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Department of Health Services

2014 DPH Consolidated Contract Addendum

This contract addendum is specific to Fond du Lac Health Department whose principal business address is 160 South Macy Street 3rd Floor, Fond du Lac WI, 54935-4241. The contact for the GRANTEES Contract Administrator is:

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Section 6.D Funding Controls

Payments through June 30, 2014 are limited to 6/12th 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 th 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 9/12th 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 #: 24158

Agency: Fond du Lac County 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 #: 24158

Agency: Fond du Lac County 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 I

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Radon Indoor Radon RICs 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) Contractee must assess surveillance data (including their own data) for prevalence of homes with elevated indoor radon exposures in their regions. The Division of Public Health (DPH) radon zip-code map and database are at www.lowradon.org.
- 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) Cultural competence and other qualifications of persons delivering radon services must be the same as those of employees of local health agencies, such as environmental sanitarians and public health nurses.
- 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) Contractee must maintain a database of measurements carried out by the public with agency assistance and, to the extent possible, follow cases of elevated exposures to promote appropriate interventions and outcomes. However, the ability to follow-up may be limited in some instances, since indoor radon is not regulated in Wisconsin and because detectors and mitigation services are available from the private sector.
- 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) Contractee must serve as a resource for information in their region, and provide referrals when requested for technical information they can't provide. This enables residents to understand the lung cancer risk from radon, test their homes for radon, interpret test results and follow-up testing, and obtain effective radon mitigation services where appropriate.
- 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) Contractee must coordinate outreach with other public health programs in their agency, adjusting services so as to fit into appropriate priorities among groups with other health needs.
 - B) Contractee must participate in radon outreach training by their regional Radon Information Center, and coordinate outreach for the Radon Action Month media blitz in January with them.
- 6) A referral network sufficient to assure the accessibility and timely provision of services to address identified public health care needs.
 - A) Contractee must use the referral network consisting of their Regional Radon Information Center, nationally certified radon mitigation contractors, and Web sites for fast access to DPH and EPA radon information and literature. The DPH Web site is www.lowradon.org.
- 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.

Contract Agreement Addendum: Exhibit I

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

- A) Contractee must provide guidance on radon testing and mitigation following US EPA policies as recommended in EPA's booklets: Citizen's Guide to Radon, Consumer's Guide to Radon Reduction, and Home Buyers and Seller's Guide to Radon, which are readable and downloadable through the US EPA radon web site and the DPH radon web site.
 - B) Contractee must meet criteria of cost-effective program administration in state and local statutes, ordinances and administrative rules.
- 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) Considerations of eligibility determination, pursuit of third-party insurance and Medical Assistance coverage do not apply to radon outreach funded by DPH.
- 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) Contractee must review results of radon measurements they have facilitated. To the extent funded and practicable, Contractee must follow cases where elevated screening tests are reported, to ensure appropriate follow-up testing is done, and to ensure that every opportunity for radon mitigation by sub-slab depressurization is given. However, because indoor radon is not regulated in Wisconsin and because detectors and mitigation services are available from the private sector, the ability to follow-up may be limited in some instances.
 - B) Contractee's report to the radon program in DPH must be sent by email, so it can be included in the DPH report to US EPA, which requires electronic reporting.

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 #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Contract Source of Funds		
Source	Program	Amount
Fond du Lac County	Childhood Lead - Consolidated	\$11,522
Fond du Lac County	Immunization - Consolidated IAP	\$21,361
Fond du Lac County	Maternal Child Health - Consolidated	\$36,427
Fond du Lac County	Prevention - Consolidated	\$3,588
Fond du Lac County	Radon Regional Information Centers	\$11,464
Fond du Lac County	WIC USDA	\$363,831
Contract Amount		\$448,193

Contract Match Requirements	
Program	Amount
Childhood Lead	\$0
Immunization	\$0
MCH	\$27,320
Prevention	\$0
Radon-RICs	\$0
WIC	\$0

Program Sub-Contracts		
Program	Sub-Contractee	Sub-Contract Amount
Childhood Lead	None Reported	\$0
Immunization	None Reported	\$0
MCH	None Reported	\$0
Prevention	None Reported	\$0
Radon-RICs	None Reported	\$0
WIC	None Reported	\$0

Contract Agreement Addendum: Exhibit II(A)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Childhood Lead

Program Total Value \$11,522

- | | | |
|---|--|---------|
| 1 | Template Objective 1 | \$7,000 |
| | By December 31, 2014, 650 children at risk for lead poisoning who reside in Fond du Lac County will receive an age-appropriate blood lead test. | |
| 2 | Template Objective 3 | \$1,600 |
| | By December 31, 2014, two environmental lead hazard investigations will be completed on the primary residences and pertinent secondary properties of children with venous blood lead levels greater than or equal to 15 micrograms per deciliter who reside in Fond du Lac County. | |
| 3 | Template Objective 4 | \$2,922 |
| | Throughout the 2014 contract period, residents from the jurisdiction of the Fond du Lac County Health Department will receive lead poisoning prevention and intervention services that are provided according to federal and state guidelines. | |

Immunization

Program Total Value \$21,361

- | | | |
|---|--|----------|
| 1 | LHD Template Objective | \$21,361 |
| | By December 31, 2014, 72% children residing in Fond Du Lac County 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 \$36,427

- | | | |
|---|--|----------|
| 1 | Template Objective 1 | \$24,285 |
| | By December 31, 2014, implementation activities, and/or evaluation and sustainability activities for the Wisconsin Healthiest Families Initiative will be undertaken by the Fond du Lac County Health Department in collaboration with community partners focusing on mental health. (Step 3 and Step 4) | |
| 2 | Template Objective 2 | \$12,142 |
| | By December 31, 2014, An assessment and a plan for the Wisconsin Healthiest Families Initiative will be undertaken by the Fond du Lac County Health Department in collaboration with community partners focusing on safety/injury prevention. (Steps 1 and 2) | |

Prevention

Program Total Value \$3,588

- | | | |
|---|---|---------|
| 1 | Template Objective 11 - Oral Health | \$3,588 |
| | By August 31, 2014, Fond du Lac County Health Department will provide early childhood caries prevention services to 500 children ages 6 months through 6 years. | |

Radon-RICs

Program Total Value \$11,464

- | | | |
|---|---|----------|
| 1 | This objective is for calendar year 2014. | \$11,464 |
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WIC

Program Total Value \$363,831

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|---|---|-----------|
| 1 | Template Objective 1 | \$363,831 |
| | During the contract budget period of January 1, 2014 through December 30, 2014, the Fond du Lac County Health Department WIC Project will maintain an average monthly participation that is at least 97% of the assigned case load. | |

Contract Agreement Addendum: Exhibit II(A)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Total of Contract Objective Values	\$448,193
Total of Contract Statement Of Work Values	\$0

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Childhood Lead Consolidated

Objective #: 1 of 3

Objective Value: \$7,000

Objective: Primary Details

Objective Statement

Template Objective 1

By December 31, 2014, 650 children at risk for lead poisoning who reside in Fond du Lac County will receive an age-appropriate blood lead test.

Deliverable Due Date: 01/31/2015

Contract Deliverable (Evidence)

A report to document the number of unduplicated children at risk for lead poisoning residing in Fond du Lac County who received a blood lead test at the appropriate ages: age 1 and age 2, or, if no prior test was done at age 1 or 2, between the ages 3 to 5.

Programs Providing Funds for this Objective

Childhood Lead Consolidated: \$7,000

Agency Funds for this Objective:

Data Source for Measurement

An agency-generated report; or a SPHERE Individual/Household Report, including information from the Lead-testing screen.

Baseline for Measurement

As of October 17, 2013, 411 1 - 2 year olds and 22 3 - 5 year olds have received a lead screening through the Fond du Lac County Health Department WIC Program.

Context

Acceptable value for this objective is up to \$18 per blood lead test. Children at highest risk for lead poisoning are those eligible or enrolled in the Medicaid or WIC Program, those living or spending time in pre-1950 housing or pre-1978 housing that is undergoing renovation, or those with a sibling with lead poisoning. Age appropriate blood lead tests are done at around 12 months and around 24 months, or at least once between the ages of 3 to 5 years if the child has no previous test documented. Local health departments should seek third party reimbursement for testing Medicaid-enrolled children by billing Medicaid fee-for-service or the appropriate managed care organization. See new reference: CDC Advisory Committee on Childhood Lead Poisoning Prevention (ACCLPP) ; ;Low Level Lead Exposure Harms Children: A Renewed Call for Primary Prevention; (http://www.cdc.gov/nceh/lead/ACCLPP/Final_Document_030712.pdf, CDC, January 4, 2012) and the WCLPPP Handbook for Local Health Departments (<http://www.dhs.wisconsin.gov/lead/doc/WCLPPPHandbook.pdf>, 2002).

Context Continued

Input Activities

Objective: Risk Profile

Percent of Objective Accomplished

0%	10%	20%	30%	40%	50%	60%	70%	80%	85%	90%	95%	100%
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Corresponding Percentage Recoupment

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Corresponding Potential Recoupment Amounts

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Definition of Percent Accomplished

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Conditions of Eligibility for an Incentive

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Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Childhood Lead Consolidated

Objective #: 2 of 3

Objective Value: \$1,600

Objective: Primary Details

Objective Statement

Template Objective 3

By December 31, 2014, two environmental lead hazard investigations will be completed on the primary residences and pertinent secondary properties of children with venous blood lead levels greater than or equal to 15 micrograms per deciliter who reside in Fond du Lac County.

Deliverable Due Date: 01/31/2015

Contract Deliverable (Evidence)

A report to document: 1) the number of children with a blood lead level greater than or equal to 10 micrograms per deciliter; and 2) the number of associated environmental lead hazard investigations that were completed.

Programs Providing Funds for this Objective

Childhood Lead Consolidated: \$1,600

Agency Funds for this Objective:

Data Source for Measurement

An agency-generated report.

Baseline for Measurement

As of October 17, 2013, Fond du Lac County Health Department had 5 children with venous blood lead levels over 10. (venous blood levels 10 - 15 = 2 children & venous blood levels 15 or greater = 3 children). Three environmental lead hazard investigations were completed.

Context

Acceptable value for this objective is up to \$800 per environmental lead hazard investigation. The most important factor in managing childhood lead poisoning is reducing the child's exposure to lead. CDC recommends that environmental investigations be conducted in housing where a child with a venous blood lead level greater than or equal to 15 micrograms per deciliter lives, where the child spends a significant amount of time, secondary residences, and other areas where the child (or other children) may be exposed to lead hazards (e.g., in buildings with more than one housing unit, conduct inspection not only in the elevated blood lead child's residence, but also in adjacent units where children could be at risk). When notified that a child has a blood lead level greater than or equal to 15 micrograms per deciliter, the public health agency will conduct an environmental lead hazard investigation. This environmental lead hazard investigation includes a risk assessment of the property, issuance of work orders to address the identified lead hazards, and a clearance report indicating that the hazards have been controlled. The intent is to provide early environmental intervention in response to a lead poisoned child to prevent more severe lead poisoning. The environmental lead hazard investigation can include a child's primary residence and pertinent secondary properties. The procedure for the investigation is outlined in Chapter 9 of the WCLPPP Handbook for Local Health Departments (<http://www.dhs.wisconsin.gov/lead/doc/WCLPPPHandbook.pdf>, 2002), and is conducted at lower blood lead levels than required by state statute (Wis Stat 254). Also see new reference: 'Low Level Lead Exposure Harms Children: A Renewed Call for Primary Prevention' (CDC Advisory Committee on Childhood Lead Poisoning Prevention, January 4, 2012, (http://www.cdc.gov/nceh/lead/ACCLPP/Final_Document_030712.pdf).

Context Continued

Input Activities

Objective: Risk Profile

Percent of Objective Accomplished

0%	10%	20%	30%	40%	50%	60%	70%	80%	85%	90%	95%	100%
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Corresponding Percentage Recoupment

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Corresponding Potential Recoupment Amounts

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Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Childhood Lead Consolidated

Objective #: 2 of 3

Objective Value: \$1,600

Definition of Percent Accomplished

Conditions of Eligibility for an Incentive

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Childhood Lead Consolidated

Objective #: 3 of 3

Objective Value: \$2,922

Objective: Primary Details

Objective Statement

Template Objective 4

Throughout the 2014 contract period, residents from the jurisdiction of the Fond du Lac County Health Department will receive lead poisoning prevention and intervention services that are provided according to federal and state guidelines.

Deliverable Due Date: 01/31/2015

Contract Deliverable (Evidence)

A report to document the extent to which assurance of each of the three follow-up components of this objective was provided, specifically: 1) the number of children with a capillary blood lead level greater than or equal to 10 micrograms per deciliter and the number who received a venous confirmation test; 2) the number of families with children with a venous blood lead level greater than or equal to 10 micrograms per deciliter and the number who received a home visit to provide information on lead poisoning prevention and treatment, and 3) the number of children with a venous blood lead level greater than or equal to 10 micrograms per deciliter and the number of environmental lead hazard investigations conducted on their primary residence and/or secondary properties, including accompanying work orders and property clearance. For evaluation purposes, those children whose families are non-responsive to outreach or moved from the jurisdiction before appropriate follow-up services could be provided can be removed from this cohort.

Programs Providing Funds for this Objective

Childhood Lead Consolidated: \$2,922

Agency Funds for this Objective:

Data Source for Measurement

An agency-generated report.

Baseline for Measurement

As of October 17, 2013, Fond du Lac County Health Department had 51 children with capillary levels 5 or greater and of those children, 21 children had venous follow-up. Families of 5 children with blood levels 10 or greater had a home visit for education. Three properties with children having blood levels 15 or greater have had investigations completed.

Context

There is no designated value range for this objective; it is automatically accepted if the entire Childhood Lead Poisoning Prevention Program (CLPPP) allocation is \$6000 or less. If the allocation is greater than \$6000 and the agency wants to select this objective, negotiation for the value of this objective is required. This assurance objective is intended to assure that the local health department is providing a comprehensive childhood lead poisoning prevention program. For this objective, a home visit will be conducted for all children with one or more venous blood lead levels greater than or equal to 10 micrograms per deciliter. For this objective, an environmental lead hazard investigation will be conducted for all children with one or more venous blood lead levels greater than or equal to 15 micrograms per deciliter. This environmental lead hazard investigation includes a risk assessment of the property, issuance of work orders to address the identified lead hazards, and a clearance report indicating that the hazards have been controlled. The intent is to provide early environmental intervention in response to a lead poisoned child to prevent more severe lead poisoning. The environmental lead hazard investigation can include a child's primary residence and pertinent secondary properties. The procedure for the investigation is outlined in Chapter 9 of the WCLPPP Handbook for Local Health Departments (<http://www.dhs.wisconsin.gov/lead/doc/WCLPPPHandbook.pdf>, 2002), and is conducted at lower blood lead levels than required by state statute (Wis Stat 254). Also see new reference: *Low Level Lead Exposure Harms Children: A Renewed Call for Primary Prevention* (CDC Advisory Committee on Childhood Lead Poisoning Prevention, January 4, 2012, (http://www.cdc.gov/nceh/lead/ACCLPP/Final_Document_030712.pdf).

Context Continued

Input Activities

Objective: Risk Profile

Percent of Objective Accomplished

0%	10%	20%	30%	40%	50%	60%	70%	80%	85%	90%	95%	100%
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Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Childhood Lead Consolidated

Objective #: 3 of 3

Objective Value: \$2,922

Corresponding Percentage Recoupment

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Corresponding Potential Recoupment Amounts

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Definition of Percent Accomplished

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Conditions of Eligibility for an Incentive

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Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Immunization

Objective #: 1 of 1

Objective Value: \$21,361

Objective: Primary Details

Objective Statement

LHD Template Objective

By December 31, 2014, 72% children residing in Fond Du Lac County 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 (Fond Du Lac County 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: \$21,361

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

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.

Context Continued

Input Activities

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158
Program: Immunization

Agency: Fond du Lac County Health Department
Objective #: 1 of 1

Contract Year: 2014
Objective Value: \$21,361

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%
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Corresponding Percentage Recoupment

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Corresponding Potential Recoupment Amounts

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Definition of Percent Accomplished

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Conditions of Eligibility for an Incentive

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Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 1 of 2

Objective Value: \$24,285

Objective: Primary Details

Objective Statement

Template Objective 1

By December 31, 2014, implementation activities, and/or evaluation and sustainability activities for the Wisconsin Healthiest Families Initiative will be undertaken by the Fond du Lac County Health Department in collaboration with community partners focusing on mental health. (Step 3 and Step 4)

Deliverable Due Date: 01/31/2015

Contract Deliverable (Evidence)

Reporting forms are available at: <http://www.dhs.wisconsin.gov/health/mch/EarlyChildhoodSystems>.

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/KKA Annual Conference.(Nov. 5 & 6, 2014 in Wisconsin Dells).
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 Mental Health Focus Area that directly aligns with the objective.
6. An updated Community Logic Model.
7. A completed Wisconsin Healthiest Families Implementation Report following the instructions found on the Early Childhood Systems website.
8. A completed Wisconsin Healthiest Families Evaluation and Sustainability Report following the instructions found on the Early Childhood Systems website.

Programs Providing Funds for this Objective

Maternal and Child Health Block Grant: \$24,285

Agency Funds for this Objective:

Data Source for Measurement

Reporting forms are available at: <http://www.dhs.wisconsin.gov/health/mch/EarlyChildhoodSystems>.

SPHERE Report of 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; Community Logic Model; Implementation Report; Project-specific data sources to document results of activities; Data on Outcome Measures; Quality Improvement tools; Community Sustainability Plan.

Baseline for Measurement

Include items that were completed in 2013:

- Coalition or collaborative details:

The Fond du Lac County Community Partnership for Young Children (SPROUT) has been in existence since October 2010, with a goal "For all Fond du Lac County children to be healthy, nurtured, safe and successful from birth to school entry through Nurturing and Responsive Relationships, High Quality Supportive Environments, Targeted Social Emotional Supports, and Intensive Interventions." The vision is: Every Fond du Lac County child will have his/her social and emotional developmental needs met within the context of family, culture, education, and community. The mission is: The Infant and Early Childhood communities of

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 1 of 2

Objective Value: \$24,285

Fond du Lac County will strengthen its ability to support the social and emotional health of young children. The coalition consists of an Executive committee, a Council, and four subcommittees, each focusing on one of the areas defined in the goal statement.

In 2013, the SPROUT coalition implemented the following activities:

-A Resource Guide (English and Spanish)featuring over 60 organizations and resources that support children under the age of six years was developed and distributed to select agencies.

-An ASQ-3 Developmental Screening site was established at the Fond du Lac County WIC office, providing parents the opportunity to select and complete age appropriate developmental screens, which are then scored with recommendations provided depending on screen results.

-Love and Logic workshops were provided to community parents and providers.

-Conscious Discipline workshops were provided to community parents and providers.

-Trauma Training workshops were provided to community parents and providers.

- Direction of 2014 activities:

The above year's work will be directing the 2014 activities, and includes updated goals and activities from each of the four subcommittees (See Input Activities). In addition, the SPROUT coalition is focusing on sustainability, with plans to further develop the public-private partnership by utilizing a powerpoint presentation intended to provide outreach and orientation to potential new partners. This presentation provides the history of and current vision, mission and goals of the SPROUT coalition and includes information on the Lifecourse Framework and Return on Investment (ROI)data. The coalition will be developing and hoping to fill a Coordinator position. Fond du Lac County's Healthy 2020 website is being modified to include SPROUT outreach and reporting of activities. In addition, the coalition will be developing and filling a "parent" seat on the Council.

Fond du Lac County MCH staff continue to provide leadership and support to the coalition. The MCH Coordinator holds a seat on the council, an MCH nurse is the co-chair of one of the subcommittees in 2014 and holds a seat on the executive committee, and there will be MCH representation on the remaining 3 subcommittees.

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>.

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

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 1 of 2

Objective Value: \$24,285

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.

REQUIRED SUPPORT ACTIVITIES:

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 1 of 2

Objective Value: \$24,285

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

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

Input Activities

- Strategies and activities:

1. Update previous assessment.
2. Modify Plan based on results of reassessment.
3. Maintain ASQ-3 Screening site at the Fond du Lac County WIC Office. (MCH)
4. Increase outreach activities for the ASQ-3 Screening site. (MCH)
5. Initiate a quality improvement project for the ASQ-3 Screening site. (We were one of ten health departments in the nation to be selected to participate in the Kaizen Event Program, which is managed by NNPHI in partnership with Continual Impact with funding by the Robert Wood Johnson Foundation. We will be receiving training in the Kaizen methodology, and provided a QI coach to conduct a Kaizen improvement event at our Health Department. In addition, project results will be presented at the 2014 NNPHI Forum and will be published on the Public Health Quality Improvement Exchange-PHQIX). (MCH)
6. Develop a plan to expand ASQ-3 screening into the physicians' office. (Supportive Environments Committee)
7. Develop a Referral Flow chart for parents/providers for ASQ-3 results. (Supportive Environments Committee)
8. Provide parenting training and follow-up for clients of agencies that serve the homeless population. (Targeted Social Emotional Supports Committee)
9. Promote child development education for parents. (Nurturing and Responsive Relationships Committee)
10. Provide child development education for community child-focused providers. (Intensive Interventions Committee)
11. Identify other providers that have opportunities to provide postpartum depression screening. (MCH/Targeted Social Emotional Supports Committee)

-Required Support Activities located in the context:

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 1 of 2

Objective Value: \$24,285

1. 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.
2. Participate in education to support the ongoing development of MCH Core Competencies.
3. Identify existing and new community partners, their contributions, and level of collaboration via the Partnership Tool in SPHERE.
4. 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.
5. Participate in MCH Program evaluation efforts throughout the contract year.
6. Participate in training and technical assistance as negotiated, as well as the 2014 MCH Conference. Agency will invite State MCH to participate in the QI trainings as available and provide the MCH program information related to QI for program improvement.
7. Complete the webinar series: Data-driven Approach to Early Childhood System-building (4 sessions, 90 minutes each).

Objective: Risk Profile

Percent of Objective Accomplished

0%	10%	20%	30%	40%	50%	60%	70%	80%	85%	90%	95%	100%
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Corresponding Percentage Recoupment

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Corresponding Potential Recoupment Amounts

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Definition of Percent Accomplished

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Conditions of Eligibility for an Incentive

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Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 2 of 2

Objective Value: \$12,142

Objective: Primary Details

Objective Statement

Template Objective 2

By December 31,2014, An assessment and a plan for the Wisconsin Healthiest Families Initiative will be undertaken by the Fond du Lac County Health Department in collaboration with community partners focusing on safety/injury prevention. (Steps 1 and 2)

Deliverable Due Date: 01/31/2015

Contract Deliverable (Evidence)

Reporting forms are available at: <http://www.dhs.wisconsin.gov/health/mch/EarlyChildhoodSystems>.

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.
7. A completed Wisconsin Healthiest Families Community Logic Model following the instructions found on the Early Childhood Systems website.

Programs Providing Funds for this Objective

Maternal and Child Health Block Grant: \$12,142

Agency Funds for this Objective:

Data Source for Measurement

Reporting forms are available at: <http://www.dhs.wisconsin.gov/health/mch/EarlyChildhoodSystems>.

SPHERE Report of 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; Community Logic Model; Project-specific data sources to document results of activities.

Baseline for Measurement

Include items that were completed in 2013:

- Coalition or collaborative details:

In 2013, Fond du Lac County's Child Death Review Team, whose goal is to prevent child deaths, began reviewing it's first cases. (The team was revamped in June 2012, but did not review any cases in 2012). The KKA Assessment was updated in 2013, and additional partners were identified and recruited. A vision statement was developed: "Every Fond du Lac County child will be healthy and safe." A mission statement was developed: "Through a comprehensive and multidisciplinary review of child deaths, the Fond du Lac County Child Death Review Team will better understand how and why our children die, and use those findings to take action to prevent other deaths, and improve the health and safety of our children.

To date, no actual "preventative" actions have been implemented, but the MCH Department has initiated internal activities

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DPH Grants and Contracts

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 2 of 2

Objective Value: \$12,142

according to case circumstances. For example, MCH staff gathered and shared information regarding community resources for bereavement. The policy and procedure for the Postpartum Visiting Program was revised and outreach for this program was initiated. MCH staff began tracking opioid-related referrals. There has been a trend identified in the last two case reviews (motor vehicle deaths), giving the CDR Team an opportunity to develop a process to analyze this data, recommend preventative measures, and transfer these recommendations to community based agencies/organizations/coalitions for action.

-Direction of 2014 activities:

The above year's work will be directing the 2014 activities, and is the rationale for adding the Safety/Injury Prevention focus area with the steps of assessment and planning, based on the current functional status of the CDR Team. By incorporating the current CDR process into the WHFI Safety/Injury Prevention focus area, preventative coalition work can be planned, with implementation completed in the future.

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>.

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>.

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 2 of 2

Objective Value: \$12,142

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.

REQUIRED SUPPORT ACTIVITIES:

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

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

Input Activities

- Strategies and activities:

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 2 of 2

Objective Value: \$12,142

1. Coordinate CDR Team meetings.
2. Enter case report data in the CDR Case Reporting System.
3. Develop standardized reports identifying child death trends or patterns.
4. Complete WHFI assessment for Safety/Injury Prevention, identifying current community child safety coalitions.
5. Complete WHFI Logic Model for Safety/Injury Prevention based on any identified child death trends and pattern reports and existing child safety coalitions.

- Required Support Activities located in the context]

1. 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.
2. Participate in education to support the ongoing development of MCH Core Competencies.
3. Identify existing and new community partners, their contributions, and level of collaboration via the Partnership Tool in SPHERE.
4. 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.
5. Participate in MCH Program evaluation efforts throughout the contract year.
6. Participate in training and technical assistance as negotiated, as well as the 2014 MCH Conference.
7. Complete the webinar series: Data-driven Approach to Early Childhood System-building (4 sessions, 90 minutes each).

Objective: Risk Profile

Percent of Objective Accomplished

0%	10%	20%	30%	40%	50%	60%	70%	80%	85%	90%	95%	100%
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Corresponding Percentage Recoupment

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Corresponding Potential Recoupment Amounts

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Definition of Percent Accomplished

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Conditions of Eligibility for an Incentive

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Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Preventive Health and Health Services
Block Grant

Objective #: 1 of 1

Objective Value: \$3,588

Objective: Primary Details

Objective Statement

Template Objective 11 - Oral Health

By August 31, 2014, Fond du Lac County Health Department will provide early childhood caries prevention services to 500 children ages 6 months through 6 years.

Deliverable Due Date: 09/30/2014

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: \$3,588

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

As of October 24, 2013, Fond du Lac County Health Department's Save a Smile Program provided fluoride varnishes to 909 children ages 6 months to 6 years in Fond du Lac County. Outreach has increased into one local daycare center and two elementary schools in Ripon.

Context

Fond du Lac County's Save a Smile Program recently completely a Community Health Improvement Plan which included a need for dental access to adults and children in Fond du Lac County. The Health Department has been providing fluoride varnish to Head Start students and has expanded this program to a local daycare with plans to increase this expansion to other daycares and/or increase enrollment with that current daycare, outreach for interest to daycare and local school district administration and parents, and get parent permission to have child participate. The plan includes a strategy to expand preventive oral hygiene (fluoride varnish) to day care centers and schools where 35% or more of the children receive subsidized child care or free or reduced lunch. An oral health risk assessment will be completed with fluoride varnish application, feedback/education to parents will be provided and referrals to area dentists will be provided as needed.

Context Continued

Input Activities

The following early childhood oral health preventive services are considered best practice: 1) anticipatory guidance for parents and other caregivers, 2) an oral health risk assessment for infants and children ages 6 months through 6 years, 3) up to 4 fluoride applications (based on risk determination), and 4) referral to a dentist if necessary.

<http://www.healthypeople.gov/2020/topicsobjectives2020/ibr.aspx?topicId=32>

<http://www.dhs.wisconsin.gov/hw2020/evidence.htm>

http://www.dhs.wisconsin.gov/health/Oral_Health/index.htm

Objective: Risk Profile

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Preventive Health and Health Services

Objective #: 1 of 1

Objective Value: \$3,588

Block Grant

Percent of Objective Accomplished

0%	10%	20%	30%	40%	50%	60%	70%	80%	85%	90%	95%	100%
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Corresponding Percentage Recoupment

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Corresponding Potential Recoupment Amounts

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Definition of Percent Accomplished

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Conditions of Eligibility for an Incentive

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Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Radon Indoor Radon RICs

Objective #: 1 of 1

Objective Value: \$11,464

Objective: Primary Details

Objective Statement

This objective is for calendar year 2014.

Deliverable Due Date: 01/31/2015

Contract Deliverable (Evidence)

Six-month reports, emailed by 7/31/14 and 1/31/15 to the Division of Public Health, document the activities and progress toward the negotiated annual target quantities specified in the Context section of this contract. Each report should be emailed as a single file, with all documents, photographs, etc. incorporated in the file, as required for our reports to US EPA.

Programs Providing Funds for this Objective

Radon Indoor Radon RICs: \$11,464

Agency Funds for this Objective:

Data Source for Measurement

Agency records:

Report of DHS bi-annually on the: number of media responses to news releases and other outreach with journal publications and broadcasts: journal and/or broadcast station names; the dates, lengths, and scanned images or the media's website versions of the stories. For Outreach to Professional, Trade and Other Groups needing to know about radon for their work: names of meetings and shows, venues, dates, attendance, and supporting information like announcements and agendas. For Response to Requests for Radon Information and Consulting: A tally of public requests from all channels: telephone, email, walk-in, etc. For Radon Proficiency Certification: Who at the agency is currently certified for radon measurement and mitigation proficiency. For Training and Stocking of Cooperating Local Agencies: A list of local public health agencies in the region and how they are trained and stocked with handouts, detectors and literature as appropriate, with brief information on what they have done. For Statewide and Regional Meetings: meetings RIC staff attended. For Database Development: Summary of measurement results added to the database. Field Site Visits: Number of sites visited.

Baseline for Measurement

Context

These activities shall be completed in 2014: 1) OUTREACH VIA MEDIA: Staff will have issued news releases and other public outreach, stimulating reports on radon risk, testing, and mitigation in major journal and broadcast media. Some of the outreach will have been done during January (National Radon Action Month), for synergy with outreach by other LPHAs, WI DPH and US EPA. Media interviewing the RIC will have been encouraged to also contact local businesses and residents for their radon stories; and to include the RIC telephone number and state website address, www.lowradon.org. 2) OUTREACH TO PROFESSIONAL AND TRADE GROUPS: Presentations will have been delivered by staff at meetings, shows, or conferences of groups that need to deal with radon as part of their work, such as realtors, home builders, code officials and health professionals. 3) RESPONSE TO REQUESTS FOR RADON INFORMATION: Respond to public requests for radon information and consulting. 4) RADON PROFICIENCY CERTIFICATION: National proficiency certification for radon measurement and mitigation will have been maintained by at least one staff working on radon, unless they have attended all recent annual RIC meetings, in which case after eight years of an individual being certified they may let their certification lapse. 5) TRAINING AND STOCKING OF COOPERATING LOCAL AGENCIES: Staff will train cooperating local public health agencies in their region as interest arises and help with follow-up for elevated measurement results as needed. 6) MEETINGS: Staff will attend statewide conference calls and meetings of RICs and DPH. 7) DATABASE DEVELOPMENT: Staff will have add new results of radon measurements that they facilitated to a database. 8) FIELD SITE VISITS: Staff will visit sites to consult and become informed about challenging radon mitigations or measurements as funding and schedules permit.

Context Continued

Input Activities

See Context above.

Objective: Risk Profile

Percent of Objective Accomplished

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Radon Indoor Radon RICs

Objective #: 1 of 1

Objective Value: \$11,464

0%	10%	20%	30%	40%	50%	60%	70%	80%	85%	90%	95%	100%
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Corresponding Percentage Recoupment

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Corresponding Potential Recoupment Amounts

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Definition of Percent Accomplished

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Conditions of Eligibility for an Incentive

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Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Women Infants Children Supplemental Nutrition

Objective #: 1 of 1

Objective Value: \$363,831

Objective: Primary Details

Objective Statement

Template Objective 1

During the contract budget period of January 1, 2014 through December 30, 2014, the Fond du Lac County 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 1,975 participants.

Programs Providing Funds for this Objective

Women Infants Children Supplemental Nutrition: \$363,831

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%
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Contract Agreement Addendum: Exhibit II(B)

Contract #: 24158

Agency: Fond du Lac County Health Department

Contract Year: 2014

Program: Women Infants Children Supplemental Nutrition

Objective #: 1 of 1

Objective Value: \$363,831

Corresponding Percentage Recoupment

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Corresponding Potential Recoupment Amounts

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Definition of Percent Accomplished

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Conditions of Eligibility for an Incentive

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