



Scott Walker  
Governor

1 WEST WILSON STREET  
P O BOX 2659  
MADISON WI 53701-2659

Kitty Rhoades  
Secretary

**State of Wisconsin**

608-266-1251

FAX: 608-267-2832

TTY: 888-701-1253

dhs.wisconsin.gov

Department of Health Services

**2014 DPH Consolidated Contract Addendum**

This contract addendum is specific to Cudahy Health Department whose principal business address is 5050 South Lake Drive, PO Box 100380, Cudahy WI, 53223-2496. The contact for the GRANTEES Contract Administrator is:

Kim Whitmore  
5050 South Lake Drive, PO Box 100380  
Cudahy WI, 53223-2496

Telephone: 414/ 769-2239  
Fax: 414/ 769-2291  
E-mail: whitmorek@ci.cudahy.wi.us

**Section 6.D Funding Controls**

Payments through June 30, 2014 are limited to 6/12<sup>th</sup> of the contract with the balance paid after July 1, 2014 based on reported costs up to the contract level. This applies only to the following Profile IDs:

Profile IDs Subject to 6/12 <sup>th</sup> Funding Controls			
Profile ID	Name	Profile ID	Name
103010	Regional Radon Information Centers	157720	Childhood Lead
151734	Oral Health Supplement	159320	MCH
151735	Oral Health Mouth Rinse	159321	Reproductive Health
152002	Reproductive Health SLOH	159327	Family Planning
152020	Family Health-Women's	181012	Tobacco Prevention & Control Program
157000	WWWP		

Payments through September 30, 2014 are limited to 9/12<sup>th</sup> of the contract with the balance paid after October 1, 2014 based on reported costs up to the contract level. This applies only to Profile ID 154710.

**Section 34.A Special Provisions**

**1. Contract Period**

The contract period for Profile 159220 is limited to January 1, 2014 through August 31, 2014. No expenses incurred after August 31, 2014 will be reimbursed. The contract period for all other Profile IDs is January 1, 2014 through December 31, 2014.

**2. Final Report Dates**

The due date of the final fiscal report for Profile 154710 shall be sixty (60) days after the Grant Agreement Period ending date. Expenses incurred during the Grant Agreement period on Profile 154710, but reported later than sixty (60) days after the period ending date, will not be recognized, allowed or reimbursed under the terms of this Grant Agreement.

## **Contract Agreement Addendum: Exhibit I**

### **Program Quality Criteria**

Generally high program quality criteria for the delivery of quality and cost-effective administration of health care programs have been, and will continue to be, required in each public health program to be operated under the terms of this contract.

This Exhibit contains only applicable quality criteria for this contract.

## Contract Agreement Addendum: Exhibit I

Contract #: 24150

Agency: Cudahy Health Department

Contract Year: 2014

### Program: Preventive Health and Health Services Block Grant Program Quality Criteria

- 1) Assessment and surveillance of public health to identify community needs and to support systematic, competent program planning and sound policy development with activities focused at both the individual and community levels.
  - A) Involvement of key policymakers and the general public in the development of comprehensive public health plans.
  - B) Development and implementation of a plan to address issues related to access to high priority public health services for every member of the community.
  - C) Identification of the scientific basis (evidence base) for the intervention.
- 2) Delivery of public health services to citizens by qualified health professionals in a manner that is family centered, culturally competent, and consistent with the best practices; and delivery of public health programs for communities for the improvement of health status.
  - A) There are no separate sub-criterion to this Quality Criteria Category.
- 3) Record keeping for individual focused services that assures documentation and tracking of client health care needs, response to known health care problems on a timely basis, and confidentiality of client information.
  - A) There are no separate sub-criterion to this Quality Criteria Category.
- 4) Information, education, and outreach programs intended to address known health risks in the general and certain target populations to encourage appropriate decision making by those at risk and to affect policy and environmental changes at the community level.
  - A) Provision of public information and education, and/or outreach activities focused on high-risk populations that increase awareness of disease risks, environmental health risks, and appropriate preventive activities.
  - B) Provision of public information and education and/or outreach activities should utilize strategies that have a scientific basis (best-practices) for delivery methods to assure maximum impact on the selected population.
  - C) All materials produced with PHHS Block Grant funds must include the following statement: "This publication was made possible by the PHHS Block Grant from the Centers for Disease Control and Prevention."
- 5) Coordination with related programs to assure that identified public health needs are addressed in a comprehensive, cost-effective manner across programs and throughout the community.
  - A) There are no separate sub-criterion to this Quality Criteria Category.
- 6) A referral network sufficient to assure the accessibility and timely provision of services to address identified public health care needs.
  - A) There are no separate sub-criterion to this Quality Criteria Category.
- 7) Provision of guidance to staff through program and policy manuals and other means sufficient to assure quality health care and cost-effective program administration.
  - A) Provision of written policy and program information about the current guidelines, standards, and recommendations for community and/or clinical preventive care.

## Contract Agreement Addendum: Exhibit I

Contract #: 24150

Agency: Cudahy Health Department

Contract Year: 2014

- 8) Financial management practices sufficient to assure accurate eligibility determination, appropriate use of state and federal funds, prompt and accurate billing and payment for services provided and purchased, accurate expenditure reporting, and, when required, pursuit of third-party insurance and Medical Assistance Program coverage of services provided.
  - A) Program-specific data collection, analysis, and reporting to assure program outcome goals are met or to identify program management problems that need to be addressed.
- 9) Data collection, analysis, and reporting to assure program outcome goals are met or to identify program management problems that need to be addressed.
  - A) There are no separate sub-criterion to this Quality Criteria Category.

## **Contract Agreement Addendum: Exhibit II**

### **Program Objectives**

(A) Contract Funds, Program/Objective Values, and Other Contract Details

(B) Objective Details

## Contract Agreement Addendum: Exhibit II(A)

Contract #: 24150

Agency: Cudahy Health Department

Contract Year: 2014

<b>Contract Source of Funds</b>		
<b>Source</b>	<b>Program</b>	<b>Amount</b>
Cudahy	Childhood Lead - Consolidated	\$3,550
Cudahy	Immunization - Consolidated IAP	\$8,267
Cudahy	Maternal Child Health - Consolidated	\$10,434
Cudahy	Prevention - Consolidated	\$2,168
Cudahy	WIC USDA	\$454,783
<b>Contract Amount</b>		<b>\$479,202</b>

<b>Contract Match Requirements</b>	
<b>Program</b>	<b>Amount</b>
Childhood Lead	\$0
Immunization	\$0
MCH	\$7,826
Prevention	\$0
WIC	\$0

<b>Program Sub-Contracts</b>		
<b>Program</b>	<b>Sub-Contractee</b>	<b>Sub-Contract Amount</b>
Childhood Lead	None Reported	\$0
Immunization	None Reported	\$0
MCH	None Reported	\$0
Prevention	None Reported	\$0
WIC	None Reported	\$0

## Contract Agreement Addendum: Exhibit II(A)

Contract #: 24150

Agency: Cudahy Health Department

Contract Year: 2014

### Immunization

**Program Total Value \$8,267**

1	LHD Template Objective	\$8,267
---	------------------------	---------

By December 31, 2014, 62% children residing in the City of Cudahy Health Department jurisdiction who turn 24 months of age during the contract year will complete 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hepatitis B, 1 Varicella and 4 Pneumococcal Conjugate (PCV) vaccination by their second birthday.

### MCH

**Program Total Value \$10,434**

1	By December 31, 2014, an assessment for the Wisconsin Healthiest Families Initiative will be undertaken by the City of Cudahy Health Department in collaboration with community partners focusing on family supports.	\$10,434
---	---	----------

### Prevention

**Program Total Value \$2,168**

1	Template Objective 10 - Community Health Improvement Process and Plan	\$2,168
---	---	---------

By August 31, 2014 the City of Cudahy Health Department will complete a community health assessment and community health improvement plan with measurable objectives.

### WIC

**Program Total Value \$454,783**

1	Template Objective 1	\$454,783
---	----------------------	-----------

During the contract budget period of January 1, 2014 through December 30, 2014, the Cudahy Health Department WIC Project will maintain an average monthly participation that is at least 97% of the assigned case load.

	<hr/>	
<b>Total of Contract Objective Values</b>		\$475,652
<b>Total of Contract Statement Of Work Values</b>		\$0

## Contract Agreement Addendum: Exhibit II(B)

**Contract #:** 24150  
**Program:** Immunization

**Agency:** Cudahy Health Department  
**Objective #:** 1 of 1

**Contract Year:** 2014  
**Objective Value:** \$8,267

### Objective: Primary Details

#### Objective Statement

LHD Template Objective

By December 31, 2014, 62% children residing in the City of Cudahy Health Department jurisdiction who turn 24 months of age during the contract year will complete 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hepatitis B, 1 Varicella and 4 Pneumococcal Conjugate (PCV) vaccination by their second birthday.

**Deliverable Due Date:** 01/31/2015

#### Contract Deliverable (Evidence)

A Wisconsin Immunization Registry (WIR) generated population based standard benchmark report documenting the number of children in the City of Cudahy Health Department jurisdiction who turned 24 months of age in 2014 contract year. Reports should be run with a 45 day buffer to ensure that all updated data has been received by the WIR. If the objective is not met, include a report of the accountability targets and the progress achieved including the activities and interventions conducted; include any barriers that may have been identified.

For your information the cohort of children for this objective is:

Date of Birth 01/01/2012- 12/31/2012

Criteria for the 2014 End of the Year Report:

The date of birth for End of Year Benchmark: 01/01/2012 ; 12/31/2012

Evaluation date: 01/01/2015

Run date: 02/15/2015

#### Programs Providing Funds for this Objective

Immunization: \$8,267

#### Agency Funds for this Objective:

#### Data Source for Measurement

Wisconsin Immunization Registry Records.

#### Baseline for Measurement

The 2012 end of year population based standard benchmark report will be used to determine the baseline for the 2014 population based objective. There is no percentage increase for 2014; health departments need to meet or exceed the baseline percentage.

For the baseline the following parameters will be used to run the benchmark report:

Birthdate Range: 01/01/2010 thru 12/31/2010

Evaluation Date: 01/01/2013

Run Date: After: 02/15/2013

\*\*\*Benchmark report ran on 11/12/13 and results indicated that of 229 clients; 143 (62%) met all benchmark criteria. Late up-to-date: 167 clients (73%) met all benchmark criteria.

#### Context

Children will be assessed using the standard benchmark report for having 4 DTaP, 3 Polio, 1 MMR, 3 Hib 3 Hepatitis B, 1 varicella and 4 Pneumococcal Conjugate (PCV) vaccination by 24 months of age. Progress towards reaching 90% will be measured using a WIR Benchmark report. Only children who have moved out of the agency's jurisdiction may be removed from the cohort for analysis. Unless you can prove that a child has moved out of your jurisdiction, you cannot remove them from your cohort.

## Contract Agreement Addendum: Exhibit II(B)

**Contract #:** 24150  
**Program:** Immunization

**Agency:** Cudahy Health Department  
**Objective #:** 1 of 1

**Contract Year:** 2014  
**Objective Value:** \$8,267

**Context Continued**

**Input Activities**

The Wisconsin Immunization Program recommends the following activities to help ensure success of this objective:

- Contacting parents of infants without immunization histories
- Tracking
- Coordination of immunization services with other LHD programs
- Sharing information with area physicians
- Requesting that information is entered into the WIR.
- Reminder/recall

The Wisconsin Immunization Program requires a minimum of 3 attempts to personally contact a responsible party.

Only children who have moved out of the agency's jurisdiction may be removed from the cohort for analysis. Unless you can prove that a child has moved out of your jurisdiction you cannot remove them from your cohort.

Reminder/recall activity is not listed in a particular order and we suggest you use the method that is the most successful for your community:

- Letter
- Phone call
- Home visit
- Email
- Text message

Additional interventions/activities are in an addendum to the Immunization Program Boundary Statement. These are suggested interventions/activities that LHD's may want to consider in order to achieve this objective.

**Objective: Risk Profile**

**Percent of Objective Accomplished**

0%	10%	20%	30%	40%	50%	60%	70%	80%	85%	90%	95%	100%
----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	------

**Corresponding Percentage Recoupment**

--	--	--	--	--	--	--	--	--	--	--	--	--

**Corresponding Potential Recoupment Amounts**

--	--	--	--	--	--	--	--	--	--	--	--	--

**Definition of Percent Accomplished**

--

**Conditions of Eligibility for an Incentive**

--

## Contract Agreement Addendum: Exhibit II(B)

Contract #: 24150

Agency: Cudahy Health Department

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 1 of 1

Objective Value: \$10,434

### Objective: Primary Details

#### Objective Statement

By December 31, 2014, an assessment for the Wisconsin Healthiest Families Initiative will be undertaken by the City of Cudahy Health Department in collaboration with community partners focusing on family supports.

**Deliverable Due Date:** 01/31/2015

#### Contract Deliverable (Evidence)

A SPHERE Report and an analysis of data collected in SPHERE as defined within the Data Source for Measurement and narrative report to document: 1) A completed baseline assessment of agency core competencies by January 31, 2014, updated throughout the year and completed by marking 'Final for Contract Year' by January 31, 2015. 2) Documentation of participation in the MCH Annual Conference. 3) Documentation of participation in the webinar series: Data-driven Approach to Early Childhood System-building (4 sessions, 90 minutes each). 4) Documentation of the number of life course trainings held, audience, and the number of participants. 5) A completed Partnership Report for the focus area that directly aligns with the objective. 6) A completed Wisconsin Healthiest Families Assessment Report following the instructions found on the Early Childhood Systems website.

#### Programs Providing Funds for this Objective

Maternal and Child Health Block Grant: \$10,434

#### Agency Funds for this Objective:

#### Data Source for Measurement

SPHERE Report to document the MCH Core Competencies, MCH Conference Attendee List, Webinar Evaluation; SPHERE Community Report to include data from the following screens: Community Activity (all appropriate fields), Intervention: Health Teaching; Subintervention: Life Course Framework; SPHERE Partnership Report to include data from the following tab/screen: Partnership Tool. Data entry on this screen includes Partner Representation and Contribution of Partnership; WHF Assessment Report.

#### Baseline for Measurement

Include items that were completed in 2013:

- In 2013, the Healthiest Cudahy Coalition (HCC) was established. This is the first time that a group like this has been formed in our community. The purpose of the HCC is to bring together diverse partners in the community to help better understand and work to solve the health and safety related problems in our community. A lot of time was devoted to researching, building relationships and networking to determine the appropriate representatives to invite to join this group. Recruitment efforts were multifaceted and resulted in more than 75 partners expressing interest in joining the HCC. An initial Kick Off Event was held in July that allowed partners to network with one another, discuss further the purpose of the group, and begin to brainstorm issues facing our community. A second Kick Off Event was held in October for those who were not able to attend the July event. The first quarterly meeting for this group is scheduled for early December 2013. At this meeting, the group will spend time reviewing assessment data to begin to more fully understand the issues in our community and discuss the resources that are available in our community.

#### Context

Note: This work will be accomplished over multiple years with progressive steps negotiated annually. The populations to be served are all infants and children, children and youth with special health care needs, and expectant and parenting families with young children with a special focus on those at risk for poor health outcomes.

All local health departments need to propose reasonable use of their allocated MCH dollars. Those agencies receiving greater allocations of MCH dollars will be expected to provide multiple steps, focus areas, input activities, and/or objectives.

Goal: To assure that all families in Wisconsin have access to a coordinated, integrated and sustainable system of services and supports focused on health promotion and prevention. For more information go to:  
<http://www.dhs.wisconsin.gov/health/mch/EarlyChildhoodSystems>.

## Contract Agreement Addendum: Exhibit II(B)

**Contract #:** 24150

**Agency:** Cudahy Health Department

**Contract Year:** 2014

**Program:** Maternal and Child Health Block Grant

**Objective #:** 1 of 1

**Objective Value:** \$10,434

**Focus Areas:** The focus areas for the Wisconsin Healthiest Families Initiative includes: family supports, child development, mental health, and safety and injury prevention. Go to <http://www.dhs.wisconsin.gov/health/mch/EarlyChildhoodSystems/WHFdefinitions.htm> for definitions. Agencies need to identify separate objectives for each focus area selected.

**Framework:** Key concepts of the Life Course Framework link to the Wisconsin Healthiest Families Initiative. The focus is on early childhood because it is a critical, sensitive period with life-long impacts on health. The objective promotes a plan for a community system that supports early childhood health and development that can build on protective factors and reduce risk factors for young children and families. Collaborations with community partners are important because the broader community environment strongly affects the capacity to be healthy. The lead for this work may vary from one community to the next and from one focus area to the next. Strengths of community partners should be promoted and supported through strategies identified by the collaborating partners. It is expected that education and/or training and utilization of the Life Course Framework concepts will be provided and implemented on an ongoing basis with community partners.

**Outcomes:** See sample outcomes at: <http://www.dhs.wisconsin.gov/health/mch/EarlyChildhoodSystems/WHFdefinitions.htm>.

### **Context Continued**

**Steps:** The Wisconsin Healthiest Families Initiative will be implemented in collaboration with community partners. Sequential steps will be implemented to complete: 1) assessment, 2) plan, 3) implementation, and 4) evaluation and sustainability. These steps will be completed over multiple years. Reporting documents for these steps are located at: <http://www.dhs.wisconsin.gov/health/mch/EarlyChildhoodSystems>.

**Step 1: Assessment -** Complete a community, population focused assessment that identifies the community program needs or other resources related to family supports, child development, mental health, and/or safety and injury prevention within the agency's jurisdiction. Assessment of multiple focus areas can be reported on one Assessment Findings form.

**Step 2: Plan** In collaboration with community partners, develop a plan that addresses the strengths and gaps identified in the assessment completed in Step 1. The plan should promote integrated, multi-sector service systems to assure services are easily accessed by expectant families and families with infants and young children, with special focus on those at risk for poor health outcomes. Coalitions/collaboratives will identify strategies and specific activities that map out their process to complete the initiative. The plan will be reported as a Community Logic Model (with one logic model submitted for each focus area) and must reflect the activities of the agency and partners.

**Step 3: Implementation** The agency and partners will implement strategies and activities identified in the plan completed in Step 2 to strengthen the system of early childhood services. Step 3 will be reported on the Implementation Report with one report submitted for each focus area addressed by the agency and partners.

**Step 4: Evaluation and Sustainability** Evaluate the impact on the community of the strategies and activities implemented and identify how this system will be sustained long term.

## Contract Agreement Addendum: Exhibit II(B)

**Contract #:** 24150

**Agency:** Cudahy Health Department

**Contract Year:** 2014

**Program:** Maternal and Child Health Block Grant

**Objective #:** 1 of 1

**Objective Value:** \$10,434

### REQUIRED SUPPORT ACTIVITIES:

Required activities to support assessment, planning, implementation, and evaluation and sustainability steps include the following:

- ζ Complete an initial agency assessment of MCH Core Competencies and enter in SPHERE by January 31, 2014; review at mid-year; and update in SPHERE by contract reporting deadline.
- ζ Participate in education to support the ongoing development of MCH Core Competencies.
- ζ Identify existing and new community partners, their contributions, and level of collaboration via the Partnership Tool in SPHERE.
- ζ Provide and implement education and/or training and utilization of the Life Course Framework on an on-going basis with community partners and enter in SPHERE.
- ζ Participate in MCH Program evaluation efforts throughout the contract year.
- ζ Participate in training and technical assistance as negotiated, as well as the 2014 MCH Conference.
- ζ Complete the webinar series: Data-driven Approach to Early Childhood System-building (4 sessions, 90 minutes each).

### Input Activities

Complete an initial agency assessment of MCH Core Competencies and enter in SPHERE by January 31, 2014; review at mid-year; and update in SPHERE by contract reporting deadline.

- ζ Participate in education to support the ongoing development of MCH Core Competencies.
- ζ Identify existing and new community partners, their contributions, and level of collaboration via the Partnership Tool in SPHERE.
- ζ Provide and implement education and/or training and utilization of the Life Course Framework on an on-going basis with community partners and enter in SPHERE.
- ζ Participate in MCH Program evaluation efforts throughout the contract year.
- ζ Participate in training and technical assistance as negotiated, as well as the 2014 MCH Conference.
- ζ Complete the webinar series: Data-driven Approach to Early Childhood System-building (4 sessions, 90 minutes each).

### Step 1: Assessment

-After assessing the needs of our community this past year, it has been determined that family supports would be a more appropriate area to focus our resources. Therefore, we will be engaging in a more focused assessment in this area.

-We have had turnover in the position funded by this grant and will need to reevaluate our agency assessment of MCH Core Competencies and participate in trainings to support the ongoing development of MCH Core Competencies. Additionally, the new MCH staff member will need to spend time building relationships with existing partners, learning about their contributions and identifying potential new partners.

-The Healthiest Cudahy Coalition that was established in 2013 will require significant time to ensure partners remain engaged and involved in the assessment and planning process.

**Contract Agreement Addendum: Exhibit II(B)**

**Contract #:** 24150

**Agency:** Cudahy Health Department

**Contract Year:** 2014

**Program:** Maternal and Child Health Block Grant

**Objective #:** 1 of 1

**Objective Value:** \$10,434

**Objective: Risk Profile**

**Percent of Objective Accomplished**

0%	10%	20%	30%	40%	50%	60%	70%	80%	85%	90%	95%	100%
----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	------

**Corresponding Percentage Recoupment**

--	--	--	--	--	--	--	--	--	--	--	--	--

**Corresponding Potential Recoupment Amounts**

--	--	--	--	--	--	--	--	--	--	--	--	--

**Definition of Percent Accomplished**

--

**Conditions of Eligibility for an Incentive**

--

## Contract Agreement Addendum: Exhibit II(B)

Contract #: 24150

Agency: Cudahy Health Department

Contract Year: 2014

Program: Preventive Health and Health Services  
Block Grant

Objective #: 1 of 1

Objective Value: \$2,168

### Objective: Primary Details

#### Objective Statement

Template Objective 10 - Community Health Improvement Process and Plan

By August 31, 2014 the City of Cudahy Health Department will complete a community health assessment and community health improvement plan with measurable objectives.

**Deliverable Due Date:** 01/31/2015

#### Contract Deliverable (Evidence)

A report entered into an electronic data collection tool that describes:

1. Description of strategies implemented and outcomes measured
2. Challenges or barriers to success
3. Actions to address challenges
4. Indicate and describe if Prevention funded activities were used to obtain additional funding, donations or in-kind contributions

#### Programs Providing Funds for this Objective

Preventive Health and Health Services Block Grant: \$2,168

#### Agency Funds for this Objective:

#### Data Source for Measurement

Agency report to be entered into an electronic data collection tool to be provided by the WI Division of Public Health.

#### Baseline for Measurement

This is a new initiative.

#### Context

This objective was chosen because an updated community health assessment (CHA) and community health improvement plan (CHIP) have not been done for several years in Cudahy. An updated CHA will be instrumental in helping to identify the needs our community and the CHIP will help drive our community's strategies for improving health. Additionally, having an updated CHA/CHIP is a pre-requisite for PHAB accreditation.

#### Context Continued

#### Input Activities

CDC strongly encourages Preventive Health and Health Services Block Grant funds be used only on evidence based strategies, best practices or promising practices. Describe the strategies/practices to be used and identify the associated web links as available. Potential links to strategies for this objective include but are not limited to:

<http://dhs.wisconsin.gov/CHIP/>

<http://www.naccho.org/topics/infrastructure/MAPP/index.cfm>

<http://www.walhdab.org/CHIPPIInfrastructure.htm>

[www.countyhealthrankings.org/roadmaps](http://www.countyhealthrankings.org/roadmaps)

### Objective: Risk Profile

#### Percent of Objective Accomplished

0%	10%	20%	30%	40%	50%	60%	70%	80%	85%	90%	95%	100%
----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	------

#### Corresponding Percentage Recoupment

**Contract Agreement Addendum: Exhibit II(B)**

**Contract #:** 24150

**Agency:** Cudahy Health Department

**Contract Year:** 2014

**Program:** Preventive Health and Health Services  
Block Grant

**Objective #:** 1 of 1

**Objective Value:** \$2,168

--	--	--	--	--	--	--	--	--	--	--	--	--

**Corresponding Potential Recoupment Amounts**

--	--	--	--	--	--	--	--	--	--	--	--	--

**Definition of Percent Accomplished**

--

**Conditions of Eligibility for an Incentive**

--

## Contract Agreement Addendum: Exhibit II(B)

**Contract #:** 24150

**Agency:** Cudahy Health Department

**Contract Year:** 2014

**Program:** Women Infants Children Supplemental Nutrition

**Objective #:** 1 of 1

**Objective Value:** \$454,783

### Objective: Primary Details

#### Objective Statement

Template Objective 1

During the contract budget period of January 1, 2014 through December 30, 2014, the Cudahy Health Department WIC Project will maintain an average monthly participation that is at least 97% of the assigned case load.

**Deliverable Due Date:** 01/31/2015

#### Contract Deliverable (Evidence)

The State WIC Office will be responsible for providing this deliverable. Monthly participation, 3-month average participation, and/or 12-month average participation per the monthly participation report will be maintained and monitored by the State WIC Office.

Programs Providing Funds for this Objective

Women, Infants, and Children (WIC) Supplemental Nutrition:

Agency Funds for this Objective:

Data Source for Measurement

WIC Participation Reports. Baseline for Measurement:

Current caseload is \_\_\_ participants.

#### Programs Providing Funds for this Objective

Women Infants Children Supplemental Nutrition: \$454,783

#### Agency Funds for this Objective:

#### Data Source for Measurement

#### Baseline for Measurement

#### Context

WIC participation means the number of "total participating" on the monthly participation report maintained and monitored by the State WIC Program Office. It is defined as the number of WIC participants, who receive WIC food instruments for one calendar month,

including the number of exclusively breastfed infants.

#### Context Continued

#### Input Activities

Policies and procedures as outlined in the Wisconsin WIC Operations Manual.

#### Objective: Risk Profile

#### Percent of Objective Accomplished

0%	10%	20%	30%	40%	50%	60%	70%	80%	85%	90%	95%	100%
----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	------

**Contract Agreement Addendum: Exhibit II(B)**

**Contract #:** 24150

**Agency:** Cudahy Health Department

**Contract Year:** 2014

**Program:** Women Infants Children Supplemental  
Nutrition

**Objective #:** 1 of 1

**Objective Value:** \$454,783

**Corresponding Percentage Recoupment**

--	--	--	--	--	--	--	--	--	--	--	--	--

**Corresponding Potential Recoupment Amounts**

--	--	--	--	--	--	--	--	--	--	--	--	--

**Definition of Percent Accomplished**

--

**Conditions of Eligibility for an Incentive**

--