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2014 DPH Consolidated Contract Addendum

This contract addendum is specific to Milwaukee City Health Department whose principal business address is 841 North Broadway 3rd Floor, Milwaukee WI, 53213-0068. 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 #: 24184

Agency: Milwaukee City 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 #: 24184

Agency: Milwaukee City Health Department

Contract Year: 2014

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

Contract Agreement Addendum: Exhibit II

Program Objectives

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

(B) Objective Details

Contract Agreement Addendum: Exhibit II(A)

Contract #: 24184

Agency: Milwaukee City Health Department

Contract Year: 2014

Contract Source of Funds		
Source	Program	Amount
Milwaukee City	Childhood Lead - Consolidated	\$259,869
Milwaukee City	Immunization - Consolidated IAP	\$283,771
Milwaukee City	Maternal Child Health - Consolidated	\$515,343
Milwaukee City	Prevention - Consolidated	\$21,927
Milwaukee City	WIC USDA	\$1,341,914
	Contract Amount	\$2,422,824

Contract Match Requirements	
Program	Amount
Childhood Lead	\$0
Immunization	\$0
MCH	\$386,507
Prevention	\$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
WIC	None Reported	\$0

Contract Agreement Addendum: Exhibit II(A)

Contract #: 24184

Agency: Milwaukee City Health Department

Contract Year: 2014

Immunization

Program Total Value \$283,771

- | | | |
|---|---|-----------|
| 1 | By December 31, 2014, the Milwaukee Health Department (MHD) will work with MPS and Private schools in the city of Milwaukee to increase the City immunization compliance rate by 2% from 87% to 89%. | \$169,408 |
| 2 | By December 31, 2014, 58% children residing in City of Milwaukee 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. | \$114,363 |

MCH

Program Total Value \$515,343

- | | | |
|---|--|-----------|
| 1 | By December 31,2014,implementation activities for the Wisconsin Healthiest Families Initiative will be undertaken by the City of Milwaukee Health Department in collaboration with community partners focusing on family supports. | \$448,222 |
| 2 | Template Objective 1 | \$67,121 |
- By December 31,2014,implementation activities for the Wisconsin Healthiest Families Initiative will be undertaken by the City of Milwaukee Health Department in collaboration with community partners focusing on child development

Prevention

Program Total Value \$21,927

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|---|--|----------|
| 1 | By August 31, 2014 the City of Milwaukee Health Department will complete a community health assessment and community health improvement plan with measurable objectives. | \$21,927 |
|---|--|----------|

WIC

Program Total Value \$1,341,914

- | | | |
|---|----------------------|-------------|
| 1 | Template Objective 1 | \$1,341,914 |
|---|----------------------|-------------|
- During the contract budget period of January 1, 2014 through December 30, 2014, the City of Milwaukee Health Department WIC Project will maintain an average monthly participation that is at least 97% of the assigned case load.

Total of Contract Objective Values	\$2,162,955
Total of Contract Statement Of Work Values	\$0

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24184
Program: Immunization

Agency: Milwaukee City Health Department
Objective #: 1 of 2

Contract Year: 2014
Objective Value: \$169,408

Objective: Primary Details

Objective Statement

By December 31, 2014, the Milwaukee Health Department (MHD) will work with MPS and Private schools in the city of Milwaukee to increase the City immunization compliance rate by 2% from 87% to 89%.

Deliverable Due Date: 01/31/2015

Contract Deliverable (Evidence)

1. A report summarizing immunization compliance activities, including weekend and school clinic activities, an update on record reconciliation and school site visits.
2. A copy of MPS's School Report to Local Health Departments annual immunization compliance report.
3. A copy of vaccine usage report indicating the number of clients and vaccinations entered into the registry.
4. A list of private schools who failed to submit the School Report to Local Health Department that was forwarded to the DA's office for follow up.

Programs Providing Funds for this Objective

Immunization: \$169,408

Agency Funds for this Objective:

Data Source for Measurement

School Report to Local Health Departments.

Baseline for Measurement

All city of Milwaukee school compliance rate in 2012 = 87.1%

All city of Milwaukee school compliance rate in 2013 = 87.4% (preliminary as of 11/11/2013 still working with private schools)

Context

Continuation of goal to meet the Healthy People 2020 goal of having 95% of children in compliance with school and childcare immunizations requirements.

Context Continued

Input Activities

1. By December 31, 2014 MHD will provide 20 offsite immunization opportunities.
2. By December 31, 2014 MHD will hold 6 weekend clinics corresponding with MPS mailings.
3. By December 31, 2014 MHD will continue to refine and implement policies, procedures and intervention activities to address private schools who fail to submit the required School Report to Local Health Departments.
4. By December 31, 2014 MHD will conduct site visits to 15 schools (including both public and private).
5. MHD will enter all immunizations administered at offsite and onsite clinics into the WIR.
6. MHD will collaborate with the DA to hold two immunization requirement educational meetings; one with schools and one with childcare providers.

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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Contract Agreement Addendum: Exhibit II(B)

Contract #: 24184
Program: Immunization

Agency: Milwaukee City Health Department
Objective #: 1 of 2

Contract Year: 2014
Objective Value: \$169,408

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 #: 24184
Program: Immunization

Agency: Milwaukee City Health Department
Objective #: 2 of 2

Contract Year: 2014
Objective Value: \$114,363

Objective: Primary Details

Objective Statement

By December 31, 2014, 58% children residing in City of Milwaukee 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 City of Milwaukee jurisdiction who turned 24 months of age in 2013. 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 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: \$114,363

Agency Funds for this Objective:

Data Source for Measurement

Wisconsin Immunization Registry

Baseline for Measurement

Clients Residing in City: MILWAUKEE

Clients who did NOT meet the selected benchmark(s)

Just consider immunizations as meeting the benchmark

Birth date between 01/01/2010 and 12/31/2010

Evaluation date: 01/01/2013

Benchmark age @ 24 months

Selected benchmarks: DTaP (4), HepB (3), Hib (3), MMR (1), Polio (3), Pneumo (4), Varicella (1)

Total clients: 10813; 6127 clients (57%) met all benchmark criteria, 4686 clients did not

Late up-to-date: 7621 clients (70%) met all benchmark criteria as of report generated date, 3192 clients did not

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 only if you can prove that a child has moved out of your jurisdiction you can not remove them from your cohort.

Accountability targets are strongly recommended for all agencies. Accountability targets must be at or above the Quality Criteria

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24184
Program: Immunization

Agency: Milwaukee City Health Department
Objective #: 2 of 2

Contract Year: 2014
Objective Value:
 \$114,363

standards. It is encouraged to consult with the immunization program advisor.

Context Continued

Input Activities

1. MHD will do quarterly reminder/recall mailings and calls.
2. MHD will sponsor an immunization symposium to increase provider knowledge on immunizations.
3. MHD will conduct site visits to 15 childcare providers to increase parental awareness; if a facility can obtain 20 consents MHD will conduct an onsite clinic at that site.
4. MHD will participate in 25 community health education/health fair events to increase awareness about the importance of immunizations.
5. MHD will partner with 2 WIC sites in the City to increase childhood immunizations with their clients.

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 #: 24184

Agency: Milwaukee City Health Department

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 1 of 2

Objective Value: \$448,222

Objective: Primary Details

Objective Statement

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

Deliverable Due Date: 01/31/2015

Contract Deliverable (Evidence)

A SPHERE report and an analysis of data collected in SPHERE as defined within the Data Source for Measurement and narrative report to document: 1) A completed baseline assessment of agency core competencies by January 31, 2014, updated throughout the contract 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 Systems-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 Implementation Report following the instructions found on the Early Childhood Systems website.

Individual NFP Services: A report to document: 1) Number of enrolled clients visited in contract year; 2) Total number of completed home visits for these clients; 3) Number of babies born and birth outcomes including prematurity and low birthweight; 4) Demographics of the clients including race, ethnicity, and age; 5) Number of developmental and social-emotional screenings completed and number of referrals; 6) Number of families receiving mental health consultation.

Programs Providing Funds for this Objective

Maternal and Child Health Block Grant: \$448,222

Agency Funds for this Objective:

Data Source for Measurement

SPHERE Report to include data from the following tab/screen: 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, including partner representation and contribution of partnership; WHF Implementation Report (one per focus area).

NFP: Copies of NFP reports and SPHERE Individual/Household Report to include the MCH Required Demographic Data and data from the following screens: Intervention: Case Management, Sub-Interventions: Prenatal Assessment (all fields), Prenatal Ongoing Monitoring, Postpartum Assessment (all fields); Intervention: Screening, Sub-Interventions: Developmental Assessment ASQ (with Details), plan of action and results (if need identified) and Developmental Assessment ASQ:SE (with Details), plan of action and results (if need identified); and if need identified, Intervention: Referral and Follow-up, Sub-intervention: Type/place(s) and outcomes, Intervention: consultation, Sub-intervention: mental health. NFP Report to include number of DANCE Assessments completed during infancy and toddlerhood.

Baseline for Measurement

-Milwaukee Young Child Wellness Council (YCWC) was established in 2010 and continues to hold meetings monthly. In addition there are multiple subcommittees which meet and focus on individual goals for the council. These include Home Visitation Community of Practice, Community Developmental Screening, and Community

Behavioral Health for Children & Families. Participants in this coalition include private and public sector organizations that provide or support services to young children and their families. The YCWC is focusing on strategic plan to assure sustainability in the community of all the efforts that have focused on family supports and young child growth and development.

-Based on assessments and input from community partners the gaps that have been identified include: access to mental and behavioral health programs, knowledge of importance of social-emotional development among multi-system early childhood providers, increasing the number of appropriate participants in the YCWC and related programs.

-The YCWC community partners are addressing these identified gaps in several ways including: implementing the broader use and availability of Mental Health Consultation, activities in raising awareness of the importance of Infant Mental Health and Early

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24184

Agency: Milwaukee City Health Department

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 1 of 2

Objective Value:
\$448,222

Childhood Mental Health interventions, expanding the numbers of child-servicing centers providing developmental and social-emotional screenings, outreach to families in the targeted intervention areas, and ongoing sustainment of identified objectives.

-In the past 12 months (October 1, 2012 through September 30, 2013) Nurse-Family Partnership has conducted 1,651 home visits with 171 families at various phases of the program, conducted 88 developmental and/or social-emotional screens for 68 children, and utilized Mental Health Consultants referring 42 clients for services with 26 individual assessments completed.

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, including children and youth with special health care needs, and expectant and parenting families with young children. There is a special focus on those at risk for poor health outcomes.

All local health departments need to propose reasonable use of their 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: This objective focuses on Family Supports which is one of four focus areas for the Wisconsin Healthiest Families Initiative (WHFI). (See website for definition.)

If an agency is addressing more than one WHFI objective, efforts should be integrated. Examples of this approach include a single coalition that addresses multiple focus areas and an integrated assessment.

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.

Outcomes: Outcomes for Family Supports include, but are not limited to, the following:

- Increase awareness among community service providers about the continuum of resources available for expectant and parenting families with young children with special focus on those at risk for poor health outcomes and supporting collaborative entry into services. Examples of evidence-based or research informed programs or training using this approach include: Home Visitation: Foundations, Parents as Teachers, Great Beginnings Start before Birth, and Head Start.
- Establish a "no wrong door" policy for entry into community resources for expectant and parenting families with young children.
- Improve utilization of the continuum of resources available for expectant and parenting families with young children with special focus on those at risk of poor health outcomes.
- Increase community capacity to engage women of childbearing age in a medical home and needed community resources to reduce the risks for poor birth outcomes.

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24184

Agency: Milwaukee City Health Department

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 1 of 2

Objective Value:
\$448,222

-Increase the number of families receiving direct services that will include assurance of access to community resources to improve their self-sufficiency, provide regular developmental screenings and referrals as appropriate, increase the number of mental health consultations with families and staff, and increase the number of HOME Inventory and Safety Assessments.

Context Continued

Steps: The Wisconsin Healthiest Families Initiative will be implemented in collaboration with community partners. Sequential steps will be implemented to complete an assessment, plan and implementation and evaluation strategies. These steps may be completed over multiple years. Sustainability and quality improvement will be addressed in future years.

Step 1: Assessment - Complete an assessment to identify the service, program or other resources in the community related to family supports and/or parent education. Assessment of multiple focus areas can be reported on one Assessment Findings form.

Step 2: Plan - With agreement of the community partners, develop a community plan that addresses the strengths and gaps identified in the assessment completed in Step 1, and promotes 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 in the area of family supports. The plan will be reported with a Community Logic Model with one logic model submitted for each focus area addressed by the agency and partners.

Step 3: Implementation and Evaluation - Implement and evaluate activities identified in the Plan completed in Step 2 to strengthen the system of early childhood services within the community, setting priority based upon community assets and needs. 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: Sustainability and Quality Improvement - Quality improvement processes will be used in future years to continue to improve the system of early childhood services within the community.

The home visitation programs in the City of Milwaukee Health Department (MHD) provide comprehensive services to expectant and parenting at-risk families using several different evidence-based models. These programs share parallel goals of improving birth and pregnancy outcomes; improving child health, safety and development; enhance family functioning and improve parent's economic self-sufficiency; and prevent child abuse and neglect. The Life-course Framework is interconnected in the goals and interventions of these programs with focus on planning, prevention, and identifying long-term goals with families. In addition, the MHD along with the State of Wisconsin, through the work of Project LAUNCH, is working on multiple approaches to promote the wellness of young children ages birth to 8 years and their families by addressing the physical, emotional, social, cognitive, and behavioral aspects of their development. Services at the core of the Wisconsin Healthy Families Initiative that are currently incorporated into the MHD home visitation programs include:

*Child development assessments using the ASQ at required intervals

*Assessment of the child social-emotional status using ASQ:SE at required intervals

*Mental health consultation available for family and staff support

*HOME (Home Observation for Measurement of the Environment) Inventory at required intervals to measure the quality and quantity of stimulation and support available to a child in the home environment.

Input Activities

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

¿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

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24184

Agency: Milwaukee City Health Department

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 1 of 2

Objective Value:
\$448,222

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).

-MHD will continue to lead and provide oversight to the work of the Milwaukee Well-Child Connections: Young Child Wellness Council. This Council will continue to build a comprehensive system that supports the health and wellness of all children and their families in our community.

-Through home visitation in the Nurse-Family Partnership Program at least 1,500 home visits will be conducted with 160 clients. The nurse-conducted home visits will focus on developing the previously identified program goals as well as to focus on the strengths of the families.

-Participate in evaluation 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 #: 24184

Agency: Milwaukee City Health Department

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 2 of 2

Objective Value: \$67,121

Objective: Primary Details

Objective Statement

Template Objective 1

By December 31,2014,implementation activities for the Wisconsin Healthiest Families Initiative will be undertaken by the City of Milwaukee Health Department in collaboration with community partners focusing on child development

Deliverable Due Date: 01/31/2015

Contract Deliverable (Evidence)

A SPHERE Report and an analysis of data collected in SPHERE as defined within the Data Source for Measurement and narrative report to document: 1) A completed baseline assessment of agency core competencies by January 31, 2014, updated throughout the year and completed by marking 'Final for Contract Year' by January 31, 2015. 2) Documentation of participation in the MCH Annual Conference. 3) Documentation of participation in the webinar series: Data-driven Approach to Early Childhood Systems-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 Implementation Report following the instructions found on the Early Childhood Systems website.

Programs Providing Funds for this Objective

Maternal and Child Health Block Grant: \$67,121

Agency Funds for this Objective:

Data Source for Measurement

A SPHERE Report to include the data from the following tab/screen: 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 Implementation Report (one per focus area.

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.

A Men's Health Referral Network was established in 2009. The mission is to inspire men toward practicing healthy behavior and improve the health status of themselves and their families. The goals are to collaboratively improve the health and conditions of male children, teens and adults; to establish a community of health male children; teens and adults by prioritizing behaviors that reduce illness, injury, and early death; and to overcome societal and relationship instabilities by empowering fathers and strengthening available resources. The Milwaukee Health Department's Men's Health Program is the lead for this coalition. The coalition meets monthly and was introduced to the Life Course Framework at the end of 2011. A plan for the coalition was developed based on the findings of the 2013 assessments.

During 2013, 8 Milwaukee fatherhood focused agencies worked with MHD to complete an assessment to learn their services objectives, identify the scope of their programs, and determine strengths and gaps in assuring multi-sector service systems support for expectant parents and families with infants and children at risk for poor health outcomes. These fatherhood programs were not familiar child development screening recommendations and all had a limited understanding of the services provided by other community resources. Six agencies had staff available to be trained in child development and the ASQ for 2013/2014

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24184

Agency: Milwaukee City Health Department

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 2 of 2

Objective Value: \$67,121

In 2013, a plan was designed with the 6 Milwaukee Fatherhood focused agencies to deliver over a one year period: introduce their staff to child development milestones; provide information to encourage supporting exclusive breastfeeding for at least six months; educate agency staff about the Wisconsin Healthiest Family Initiative and the Lifecourse Theory; expand the number of service providers who know the value of a valid child development screening tool; establish a baseline for the number of fathers familiar with developmental milestones and developmental screening tools; and increase the number of fatherhood agency partners to adopt the American Academy of Pediatrics recommendations for developmental screening at 9, 18, and 30 months. Two Men's Health Program staff received Ages and Stages (ASQ) training and offered the service to fathers of young children. The same staff received technical assistance at the 2013 WPHA conference. One Men's Health Program staff is expected to complete the ASQ trainer process by January 2014. A Men's Health intern assisted the program by creating flyers and promoting the child development elements at the Men's Health Centers. The partner agencies staff and representatives from the Milwaukee County Child Support Services Office received Lifecourse training during the Milwaukee Fatherhood Summit and planned to assist MHD by introducing their male parents to the importance of child development, milestones, and screenings. In order to support implementation, they also planned to refer clients to MHD and eventually promote screening training opportunities for their staff. A panel discussion at the 2013 Milwaukee Fatherhood Summit included promoted increasing father involvement introducing concepts of child development to men and providing more screening opportunities at fatherhood service organizations. Monthly Referral Network meetings still occur and the group is discussing the options of evaluating the number of fathers familiar with child development and ASQ at individual organizations and at the 2014 Fatherhood Summit

Context

The City of Milwaukee Health Departments Men's Health Program is a one-stop-shop providing free information and referrals for a range of services tailored to meet men's needs and to assist them in leading longer and healthier lives. The program has connected numerous community partners in a network that supports fathers in their capacity to be successful parents who play an active part in the development of their children. Healthier men can be better and more supportive fathers. Their support can decrease stress felt by the mother leading to better birth outcomes and healthier children. Focus groups of pregnant women and new mothers have identified that a father's unemployment and stress felt by the father as a major source of tension during pregnancy and while caring

for a child. Supportive fathers can also sustain women's efforts to breastfeed and women who are encouraged are more likely to extend the length of time of breastfeeding. Increasing men's involvement during pregnancy is linked to a reduction in the number of children with low birth weight. Fathers with strong attachments to the baby are more likely to continue their participation in the child's life. The Men's Health Program works extensively by collaborating with numerous service providers in the community. These providers assist men, women, and children. Collaborations with community partners are important because the broader community environment strongly affects the capacity for the whole family to be healthy. Under the leadership of the City of Milwaukee Health Department, the strengths of community partners will be promoted and supported

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

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24184

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Contract Year: 2014

Program: Maternal and Child Health Block Grant

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Objective Value: \$67,121

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:

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.

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24184

Agency: Milwaukee City Health Department

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 2 of 2

Objective Value: \$67,121

¿ 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

Local health departments need to complete the following information prior to negotiations:

-The Milwaukee Health Departments Men's Health Program plans to introduce the project and its findings to the American Public Health Associations Men's Health Caucus to demonstrate local support for their National Men's Health Policy Agenda.

-¿ 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).

-Provide fathers health services and appropriate referrals for 100 men to ensure support for expectant parents, breast feeding initiation and sustainability and foster child bonding and development

Step 3: Implementation - Implement activities identified in the Plan completed in Step 2 to strengthen the system of early childhood services within the community, setting priority based upon community assets and needs. Implementation will include aligning new and existing community partners with the goals of the Wisconsin Healthiest Families Initiative; expanding the number of service providers who know the value of a valid child development screening tool; provide fathers health services and appropriate referrals for 100 men to ensure support for expectant parents, breast feeding

initiation and sustainability and foster child bonding and development Step 3 will be reported on the Implementation Report with one report submitted for each focus area addressed by the agency and partners.

Objective: Risk Profile

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24184

Agency: Milwaukee City Health Department

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 2 of 2

Objective Value: \$67,121

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 #: 24184

Agency: Milwaukee City Health Department

Contract Year: 2014

Program: Preventive Health and Health Services
Block Grant

Objective #: 1 of 1

Objective Value: \$21,927

Objective: Primary Details

Objective Statement

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

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: \$21,927

Agency Funds for this Objective:

Data Source for Measurement

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

Baseline for Measurement

This is a new initiative

Context

After a year long process, the MHD has almost completed its Community Health Assessment. In order to meet Accreditation standards, the MHD must create a strategy for dissemination in the community. The MHD plans on sharing the CHA results with the public, alderman, Mayor and the health community. Our goal is to share this plan and recruit members of the community to participate in our CHIP process. The CHIP will be developed based on our CHA results and the MHD will assure that there is great community involvement. The goal is to complete our CHIP in early Spring 2014 and share the results with the community. The MHD will then identify our role as well as others in implementing the plan. Once we know our role, the MHD can make sure that those goals are reflected in our agency strategic plan.

Context Continued

Input Activities

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

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

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

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

www.countyhealthrankings.org/roadmaps

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

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24184

Agency: Milwaukee City Health Department

Contract Year: 2014

Program: Preventive Health and Health Services

Objective #: 1 of 1

Objective Value: \$21,927

Block Grant

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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 #: 24184

Agency: Milwaukee City Health Department

Contract Year: 2014

Program: Women Infants Children Supplemental Nutrition

Objective #: 1 of 1

Objective Value:
\$1,341,914

Objective: Primary Details

Objective Statement

Template Objective 1

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

Deliverable Due Date: 01/31/2015

Contract Deliverable (Evidence)

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

Programs Providing Funds for this Objective

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

Agency Funds for this Objective:

Data Source for Measurement

WIC Participation Reports. Baseline for Measurement:

Current caseload is ___ participants.

Programs Providing Funds for this Objective

Women Infants Children Supplemental Nutrition: \$1,341,914

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 #: 24184

Agency: Milwaukee City Health Department

Contract Year: 2014

Program: Women Infants Children Supplemental Nutrition

Objective #: 1 of 1

Objective Value: \$1,341,914

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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