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DIVISION OF PUBLIC HEALTH

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2014 DPH Consolidated Contract Addendum

This contract addendum is specific to Marquette County Health Department whose principal business address is 428 Underwood Avenue, PO Box 181, Montello WI, 53949-0181. 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 6/12th 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 #: 24182 **Agency:** Marquette 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.

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 #: 24182 **Agency:** Marquette County Health Department **Contract Year:** 2014

Contract Source of Funds

Source	Program	Amount
Marquette County	Childhood Lead - Consolidated	$1,786
Marquette County	Immunization - Consolidated IAP	$5,854
Marquette County	Maternal Child Health - Consolidated	$7,537
Marquette County	Oral Health - Fluoride Supplement	$1,941
Marquette County	Prevention - Consolidated	$1,859
	Contract Amount	**$18,977**

Contract Match Requirements

Program	Amount
Childhood Lead	$0
Immunization	$0
MCH	$5,653
Oral Health	$0
Prevention	$0

Program Sub-Contracts

Program	Sub-Contractee	Sub-Contract Amount
Childhood Lead	None Reported	$0
Immunization	None Reported	$0
MCH	None Reported	$0
Oral Health	None Reported	$0
Prevention	None Reported	$0

Contract Agreement Addendum: Exhibit II(A)

Contract #: 24182 **Agency:** Marquette County Health Department **Contract Year:** 2014

Childhood Lead **Program Total Value $1,786**

1 Template Objective 4 $0

Throughout the 2014 contract period, residents from the jurisdiction of the (insert name of jurisdiction) Health Department will receive lead poisoning prevention and intervention services that are provided according to federal and state guidelines.

2 Template Objective 4 $1,786

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

Immunization **Program Total Value $5,854**

1 LHD Template Objective $5,854

By December 31, 2014, 66% children residing in Marquette 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 $7,537**

1 Template Objective 1 $7,537

By December 31,2014, Implementation for the Wisconsin Healthiest Families Initiative will be undertaken by the Marquette County Public Health Department in collaboration with community partners focusing on Family Supports. (Step 3)

Oral Health **Program Total Value $1,941**

1 Template Objective 1 $1,941

School-Based Fluoride Supplement Program: By December 31, 2014, (insert number) children ages 6 months through 16 years from non-fluoridated communities will participate in a dietary fluoride supplement program administered by (insert name) Health Department.

Prevention **Program Total Value $1,859**

1 Template Objective 3 - Healthy Weight in Children and Adolescents $1,859

By August 31, 2014, Marquette COunty Health Department will implement one evidence based strategies to promote healthy weight in children and adolescents.

Total of Contract Objective Values $18,977

Total of Contract Statement Of Work Values $0

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24182 **Agency:** Marquette County Health Department **Contract Year:** 2014
Program: Childhood Lead Consolidated **Objective #:** 1 of 2 **Objective Value:** $0

Objective: Primary Details

Objective Statement

Template Objective 4

Throughout the 2014 contract period, residents from the jurisdiction of the (insert name of jurisdiction) 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 5 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 5 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 5 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

Agency Funds for this Objective:

Data Source for Measurement

An agency-generated report.

Baseline for Measurement

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 5 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 5 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%

Corresponding Percentage Recoupment

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24182 **Agency:** Marquette County Health Department **Contract Year:** 2014

Program: Childhood Lead Consolidated **Objective #:** 1 of 2 **Objective Value:** $0

Corresponding Potential Recoupment Amounts

Definition of Percent Accomplished

Conditions of Eligibility for an Incentive

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24182 **Agency:** Marquette County Health Department **Contract Year:** 2014
Program: Childhood Lead Consolidated **Objective #:** 2 of 2 **Objective Value:** $1,786

Objective: Primary Details

Objective Statement

Template Objective 4

Throughout the 2014 contract period, residents from the jurisdiction of the Marquette 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 5 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 5 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 5 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: $1,786

Agency Funds for this Objective:

Data Source for Measurement

An agency-generated report.

Sphere and Stellar generated reports.

Baseline for Measurement

Between 1/1/2013 and 10/17/2013 there were 151 Marquette County children who were eligible and screened for lead poisoning. 155 age appropriate blood lead tests were done with no elevated blood lead levels.

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 5 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 5 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

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24182 **Agency:** Marquette County Health Department **Contract Year:** 2014
Program: Childhood Lead Consolidated **Objective #:** 2 of 2 **Objective Value:** $1,786

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 #: 24182 **Agency:** Marquette County Health Department **Contract Year:** 2014
Program: Immunization **Objective #:** 1 of 1 **Objective Value:** $5,854

Objective: Primary Details

Objective Statement

LHD Template Objective

By December 31, 2014, 66% children residing in Marquette 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 Marquette 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: $5,854

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

The baseline benchmark report run is 66%.

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

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 #: 24182 **Agency:** Marquette County Health Department **Contract Year:** 2014
Program: Maternal and Child Health Block Grant **Objective #:** 1 of 1 **Objective Value:** $7,537

Objective: Primary Details

Objective Statement

Template Objective 1

By December 31,2014, Implementation for the Wisconsin Healthiest Families Initiative will be undertaken by the Marquette County Public Health Department in collaboration with community partners focusing on Family Supports. (Step 3)

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 2014 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 Family Supports Focus Area that directly aligns with the objective.

6. An updated Community Logic Model.

7. A completed Implementation Report

Programs Providing Funds for this Objective

Maternal and Child Health Block Grant: $7,537

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.

Baseline for Measurement

Include items that were completed in 2013:

- Coalition or collaborative details. Provide the name of the group, how long the group has been in existence, and what the mission and goals are.

- Explain how the previous year's work is directing your 2014 activities related to the steps of assessment, planning, implementation, or evaluation and sustainability Include the following items that were completed in 2012 for the Baseline for Measurement:

- Coalition established. Marquette County Health Department is Lead or Participating Member of the Family Connection Coalition.

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24182 **Agency:** Marquette County Health Department **Contract Year:** 2014
Program: Maternal and Child Health Block Grant **Objective #:** 1 of 1 **Objective Value:** $7,537

Family Connection Coalition meets quarterly. The Coalition coordinates with the Parent Information Exhchange (P.I.E.), a group of mothers with young children that meet for support, education, and playgroups.

Assessment results: Identified need for community level education effort. P.I.E. will be used to disseminate information by recruiting mothers with particular interest and providing training on MCH topics and programs, as well as general education to the larger group.

- Plan established based on the findings of the assessment. The Logic Model establishes an assessment process of parents needs, interests, education of P.I.E, improved resource bank, and education of local providers. Agency resources are extremely limited and necessitates this unique systems work Coalition established. Family Connection Coalition meets quarterly. The Coalition coordinates with the Parent Information Exhchange (P.I.E.), a group of mothers with young children that meet for support, education, and playgroups.

In 2013, Updated County Resource Directory and made it available on-line as well as in paper form at public sites (libraries) and agencies. Working with IT department to get to get Marquette County Health Department more "user friendly" to share resources/partner sites.

-Completed two community/county wide competency building events to enhance the Family Supports Initiative. One event was "Building Resilience" to enhance Life Course Model understanding and application county wide.

-Recruited additional community partners.

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.

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24182 **Agency:** Marquette County Health Department **Contract Year:** 2014
Program: Maternal and Child Health Block Grant **Objective #:** 1 of 1 **Objective Value:** $7,537

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 RepoStep 3: Implementation The agency and partners will implement strategies and have 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.

- 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).

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24182 **Agency:** Marquette County Health Department **Contract Year:** 2014
Program: Maternal and Child Health Block Grant **Objective #:** 1 of 1 **Objective Value:** $7,537

Input Activities

- 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 Step 3: Implementation

REQUIRED SUPPORT ACTIVITES:

- Complete an initial 2014 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 opportunities, as well as the 2014 MCH Conference.

- Complete the webinar series: Data-driven Approach to Early Childhood System-building (4 sessions, 90 minutes each).

-Healthy Baby Coalition will offer a county wide training to continue skill building for parents/professionals related to Children's mental health related to Family Supports.

-Work with parent para-professionals to assess community needs and evaluation of training implementation and additional training needed.

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 #: 24182 **Agency:** Marquette County Health Department **Contract Year:** 2014
Program: Oral Health **Objective #:** 1 of 1 **Objective Value:** $1,941

Objective: Primary Details

Objective Statement

Template Objective 1

School-Based Fluoride Supplement Program: By December 31, 2014, (insert number) children ages 6 months through 16 years from non-fluoridated communities will participate in a dietary fluoride supplement program administered by (insert name) Health Department.

Deliverable Due Date: 01/31/2015

Contract Deliverable (Evidence)

A report to document, by age and community, the number of children who participated in a dietary fluoride supplement program administered by (insert name) Health Department.

Programs Providing Funds for this Objective

Oral Health: $1,941

Agency Funds for this Objective:

Data Source for Measurement

SPHERE Community Report to include the data from the following screens: Community Activity (all appropriate fields) and Fluoride Supplement (no detail screen).

Baseline for Measurement

Context

The target population for this program is children from age 6 months to 16 years. The children targeted must not have access to fluoridated water or have natural fluoride levels at or above certain concentration levels for specific age groups. Water sources must be tested to determine the fluoride content prior to determining the dosage for dietary fluoride supplements. In other words, this program is targeted to children in non-fluoridated communities or rural areas with low natural fluoride in the water.

Context Continued

Input Activities

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 #: 24182 **Agency:** Marquette County Health Department **Contract Year:** 2014
Program: Preventive Health and Health Services Block Grant **Objective #:** 1 of 1 **Objective Value:** $1,859

Objective: Primary Details

Objective Statement

Template Objective 3 - Healthy Weight in Children and Adolescents

By August 31, 2014, Marquette COunty Health Department will implement one evidence based strategies to promote healthy weight in children and adolescents.

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: $1,859

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 for Marquette County Health Department.

Context

Describe why this objective was chosen and selected outcome measure(s).

Objective was chosen because Marquette County ranks in the bottom 10% of counties on several measurements of nutrition related health determinants. 1 out of 3 adults is obese: 1 in 5 children lives in poverty; 43% of children receive free or reduced school lunch. Access to fresh foods was a frequent community concern on our Community Health Assessment (CHA).

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://whatworksforhealth.wisc.edu/

http://www.fruitsandveggiesmatter.gov/downloads/NationalActionGuide2009.pdf

Taste-testing fruits and vegetables from what works for health web site.

We plan to use the money to increase knowledge of fresh fruits and vegetables by introducing a new fresh fruit or vegetable to approximately 1000 elementary school aged children who go to school in Westfield, Montello, and Oxford schools. By encouraging youth to taste fruits and vegetables can increase their requests for the fruit or vegetable. Emphasis will be on vegetables and fruits that can be grown in the school gardens to increase use and interest in the summer school garden. The vegetables in the school garden are free to families and will increase knowledge of vegetables as well as access to these fresh vegetables at no cost. We are complementing the UW Extension teaching program time slot that is already in place at the schools. Money will be used to purchase fruits/vegetables and educate about fruits/ vegetables and alternate ways to eat....cooked, raw, with healthy dips.

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24182 **Agency:** Marquette County Health Department **Contract Year:** 2014

Program: Preventive Health and Health Services Block Grant **Objective #:** 1 of 1 **Objective Value:** $1,859

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