational resources, and tools.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>

If you have additional local activities, please add a row.

Child Health Domain	
<p>Child Priority Need: Optimize the healthy development of all children so they can flourish and reach their full potential. <i>Child Focus Area 2: Raise awareness of adverse childhood experiences and prevent toxic stress through building resilience.</i></p>	
<p>Performance Measures (National/State Performance Measures and Evidence-Based Strategy Measure)</p>	<p>NPM 6: Percentage of children, ages 9 through 35 months, who received a developmental screening using a parent-completed screening tool in the past year. ESM 6.1: Percent of children enrolled in CHVP with at least one developmental screen using a validated instrument within AAP-defined age range (10 months, 18 months, or 24 months' time points) during the reporting period.</p>
<p>By 2025, increase the percentage of children, ages 0 through 17 years, who live in a home where the family demonstrated qualities of resilience (i.e. met all four resilience items as identified in the NSCH survey) during difficult times from 82.0% (95% CI: 78.2-85.3%) to 84.5%.</p>	
<p>Child State Objective 1: Partner with CDPH Essentials for Childhood and other stakeholders to build data capacity to track and understand experiences of adversity and resilience among children and families.</p>	<p>Child State Objective 2: Strategy 1: Partner to build capacity and expand programs and practices to build family resilience by optimizing the parent-child relationship, enhancing parenting skills, and addressing child poverty through increasing access to safety net programs within MCAH-funded programs.</p>
<p>Local Activities for Child Objective 2: Strategy 1 <input type="checkbox"/> Identify and examine local county data sources for childhood adversity, childhood poverty, and social determinants of health affecting child health and family resilience.</p>	<p>Local Activities for Child Objective 2: Strategy 2 <input type="checkbox"/> Assess current MCAH program practices to promote healthy, safe, stable, and nurturing parent-child relationships.</p>
<p>Local Activities for Child Objective 2: Strategy 3 Participate and promote the California Surgeon General's Adverse Childhood Experiences (ACEs) Aware trainings within local county agencies.</p>	<p>Local Activities for Child Objective 2: Strategy 3 <input checked="" type="checkbox"/> Participate and promote the California Surgeon General's Adverse Childhood Experiences (ACEs) Aware trainings within local county agencies.</p>
<p>How will this activity be tracked and measured by the LHJ?</p>	<p>How will this activity be tracked and measured by the LHJ? Number of MCAH staff, providers and community agencies informed of California Surgeon General's ACEs trainings</p>
<p>What is your anticipated outcome?</p>	<p>What is your anticipated outcome? Local MCAH staff, medical providers and community agencies will participate and learn about ACEs/trauma informed care by participating the in California Surgeon General's ACEs trainings.</p>
<p>How will impacts be measured?</p>	<p>How will impacts be measured? Knowledge of ACEs will improve addition of screening and trauma informed care among child health providers and community agencies</p>

<p><input type="checkbox"/> Partner with CDPH/MCAH to identify opportunities to expand data collection on key childhood adversity and family resilience measures.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Partner with CDPH/MCAH to understand statewide initiatives that address social determinants of health and strengthen economic supports for families.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Share information to support the California Surgeon General's and Department of Health Care Services (DHCS) efforts on trauma screening and training for health care providers.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Identify resources and training opportunities on ACEs and trauma-informed care for local programs.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>

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If you have additional local activities, please add a row.

Child Health Domain	
	<p>Child Priority Need: Optimize the healthy development of all children so they can flourish and reach their full potential. <i>Child Focus Area 3: Support and build partnerships to improve the physical health of all children.</i></p>
	<p>Performance Measures (National/State Performance Measures and Evidence-Based Strategy Measure)</p> <p>NPM 6: Percentage of children, ages 9 through 35 months, who received a developmental screening using a parent-completed screening tool in the past year. ESM 6.1: Percent of children enrolled in CHVP with at least one developmental screen using a validated instrument within AAP-defined age range (10 months, 18 months, or 24 months' time points) during the reporting period.</p>
	<p>NPM 13.2: By 2025, increase the percentage of children, ages 1 through 17 years, who had a preventive dental visit in the past year from 80.2% (95% CI: 76.0- 83.9) [NSCH 2017-18] to 82.6%.</p>
	<p>Support the CDPH Office of Oral Health in their efforts to increase access to regular preventive dental visits for children by sharing information with MCAH programs.</p>
<p style="text-align: center;">Local Activities for Child Objective 3: Strategy 1</p>	
	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p>
	<p>How will this activity be tracked and measured by the LHJ?</p>
	<p>What is your anticipated outcome?</p>
	<p>How will impacts be measured?</p>
<p>If you have additional local activities, please add a row.</p>	

Child Health Domain	
<p>Child Priority Need: Optimize the healthy development of all children so they can flourish and reach their full potential. <i>Child Focus Area 3: Support and build partnerships to improve the physical health of all children.</i></p>	
<p>Performance Measures (National/State Performance Measures and Evidence-Based Strategy Measure)</p>	<p>NPM 6: Percentage of children, ages 9 through 35 months, who received a developmental screening using a parent-completed screening tool in the past year. ESM 6.1: Percent of children enrolled in CHVP with at least one developmental screen using a validated instrument within AAP-defined age range (10 months, 18 months, or 24 months' time points) during the reporting period.</p>
<p>Child State Objective 4: SPM: By 2025, decrease the percentage of 5th grade students who are overweight or obese from 40.5% (2018) to 39.3%.</p>	
<p>Partner to enable the reporting of data on childhood overweight and obesity in California.</p>	<p>Partner with WIC and others to provide technical assistance to local MCAH programs to support healthy eating and physically active lifestyles for families.</p>
<p>Local Activities for Child Objective 4: Strategy 1</p>	
<p><input type="checkbox"/> Utilize guidance to inform local-level prevention initiatives (contingent upon CDPH/MCAH procuring sub-State-level data on child overweight and obesity).</p>	<p><input type="checkbox"/> Partner with Women Infant Children (WIC), local healthy community programs and initiatives, CDPH/MCAH programs, stakeholders to identify resources, best practices and tools on healthy eating to share with families in MCAH programs.</p>
<p>How will this activity be tracked and measured by the LHJ?</p>	<p>How will this activity be tracked and measured by the LHJ?</p>
<p>What is your anticipated outcome?</p>	<p>What is your anticipated outcome?</p>
<p>How will impacts be measured?</p>	<p>How will impacts be measured?</p>
<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p>	<p><input type="checkbox"/> Partner with Women Infant Children (WIC), and other local programs to refer and link eligible families to WIC and other healthy food resources.</p>
<p>How will this activity be tracked and measured by the LHJ?</p>	<p>How will this activity be tracked and measured by the LHJ?</p>
<p>What is your anticipated outcome?</p>	<p>What is your anticipated outcome?</p>

<p>How will impacts be measured?</p> <p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>How will impacts be measured?</p> <p><input type="checkbox"/> Partner with CDPH/MCAH to utilize the Policies, Systems, and Environmental Change Toolkit to improve physical activity, nutrition, and breastfeeding within the local health jurisdiction.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input checked="" type="checkbox"/> Share the child MyPlate and related messaging with families and providers to promote healthy eating in children.</p> <p>How will this activity be tracked and measured by the LHJ? Maintain a list of pediatric providers who received Child MyPlate information</p> <p>What is your anticipated outcome? 50 staff members from the 138 Medi-Cal pediatric CHDP offices will receive the "Child MyPlate" information during nutrition training and 30 will be using it to educate patients and families.</p> <p>How will impacts be measured? Survey providers attending the training to learn if they are using the Child MyPlate with their patients and families.</p> <p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p>
<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p>

Local Health Jurisdiction: San Bernardino
Agreement Number: 202136

Fiscal Year: SFY 2021-22

How will impacts be measured?	How will impacts be measured?
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If you have additional local activities, please add a row.

Section C: Local Activities by Domain

At least one activity must be selected or the LHJ must develop at least one activity of their own in the CYSHCN Health Domain

Children and Youth with Special Health Care Needs (CYSHCN) Domain			
CYSHCN Priority Need 1: Make systems of care easier to navigate for CYSHCN and their families. CYSHCN Focus Area 1: Build capacity at the state and local levels to improve systems that serve CYSHCN and their families.			
Performance Measures (National/State Performance Measures and Evidence-Based Strategy Measure) NPM 12: Percent of adolescents with and without special health care needs who receive services necessary to make transitions to adult health care. ESM 12.1: Percentage of local MCAH programs that implement a Scope of Work objective focused on CYSHCN public health systems.			
CYSHCN State Objective 1: By 2025, increase the percentage (from 0 to x%) of local MCAH programs that implement a Scope of Work objective focused on CYSHCN public health systems and services. * *Number to be determined			
CYSHCN State Objective 1: Strategy 1: Lead state and local MCAH capacity-building efforts to improve and expand public health systems and services for CYSHCN.	CYSHCN State Objective 1: Strategy 2: Lead program outreach and assessment within State MCAH to ensure best practices for serving CYSHCN are integrated into all MCAH programs.	CYSHCN State Objective 1: Strategy 3: Partner to build data capacity to understand needs and health disparities in the CYSHCN population.	CYSHCN State Objective 1: Strategy 4: Lead the establishment of a state-level learning collaborative to improve systems for CYSHCN through a national collaboration with the five largest states (CA, FL, IL, NY, and TX), known collectively as the Big 5.
Local Activities for CYSHCN Objective 1: Strategy 1 <input type="checkbox"/> Conduct an environmental scan focused on children and youth with special health care needs and their families, including needs, gaps, and resources available in your county or region. How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?	Local Activities for CYSHCN Objective 1: Strategy 2 <input type="checkbox"/> Create or update a resource guide or diagram to help families, providers, and organizations understand the landscape of available local resources in the community. How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?	Local Activities for CYSHCN Objective 1: Strategy 3 <input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?	Local Activities for CYSHCN Objective 1: Strategy 4 <input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?

<p><input type="checkbox"/> Improve coordination of emergency preparedness and disaster relief support for Children and Youth with Special Health Care Needs (CYSHCN) and their families (COVID-19, wildfires, earthquakes, etc.)</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input checked="" type="checkbox"/> Other local activity (Please Specify/Optional): Assess children under the age of 6 at risk for developmental and behavioral delays and link to medical, dental, and behavioral health services when needed.</p> <p>How will this activity be tracked and measured by the LHJ? Using the Monthly Activity Log, the SART PHN will track the number of children under six year of age, who receive an ASQ developmental assessment, and also track the number of linkages to medical, dental, and behavioral health services that these same children receive.</p> <p>What is your anticipated outcome? By June 30th, 2022; at least 80% of the children under the age of 6 years identified at risk for developmental and/or behavioral delays, will be linked to medical, dental, and behavioral health services when needed.</p> <p>How will impacts be measured?</p> <ul style="list-style-type: none"> • Number of children under the age of 6 years who were assessed for developmental and/or behavioral delays. • Number of children under the age of 6 years who were identified at risk for developmental and/or behavioral delays. • Number of children who received at least one linkage to medical, dental, and behavioral health services as needed. 	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
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<input type="checkbox"/> Conduct a local data/evaluation project focused on CYSHCN. How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?	<input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?	<input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?	<input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?
<input type="checkbox"/> Create or join a public health taskforce focused on the needs of CYSHCN in your county or region. How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?	<input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?	<input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?	<input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?

	<input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?	<input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?	<input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?
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If you have additional local activities, please add a row.

Children and Youth with Special Health Care Needs (CYSHCN) Domain		
CYSHCN Priority Need 1: Make systems of care easier to navigate for CYSHCN and their families.		
CYSHCN Focus Area 1: Build capacity at the state and local levels to improve systems that serve CYSHCN and their families.		
Performance Measures (National/State Performance Measures and Evidence-Based Strategy Measure)		
NPM 12: Percent of adolescents with and without special health care needs who receive services necessary to make transitions to adult health care		
ESM 12.1: Percentage of local MCAH programs that implement a Scope of Work objective focused on CYSHCN public health systems		
By 2025, increase the % of adolescents with special health care needs, ages 12 through 17, who received services necessary to make transitions to adult health care from 12.6% to 13.9%. (NSCH 2017-18)		
CYSHCN State Objective 2:		
CYSHCN State Objective 1: Partner on identifying and incorporating best practices to ensure that CYSHCN and their families receive support for a successful transition to adult health care.	CYSHCN State Objective 2: Strategy 2: Fund DHCS/ISCD to assist CCS counties in providing necessary care coordination and case management to CYSHCN in Medi-Cal and CCS to facilitate timely and effective access to care and appropriate community resources.	CYSHCN State Objective 2: Strategy 3: Fund DHCS/ISCD to increase timely access to qualified providers for CYSHCN in Medi-Cal and CCS clients to facilitate coordinated care.
Local Activities for CYSHCN Objective 2: Strategy 1 <input type="checkbox"/> Conduct an environmental scan in your county and/or region to understand needs, strengths, barriers, and opportunities in the transition to adult health care, supports, and services for youth with special health care needs.	Local Activities for CYSHCN Objective 2: Strategy 2 <input type="checkbox"/> Other local activity (Please Specify/Optional):	Local Activities for CYSHCN Objective 2: Strategy 3 <input type="checkbox"/> Other local activity (Please Specify/Optional):
How will this activity be tracked and measured by the LHJ?	How will this activity be tracked and measured by the LHJ?	How will this activity be tracked and measured by the LHJ?
What is your anticipated outcome?	What is your anticipated outcome?	What is your anticipated outcome?
How will impacts be measured?	How will impacts be measured?	How will impacts be measured?
<input type="checkbox"/> Develop a communication and/or outreach campaign focused on transition from pediatric care to adult health care, including supports and services for youth with special health care needs.	<input type="checkbox"/> Other local activity (Please Specify/Optional):	<input type="checkbox"/> Other local activity (Please Specify/Optional):
How will this activity be tracked and measured by the LHJ?	How will this activity be tracked and measured by the LHJ?	How will this activity be tracked and measured by the LHJ?

<p>What is your anticipated outcome? How will impacts be measured?</p>	<p>What is your anticipated outcome? How will impacts be measured?</p>	<p>What is your anticipated outcome? How will impacts be measured?</p>
<p><input type="checkbox"/> Create/join a local learning collaborative or workgroup focused on the transition to adult health care and supports and services for youth with special health care needs. How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?</p>
<p><input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?</p>

If you have additional local activities, please add a row.

Children and Youth with Special Health Care Needs (CYSHCN) Domain		
CYSHCN Priority Need 2: Increase engagement and build resilience among CYSHCN and their families. CYSHCN Focus Area 2: Empower and support CYSHCN, families, and family-serving organizations to participate in health program planning and implementation.		
Performance Measures (National/State Performance Measures and Evidence-Based Strategy Measure)		
<p>NPM 12: Percent of adolescents with and without special health care needs who receive services necessary to make transitions to adult health care. ESM 12.1: Percentage of local MCAH programs that implement a Scope of Work objective focused on CYSHCN public health systems.</p> <p>CYSHCN State Objective 3: By 2025, x of 61 local MCAH programs will select a SOW objective focused on family engagement, social/community inclusion, and/or family strengthening for CYSHCN.*</p> <p style="text-align: center;"><i>* To be determined.</i></p>		
<p>CYSHCN State Objective 3: Strategy 1: Partner to train and engage CYSHCN and families to improve CYSHCN-serving systems through input and involvement in state and local MCAH program design, implementation, and evaluation.</p> <p>Local Activities for CYSHCN Objective 3: Strategy 1 <input type="checkbox"/> Attend a Family Voices of California Project Leadership Training-of-Trainers and implement local Project Leadership Trainings. http://www.familyvoicesofca.org/project-leadership/</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>CYSHCN State Objective 3: Strategy 2: Fund DHCS/ISCD to support continued family engagement in CCS program improvement, including the Whole Child Model, to assist families of CYSHCN in navigating services.</p> <p>Local Activities for CYSHCN Objective 3: Strategy 2 <input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>CYSHCN State Objective 3: Strategy 3: Support statewide and local efforts to increase resilience among CYSHCN and their families.</p> <p>Local Activities for CYSHCN Objective 3: Strategy 3 <input type="checkbox"/> Design and implement a project focused on social and community inclusion for CYSHCN and their families.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>

<p><input type="checkbox"/> Within your county or region, create and deliver a training on family engagement for LHJ staff and partners.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Promote trauma-informed practices specific to CYSHCN and families to ensure local MCAH programs such as home visiting and public health nursing have a trauma-informed approach that is inclusive of CYSHCN.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p><input type="checkbox"/> Other (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>

If you have additional local activities, please add a row.

Section C: Local Activities by Domain	
At least one activity must be selected or the LHJ must develop at least one activity of their own in the Adolescent Health Domain	
Adolescent Domain	
Adolescent Priority Need 1: Enhance strengths, skills and supports to promote positive development and ensure youth are healthy and thrive. <i>Adolescent Focus Area 1: Improve sexual and reproductive health and well-being for all adolescents in California.</i>	
Performance Measures (National/State Performance Measures and Evidence-Based Strategy Measure)	<p>NPM 10: Percent of adolescents, ages 12 through 17, with a preventive medical visit in the past year.</p> <p>ESM 10.1: Percent of APLP participants who received a referral for preventive services.</p>
Adolescent State Objective 1:	
<p>By 2025, increase the proportion of sexually active adolescents who use condoms and/or hormonal or intrauterine contraception to prevent pregnancy and provide barrier protection against sexually transmitted diseases as measured by:</p> <ul style="list-style-type: none"> • percent of sexually active adolescents who used a condom at last sexual intercourse from 55% to 58% • percent of sexually active adolescents who used the most effective or moderately effective methods of FDA-approved contraception from 23% to 25%. 	
Adolescent State Objective 1: Strategy 1: Lead surveillance and program monitoring and evaluation related to adolescent sexual and reproductive health.	Adolescent State Objective 1: Strategy 2: Lead to strengthen knowledge and skills to increase use of protective sexual health practices within MCAH-funded programs.
Local Activities for Adolescent Objective 1: Strategy 1	Local Activities for Adolescent Objective 1: Strategy 2
<input type="checkbox"/> Utilize California Adolescent Sexual Health Needs Index (CASHNI) to target adolescent sexual health programs and efforts to high need youth. How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?	<input type="checkbox"/> Partner with CDPH/MCAH to disseminate education materials and resources related to effective protective sexual health practices for youth, with a focus on reaching local health care professionals and parents/caregivers. How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?
Adolescent State Objective 1: Strategy 3: Partner across state and local health and education systems to implement effective comprehensive sexual health education in California.	Local Activities for Adolescent Objective 1: Strategy 3
<input type="checkbox"/> For non-California Personal Responsibility Education Program (CA PREP) and Information and Education Program (I&E) funded counties, partner with local PREP and I&E agencies and other community partners to ensure local implementation of evidence-based and/or evidence-informed sexual health education to high need youth. How will this activity be tracked and measured by the LHJ? What is your anticipated outcome?	

<p><input type="checkbox"/> Utilize and disseminate Adolescent Sexual Health County Profiles to the public and local partners.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> For Adolescent Family Life Planning (AFLP)-funded counties, promote healthy sexual behaviors and healthy relationships among expectant and parenting youth.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>How will impacts be measured?</p> <p><input type="checkbox"/> Partner with stakeholders to review and ensure all sexual health education curricula provided in the county align with the California Healthy Youth Act (CHYA).</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p><input type="checkbox"/> Utilize and disseminate California's Adolescent Birth Rate (ABR) data report to the public and local partners.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> For non-Adolescent Family Life Planning (AFLP) funded counties, partner with local AFLP-funded agencies and other community partners to ensure utilization of best practices to promote healthy sexual behaviors and healthy relationships among high need youth populations.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p><input type="checkbox"/> Other (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p>	<p><input type="checkbox"/> Build capacity of local MCAH workforce to promote protective adolescent sexual health practices.</p> <p>How will this activity be tracked and measured by the LHJ?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p>

<p>What is your anticipated outcome? How will impacts be measured?</p>	<p>What is your anticipated outcome? How will impacts be measured?</p>	<p>What is your anticipated outcome? How will impacts be measured?</p>
<p><input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?</p>	<p><input type="checkbox"/> Improve parent and caring adult engagement in supporting adolescent sexual health. How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?</p>
<p><input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?</p>	<p><input type="checkbox"/> Other (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?</p>	<p><input type="checkbox"/> Other local activity (Please Specify/Optional): How will this activity be tracked and measured by the LHJ? What is your anticipated outcome? How will impacts be measured?</p>

If you have additional local activities, please add a row.

Adolescent Domain	
<p>Adolescent Priority Need: Enhance strengths, skills and supports to promote positive development and ensure youth are healthy and thrive. <i>Adolescent Focus Area 2: Improve awareness of and access to youth-friendly services for all adolescents in California.</i></p>	
<p>Performance Measures (National/State Performance Measures and Evidence-Based Strategy Measure)</p>	<p>NPM 10: Percent of adolescents, ages 12 through 17, with a preventive medical visit in the past year. ESM 10.1: Percent of AFLP participants who received a referral for preventive services.</p>
<p>Adolescent State Objective 2:</p>	
<p>By 2025, increase the percent of adolescents 12 through 17 with a preventive medical visit in the past year from 76.2% to 83.8%.</p>	
<p>Adolescent State Objective 2: Strategy 1:</p>	
<p>Lead to develop and implement best practices in MCAH funded programs to support youth with accessing youth-friendly preventative care, sexual and reproductive health care, and mental health care.</p>	
<p>Adolescent State Objective 2: Strategy 2:</p>	
<p>Partner with the CDPH Adolescent Preventive Health Initiative to increase the quality of preventive care for adolescents in California.</p>	
<p>Local Activities for Adolescent Objective 2: Strategy 1</p>	
<p><input type="checkbox"/> Implement evidence-based screening tools or assessments to connect adolescents in local MCAH programs to needed services.</p>	
<p>How will this activity be tracked and measured by the LHJ?</p>	
<p>What is your anticipated outcome?</p>	
<p>How will impacts be measured?</p>	
<p><input type="checkbox"/> Lead the development of a community pathway map that links referrals to services for young people.</p>	
<p>How will this activity be tracked and measured by the LHJ?</p>	
<p>What is your anticipated outcome?</p>	
<p>Local Activities for Adolescent Objective 2: Strategy 2</p>	
<p><input type="checkbox"/> Partner with CDPH/MCAH on dissemination of Adolescent Preventive Health Initiative (APHI) communications platform to health care providers to improve adolescent health care.</p>	
<p>How will this activity be tracked and measured by the LHJ?</p>	
<p>What is your anticipated outcome?</p>	
<p>How will impacts be measured?</p>	
<p><input type="checkbox"/> Other (Please Specify/Optional):</p>	
<p>How will this activity be tracked and measured by the LHJ?</p>	
<p>What is your anticipated outcome?</p>	

<p>How will impacts be measured?</p> <p><input type="checkbox"/> Partner to disseminate adolescent preventive care recommendations to improve the quality of adolescent health services.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p> <p><input type="checkbox"/> Other (Please Specify/Optional):</p>	<p>How will impacts be measured?</p> <p><input type="checkbox"/> Other local activity (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p> <p><input type="checkbox"/> Other (Please Specify/Optional):</p>	<p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>

If you have additional local activities, please add a row.

Adolescent Domain	
<p>Priority Need: Enhance strengths, skills and supports to promote positive development and ensure youth are healthy and thrive. <i>Adolescent Focus Area 3: Improve social, emotional, and mental health and build resilience among all adolescents in California.</i></p>	
<p>Performance Measures (National/State Performance Measures and Evidence-Based Strategy Measure)</p> <p>NPM 10: Percent of adolescents, ages 12 through 17, with a preventive medical visit in the past year. ESM 10.1: Percent of AFLP participants who received a referral for preventive services.</p>	
<p>Adolescent State Objective 3: By 2025, increase the percent of adolescents aged 12-17 who have an adult in their lives with whom they can talk to about serious problems from 77.2% to 79.7%.</p>	
<p>Adolescent State Objective 3: Strategy 1: Partner to strengthen resilience among expectant and parenting adolescents to improve health, social, and educational outcomes.</p> <p>Local Activities for Adolescent Objective 3: Strategy 1 <input type="checkbox"/> Partner with CDPH/MCAH to utilize evidence-based tools and resources, such as the Positive Youth Development (PYD) Model, to build youth resiliency to improve health, social, and educational outcomes among expectant and parenting youth.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>Adolescent State Objective 3: Strategy 2: Partner to identify opportunities to build protective factors for adolescents at the individual, community and systems levels.</p> <p>Local Activities for Adolescent Objective 3: Strategy 2 <input type="checkbox"/> Utilize the Adolescent Sexual Health Workgroup (ASHWG) Positive Youth Development (PYD) Organizational Assessment and Toolkit to build agency capacity to engage and promote youth leadership and youth development.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p>Adolescent State Objective 3: Strategy 3: Partner to strengthen knowledge and skills among providers, individuals and families to identify signs of distress and mental health related-needs among adolescents.</p> <p>Local Activities for Adolescent Objective 3: Strategy 3 <input type="checkbox"/> Identify local needs and assets relating to adolescent mental health.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p>Adolescent State Objective 3: Strategy 3: Partner to strengthen knowledge and skills among providers, individuals and families to identify signs of distress and mental health related-needs among adolescents.</p> <p>Local Activities for Adolescent Objective 3: Strategy 3 <input type="checkbox"/> Identify local needs and assets relating to adolescent mental health.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>

<p><input type="checkbox"/> For non-Adolescent Family Life Planning (AFLP)-funded counties, participate on local AFLP agency's Local Stakeholder Coalition.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Establish or join a local youth advisory board to incorporate youth voice and feedback into local MCAH health programs.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Partner with or join a local adolescent health coalition and develop a strategic plan to improve adolescent mental health.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>
<p><input type="checkbox"/> Partner with CDPH/MCAH in utilization and dissemination of updated physical activity and nutrition guidelines to promote well-being among adolescent parents.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Partner to understand and promote efforts to improve youth engagement and leadership opportunities.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input checked="" type="checkbox"/> Partner to disseminate training opportunities and resources related to adolescent mental health such as Mental Health First Aid and Question Persuade Refer (QPR), a suicide prevention training.</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>MCAH will keep a log with shared adolescent mental health trainings and resources and maintain distribution lists of pediatric, family practice providers and local community agencies that receive the messages.</p> <p>What is your anticipated outcome?</p> <p>Local community agencies and providers serving adolescents will have the opportunity to participate in adolescent mental health trainings and expand their resources.</p> <p>How will impacts be measured?</p> <p>Local community agencies and providers will be able to incorporate resources and mental health strategies learned from the trainings.</p>

<p><input type="checkbox"/> Other (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input type="checkbox"/> Other (Please Specify/Optional):</p> <p>How will this activity be tracked and measured by the LHJ?</p> <p>What is your anticipated outcome?</p> <p>How will impacts be measured?</p>	<p><input checked="" type="checkbox"/> Other (Please Specify/Optional):</p> <p>To develop an adolescent mental health resources list for medical providers, including school mental health resources, DBH and managed care plans</p> <p>How will this activity be tracked and measured by the LHJ? Number of CHDP medical providers that received the adolescent mental health resource list</p> <p>What is your anticipated outcome? By June 30, 2022 100% of CHDP providers will receive and 30% will utilize the adolescent mental health resource list.</p> <p>How will impacts be measured? Survey CHDP providers to verify utilization of resource list.</p>
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If you have additional local activities, please add a row.

BUDGET SUMMARY

FISCAL YEAR
2021-22

BUDGET STATUS
ACTIVE

BUDGET BALANCE
0.05

Version 7.0 - 150 Quarterly 4.20.20

Program: Maternal, Child and Adolescent Health (MCAH)

Agency: 202136 San Bernardino

SubK:

UNMATCHED FUNDING					
MCAH-TV	MCAH-SIDS	AGENCY FUNDS	MCAH-City NE	ENHANCED MATCHING (75/25)	
(1)	(2)	(3)	(4)	(5)	(6)
TOTAL FUNDING	%	MCAH-TV	%	MCAH-SIDS	%
1,087,468.93	19.46%	184,919.59	1.70%	19,296.66	28.04%
65,556.20		14,235.17		207.05	
0.00		0.00		0.00	
2,000.55		2,000.55		0.00	
175,091.96		57,065.69		3,063.24	
BUDGET TOTALS*		258,221.00	1.70%	22,566.95	28.04%
		0.00		0.05	

MCAH-TV	MCAH-SIDS	AGENCY FUNDS	MCAH-City NE	ENHANCED MATCHING (75/25)	#VALUE!
(7)	(8)	(9)	(10)	(11)	(12)
%	%	%	%	%	%
175,763.61	13,044.74	222,057.29	38,069.24	111,963.03	485,431.78
0.00	0.00	0.00	0.00	0.00	0.00
0.00	0.00	0.00	0.00	0.00	0.00
0.00	0.00	0.00	0.00	0.00	0.00
0.00	0.00	0.00	0.00	0.00	0.00
BUDGET TOTALS*		188,808.35	28.04%	372,089.56	36.58%
		0.00		485,431.78	

EXPENSE CATEGORY

(I) PERSONNEL	1,087,468.93	184,919.59	19,296.66	175,763.61	222,057.29	485,431.78
(II) OPERATING EXPENSES	65,556.20	14,235.17	207.05	13,044.74	38,069.24	0.00
(III) CAPITAL EXPENDITURES	0.00	0.00	0.00	0.00	0.00	0.00
(IV) OTHER COSTS	2,000.55	2,000.55	0.00	0.00	0.00	0.00
(V) INDIRECT COSTS	175,091.96	57,065.69	3,063.24	0.00	0.00	0.00
BUDGET TOTALS*	1,327,117.64	258,221.00	1.70%	188,808.35	372,089.56	485,431.78
		0.00		0.05		

BALANCE(S)

TOTAL MCAH-TV	258,221.00	258,221.00
TOTAL MCAH-SIDS	22,566.95	22,566.95
TOTAL TITLE XIX	550,118.63	
TOTAL AGENCY FUNDS	496,211.06	188,808.35

AGENCY FISCAL AGENT'S SIGNATURE

DATE

\$ 830,906.58

Maximum Amount Payable from State and Federal resources

WE CERTIFY THAT THIS BUDGET HAS BEEN CONSTRUCTED IN COMPLIANCE WITH ALL MCAH ADMINISTRATIVE AND PROGRAM POLICIES.

MCAH/PROJECT DIRECTOR'S SIGNATURE

DATE

* These amounts contain local revenue submitted for information and matching purposes. MCAH does not reimburse Agency contributions.

STATE USE ONLY - TOTAL STATE AND FEDERAL REIMBURSEMENT					
PCA Codes	MCAH-TV	MCAH-SIDS	AGENCY FUNDS	MCAH-City NE	MCAH-City E
(I) PERSONNEL	(II) OPERATING EXPENSES	(III) CAPITAL EXPENSES	(IV) OTHER COSTS	(V) INDIRECT COSTS	Totals for PCA Codes
53107	184,919.59	19,296.66	175,763.61	38,069.24	53117
14,235.17	14,235.17	207.05	13,044.74	11,028.66	364,073.84
0.00	0.00	0.00	0.00	0.00	0.00
2,000.55	2,000.55	0.00	0.00	0.00	0.00
57,065.69	57,065.69	3,063.24	0.00	0.00	0.00
830,906.58	258,221.00	22,566.95	188,808.35	186,044.79	364,073.84

Program: **Maternal, Child and Adolescent Health (MCAH)**
 Agency:
 SubK:

(II) OPERATING EXPENSES DETAIL

	TOTAL FUNDING		UNMATCHED FUNDING							NON-ENHANCED MATCHING (60/60)		ENHANCED MATCHING (75/25)		% PERSONNEL MATCH 64.80%		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)		(14)	(15)
		%	MCAH-TV	%	MCAH-SIDS	%	AGENCY FUNDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*		%	Combined Fed/Agency*
TOTAL OPERATING EXPENSES	65,556.20		14,235.17		207.05		13,044.74					38,069.24			14.60%	0.00
TRAVEL	9,700.00	61.08%	5,924.76	1.00%	97.00	5.00%	485.00					3,193.24				0.00
TRAINING	3,065.00	38.11%	1,168.07		0.00	35.89%	1,100.03					796.90				0.00
1 Office / Outside Supplies	900.00	17.04%	153.36	2.57%	23.13	15.59%	140.31					583.20				
2 Facilities Costs	22,294.36	9.84%	2,193.77		0.00	25.36%	5,663.85					14,446.75				
3 Local MCAH Travel	5,300.00	12.56%	865.68	1.64%	86.92	21.00%	1,113.00					3,434.40				
4 Minor Office Equipment Maintenance	200.00	14.20%	28.40		0.00	21.00%	42.00					129.60				
5 Communications	12,333.84	14.20%	1,751.41		0.00	21.00%	2,590.11					7,992.33				
6 Postage	425.00	14.20%	60.35		0.00	21.00%	89.25					275.40				
7 Duplicating	200.00	14.20%	28.40		0.00	21.00%	42.00					129.60				
8 Center for Employee Health and Wellness / Background Checks	800.00	14.20%	113.60		0.00	21.00%	168.00					518.40				
9 Toll-free Communications	200.00	79.00%	158.00		0.00	21.00%	42.00					0.00				
10 County Counsel/Contracts Unit	3,740.00	14.20%	531.08		0.00	21.00%	785.40					2,423.52				
11 Software License (e.g., SPSS, AVSS, SAS, or other)	1,000.00	14.20%	142.00		0.00	21.00%	210.00					648.00				
12 Audit Expense	100.00	14.20%	14.20		0.00	21.00%	21.00					64.80				
13 Minor Office Equipment	300.00	14.20%	42.60		0.00	21.00%	63.00					194.40				
14 Computer Equipment	4,998.00	25.20%	1,259.50		0.00	10.00%	499.80					3,238.70				
15			0.00		0.00		0.00					0.00				

** Unmatched Operating Expenses are not eligible for Federal matching funds (Title XIX). Expenses may only be charged to Unmatched Title V (Col. 3), State General Funds (Col. 5), and/or Agency (Col. 7) funds.

(III) CAPITAL EXPENDITURE DETAIL

TOTAL CAPITAL EXPENDITURES	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
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(IV) OTHER COSTS DETAIL

TOTAL OTHER COSTS	2,000.55	2,000.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SUBCONTRACTS																
1			0.00													
2			0.00													
3			0.00													
4			0.00													
5			0.00													

OTHER CHARGES

1 Educational Materials	2,000.55	100.00%	2,000.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2			0.00													
3			0.00													
4			0.00													
5			0.00													
6			0.00													
7			0.00													
8			0.00													

(V) INDIRECT COSTS DETAIL

TOTAL INDIRECT COSTS	172,091.96	33.16%	57,065.69	3,063.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15.83% of Total Wages + Fringe Benefits	172,091.96	33.16%	57,065.69	3,063.24	1.78%	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

		UNMATCHED FUNDING				NON-ENHANCED MATCHING (60/60)		ENHANCED MATCHING (75/25)	
		MCAH-TV		MCAH-SIDS		AGENCY FUNDS		MCAH-City NE	
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
		TOTAL FUNDING		MCAH-TV		MCAH-SIDS		AGENCY FUNDS	
		%		%		%		%	
		Agency Funds*		Combined Fed/Agency*		Combined Fed/Agency*		Combined Fed/Agency*	
		%		%		%		%	

ID	FULL NAME (First Name Last Name)	TITLE OR CLASSIFICATION (No Acronyms)	% FTE	TOTAL PERSONNEL COSTS		ANNUAL SALARY	%	MCAH-TV	%	MCAH-SIDS	%	AGENCY FUNDS	%	NON-ENHANCED MATCHING (60/60)	%	ENHANCED MATCHING (75/25)	%	J-Pers MCF	Staff Traveling (X)
				FRINGE BENEFIT RATE	TOTAL WAGES														
1	MCAH - 3242																		
2	Trent Chandler	Accountant III / Staff Analyst II	10.00%	72,103.00	7,210.00	79,313.00	60.00%	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3	Stewart Hunter	Administrative Supervisor I	6.50%	88,494.00	5,752.00	94,246.00	31.60%	4,326.00	0.00	0.00	40.00%	2,884.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4	Ivan Pinto	Automated Systems Analyst I	0.50%	68,512.00	343.00	68,855.00	5.00%	1,817.63	0.00	0.00	22.00%	1,265.44	2,668.93	0.00	0.00	0.00	0.00	0.00	0.00
5	Theresa Almanza	Automated Systems Technician	0.50%	54,159.00	271.00	54,430.00	5.00%	17.15	0.00	0.00	95.00%	325.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00
6	Monique Arnis	Division Chief	9.00%	119,563.00	10,761.00	130,324.00	31.60%	13.65	0.00	0.00	22.00%	257.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00
7	David Pratt	Epidemiologist	31.00%	76,099.00	23,591.00	99,690.00	31.60%	3,400.48	0.00	0.00	22.00%	2,367.42	4,993.10	10,946.22	0.00	0.00	0.00	0.00	0.00
8	Kathleen Berry	Fiscal Assistant	5.00%	43,010.00	2,151.00	45,161.00	31.60%	7,454.76	0.00	0.00	22.00%	5,190.02	998.06	0.00	0.00	0.00	0.00	0.00	0.00
9	Charlene Lunasco	Fiscal Specialist	1.00%	47,953.00	480.00	48,433.00	31.60%	151.68	0.00	0.00	22.00%	105.60	222.72	0.00	0.00	0.00	0.00	0.00	0.00
10	Beatriz Vasquez	Health Education Specialist I	0.50%	57,592.00	288.00	57,880.00	31.60%	91.01	0.00	0.00	22.00%	63.36	133.63	0.00	0.00	0.00	0.00	0.00	0.00
11	Beatrix Vasquez	Health Education Specialist II	0.50%	61,881.00	309.00	62,190.00	31.60%	97.64	0.00	0.00	22.00%	67.98	143.38	0.00	0.00	0.00	0.00	0.00	0.00
12	Vacant	MCAH Co-Dir (Phys II / Health Officer)	48.00%	142,002.00	68,161.00	210,163.00	31.60%	21,538.88	0.00	0.00	22.00%	14,995.42	7,770.35	35.00%	0.00	0.00	0.00	0.00	0.00
13	Vacant	MCAH Co-Director (Nurse Manager)	23.00%	116,666.00	26,833.00	143,499.00	30.82%	8,289.93	0.00	0.00	22.78%	6,112.56	9,767.21	10.00%	0.00	0.00	0.00	0.00	0.00
14	Asuncion Williams	MCAH Coordinator (Clinic Supervisor)	64.00%	126,998.00	81,279.00	208,277.00	32.60%	26,496.95	0.00	0.00	21.00%	17,068.59	3,576.28	42.00%	0.00	0.00	0.00	0.00	0.00
15	Erica Felix	Office Assistant II	2.00%	38,330.00	767.00	39,097.00	32.60%	250.04	0.00	0.00	21.00%	161.07	355.89	0.00	0.00	0.00	0.00	0.00	0.00
16	Lindsey Drake	Program Specialist I	1.00%	68,858.00	689.00	69,547.00	79.00%	544.31	0.00	0.00	21.00%	144.69	0.00	0.00	0.00	0.00	0.00	0.00	0.00
17	Xenia Garcia	Public Health Nurse II	25.00%	95,596.00	23,899.00	119,495.00	32.60%	7,791.07	0.00	0.00	21.00%	5,018.79	5,114.39	25.00%	0.00	0.00	0.00	0.00	0.00
18	Vacant	Public Health Program Coordinator	0.50%	91,972.00	460.00	92,432.00	32.60%	149.96	0.00	0.00	21.00%	96.60	213.44	0.00	0.00	0.00	0.00	0.00	0.00
19	Andriana Francis	Secretary I	8.50%	44,594.00	3,790.00	48,384.00	32.60%	1,235.54	0.00	0.00	21.00%	795.90	1,758.56	0.00	0.00	0.00	0.00	0.00	0.00
20	Linda LaRocco	Supervising Office Assistant	5.00%	52,080.00	2,604.00	54,684.00	32.60%	848.90	0.00	0.00	21.00%	546.84	1,208.26	0.00	0.00	0.00	0.00	0.00	0.00
21																			
22																			
23																			
24	Toll-free - 3243																		
25	Stewart Hunter	Administrative Supervisor I	1.00%	88,494.00	885.00	89,379.00	100.00%	885.00	0.00	0.00	18.00%	159.30	410.64	0.00	0.00	0.00	0.00	0.00	0.00
26	Erica Felix	Office Assistant II	1.00%	38,330.00	383.00	38,713.00	100.00%	383.00	0.00	0.00	95.00%	325.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00
27	Myma Lopez	Office Assistant II	1.00%	38,330.00	383.00	38,713.00	100.00%	383.00	0.00	0.00	95.00%	287.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00
28																			
29																			
30	CPSF - 3245																		
31	Stewart Hunter	Administrative Supervisor I	1.00%	88,494.00	885.00	89,379.00	35.60%	315.06	0.00	0.00	18.00%	159.30	410.64	0.00	0.00	0.00	0.00	0.00	0.00
32	Ivan Pinto	Automated Systems Analyst I	0.50%	68,512.00	343.00	68,855.00	5.00%	17.15	0.00	0.00	95.00%	325.85	0.00	0.00	0.00	0.00	0.00	0.00	0.00
33	Theresa Almanza	Automated Systems Technician	0.50%	54,159.00	271.00	54,430.00	5.00%	13.65	0.00	0.00	95.00%	257.45	0.00	0.00	0.00	0.00	0.00	0.00	0.00
34	Monique Arnis	Division Chief	1.00%	119,563.00	11,956.00	131,519.00	35.60%	425.78	0.00	0.00	18.00%	215.28	554.94	0.00	0.00	0.00	0.00	0.00	0.00
35	Kathleen Berry	Fiscal Assistant	1.00%	43,010.00	430.00	43,440.00	35.60%	153.08	0.00	0.00	18.00%	77.40	199.52	0.00	0.00	0.00	0.00	0.00	0.00
36	Charlene Lunasco	Fiscal Specialist	1.00%	47,953.00	480.00	48,433.00	35.60%	170.98	0.00	0.00	18.00%	86.40	222.72	0.00	0.00	0.00	0.00	0.00	0.00
37	Vacant	Health Education Specialist I	0.50%	57,592.00	288.00	57,880.00	5.00%	14.40	0.00	0.00	95.00%	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
38	Beatriz Vasquez	Health Education Specialist II	54.50%	142,002.00	33,725.00	175,727.00	5.00%	1,686.25	0.00	0.00	95.00%	273.60	32,038.75	0.00	0.00	0.00	0.00	0.00	0.00
39	Vacant	MCAH Co-Dir (Phys II / Health Officer)	1.00%	142,002.00	1,420.00	143,422.00	5.00%	71.00	0.00	0.00	60.00%	0.00	852.00	0.00	0.00	0.00	0.00	0.00	0.00
40	Vacant	MCAH Co-Director (Nurse Manager)	1.00%	116,666.00	1,167.00	117,833.00	82.00%	956.94	0.00	0.00	18.00%	210.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00
41	Erica Felix	Office Assistant II	3.00%	38,330.00	1,150.00	39,480.00	35.60%	409.40	0.00	0.00	18.00%	207.00	533.60	0.00	0.00	0.00	0.00	0.00	0.00
42	Asuncion Williams	Perinatal Services Coord (Clinic Supv)	5.00%	126,998.00	6,350.00	133,348.00	5.00%	317.50	0.00	0.00	15.00%	952.50	952.50	80.00%	0.00	0.00	0.00	0.00	0.00
43	Xenia Garcia	Public Health Nurse II	66.00%	95,596.00	63,093.00	158,689.00	5.00%	3,154.65	0.00	0.00	30.00%	0.00	18,927.90	65.00%	0.00	0.00	0.00	0.00	0.00

(I) PERSONNEL DETAIL

Program: Agency: Subk:	UNMATCHED FUNDING															NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)	
	(1) TOTAL FUNDING	(2) %	(3) MCAH-TV	(4) MCAH-SIDS			(6) AGENCY FUNDS			(10) MCAH-City NE		(15) MCAH-City E							
				(4) %	(5) MCAH-SIDS	(6) %	(7) Agency Funds*	(10) %	(11) Combined Fed/Agency*	(14) %	(15) Combined Fed/Agency*								
96	268.00	0.00%	(0.00)	0.00	0.00	15.00%	40.20	65.00%	174.20	20.00%	53.60	85.0%							
97	4,024.00	0.00%	(0.00)	0.00	0.00	15.00%	603.60	65.00%	2,615.60	20.00%	804.80	85.0%							
98	268.00	0.00%	(0.00)	0.00	0.00	15.00%	40.20	65.00%	174.20	20.00%	53.60	85.0%							
99	268.00	0.00%	(0.00)	0.00	0.00	15.00%	40.20	65.00%	174.20	20.00%	53.60	85.0%							
100	268.00	0.00%	(0.00)	0.00	0.00	15.00%	40.20	65.00%	174.20	20.00%	53.60	85.0%							
101	268.00	0.00%	(0.00)	0.00	0.00	15.00%	40.20	65.00%	174.20	20.00%	53.60	85.0%							
102	4,024.00	0.00%	(0.00)	0.00	0.00	15.00%	603.60	65.00%	2,615.60	20.00%	804.80	85.0%							
103	268.00	0.00%	(0.00)	0.00	0.00	15.00%	40.20	65.00%	174.20	20.00%	53.60	85.0%							
104	4,024.00	0.00%	(0.00)	0.00	0.00	15.00%	603.60	65.00%	2,615.60	20.00%	804.80	85.0%							
105	268.00	0.00%	(0.00)	0.00	0.00	15.00%	40.20	65.00%	174.20	20.00%	53.60	85.0%							
106	268.00	0.00%	(0.00)	0.00	0.00	15.00%	40.20	65.00%	174.20	20.00%	53.60	85.0%							
107	268.00	0.00%	(0.00)	0.00	0.00	15.00%	40.20	65.00%	174.20	20.00%	53.60	85.0%							
108	268.00	0.00%	(0.00)	0.00	0.00	15.00%	40.20	65.00%	174.20	20.00%	53.60	85.0%							
109	268.00	0.00%	(0.00)	0.00	0.00	15.00%	40.20	65.00%	174.20	20.00%	53.60	85.0%							
110	268.00	0.00%	(0.00)	0.00	0.00	15.00%	40.20	65.00%	174.20	20.00%	53.60	85.0%							
111	268.00	0.00%	(0.00)	0.00	0.00	15.00%	40.20	65.00%	174.20	20.00%	53.60	85.0%							
112	268.00	0.00%	(0.00)	0.00	0.00	15.00%	40.20	65.00%	174.20	20.00%	53.60	85.0%							
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Time-Study Data Report for Summary of FFP (v3.1)

AGENCY: _____
 LAST NAME: _____
 FIRST NAME: _____
 JOB TITLE: _____
 SPMP: _____
 TIME BASE: _____

TIME STUDY PERIOD: October-December (Q2)
 TIME STUDY MONTH: _____

The percentages below are based on the program activities performed by this staff member and can only be used to invoice for the Fiscal Year and Time Study Period entered above.

Percentage Distribution of Staff Time by Program

Program Reference	Budget Line #	Program	Not Matchable	Non-Enhanced	Enhanced	% of time in Program*	Medi-Cal Factor %
A							
B							
C							
D							
E							
F							
G							
H							
I							
J							
K							
L							
Total							

*This information is to be used by agencies to determine the percentage of staff salary that is billable to MCAH Programs. It can be used by agencies that do not maintain a daily record of program time.

Data Entry for Monthly Summary of FFP Time Study Information (v3.1)

AGENCY:	
LAST NAME:	
FIRST NAME:	
JOB TITLE:	
SPMP:	
TIME BASE:	

TIME STUDY PERIOD: October-December (Q2)

TIME STUDY MONTH:

Enter time-study information below:

Function Code	Week 1	Week 2	Week 3	Week 4	Week 5	Manual Entry of Totals	Total
Totals							

Allocated Functions

Function Code	Week 1	Week 2	Week 3	Week 4	Week 5	Manual Entry of Totals	Total
10							
12							

Program A:

Function Code	Week 1	Week 2	Week 3	Week 4	Week 5	Manual Entry of Totals	Total
A1							
A2							
A3							
A4							
A5							
A6							
A7							
A8							
A9							
A11							

Program B:

Function Code	Week 1	Week 2	Week 3	Week 4	Week 5	Manual Entry of Totals	Total
B1							
B2							
B3							
B4							
B5							
B6							
B7							
B8							
B9							
B11							

Program C:

Function Code	Week 1	Week 2	Week 3	Week 4	Week 5	Manual Entry of Totals	Total
C1							
C2							
C3							
C4							
C5							
C6							
C7							
C8							
C9							
C11							

**QUARTERLY TITLE V TIME STUDY (TVTS) WORKSHEET
MATERNAL, CHILD AND ADOLESCENT HEALTH (MCAH) DIVISION**

TVTS Month:

Name:

Budget Line:

Job Title:

Location:

Agency:

I hereby certify that this is a true and accurate report of my time and that the categories were performed as shown.

Employees Signature	Date
<input type="text"/>	<input type="text"/>

Supervisor's Signature Date

WEEK 1	CATEGORY 1	CATEGORY 2	CATEGORY 3	TOTAL
1/2 - 1/8	<input type="text"/>	<input type="text"/>	<input type="text"/>	0.0
WEEK 2	CATEGORY 1	CATEGORY 2	CATEGORY 3	TOTAL
1/9 - 1/15	<input type="text"/>	<input type="text"/>	<input type="text"/>	0.0
WEEK 3	CATEGORY 1	CATEGORY 2	CATEGORY 3	TOTAL
1/16 - 1/22	<input type="text"/>	<input type="text"/>	<input type="text"/>	0.0
WEEK 4	CATEGORY 1	CATEGORY 2	CATEGORY 3	TOTAL
1/23 - 1/29	<input type="text"/>	<input type="text"/>	<input type="text"/>	0.0
WEEK 5	CATEGORY 1	CATEGORY 2	CATEGORY 3	TOTAL
1/30 - 1/31	<input type="text"/>	<input type="text"/>	<input type="text"/>	0.0
MONTHLY TOTAL	0.0	0.0	0.0	TOTAL
PERCENT	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

CATEGORY 1: Preventive & Primary Care Services for Children (PPCSC)

Activities aimed at reducing the incidence of health problems or disease prevalence in the community, or the personal risk factors for such diseases or conditions and the provision of comprehensive personal health services that include health maintenance and preventive services, initial assessment of health problems, treatment of uncomplicated and diagnosed chronic health problems, and the overall management of an individual's health care services for a child 1 year old through 21 years old.

CATEGORY 2: Children with Special Health Care Needs (CSHCN)

Children with Special Health Care Needs are defined as infants and children from birth through 21st year who have or are at increased risk for a chronic physical, developmental, behavioral, or emotional condition and who also require health and related services of a type or amount beyond that required by children generally.

This definition is broad and inclusive, and it emphasizes the characteristics held in common by children with a wide range of diagnoses which may include conditions such as, depression, attention deficit disorder, behavioral problems, asthma, diabetes, migraines or frequent headaches, head injury or traumatic brain injury, arthritis, joint problems, allergies, heart problems, autism, and intellectual disability.

CATEGORY 3: Other

Other should be used to report all Title V funded Local MCAH activities not reportable under Category 1 (PPCSC) or Category 2 (CYSHCN) that meet the MCAH scope of work objectives.