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Department of Health Services

2014 DPH Consolidated Contract Addendum

This contract addendum is specific to Sheboygan County Human Services whose principal business address is 1011 North Eighth Street, Sheboygan WI, 53081-4043. 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 #: 24203

Agency: Sheboygan County Human Services, Division of Public Health

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 #: 24203

Agency: Sheboygan County Human Services, Division of Public Health

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 #: 24203

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2014

Contract Source of Funds		
Source	Program	Amount
Sheboygan County	Childhood Lead - Consolidated	\$16,373
Sheboygan County	Immunization - Consolidated IAP	\$28,319
Sheboygan County	Maternal Child Health - Consolidated	\$41,799
Sheboygan County	Prevention - Consolidated	\$4,096
Sheboygan County	WIC USDA	\$412,251
Contract Amount		\$502,838

Contract Match Requirements	
Program	Amount
Childhood Lead	\$0
Immunization	\$0
MCH	\$31,349
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 #: 24203

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2014

Childhood Lead

Program Total Value \$16,373

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|---|--|----------|
| 1 | Template Objective 1 | \$12,600 |
| | By December 31, 2014, 700 children at risk for lead poisoning who reside in Sheboygan County Health and Human Services, Division of Public Health will receive an age-appropriate blood lead test. | |
| 2 | Template Objective 6 | \$3,773 |
| | By December 31, 2014, 14 pre-1950 housing units located in Sheboygan County Health and Human Services, Division of Public Health will be made lead-safe. | |

Immunization

Program Total Value \$28,319

- | | | |
|---|--|----------|
| 1 | LHD Template Objective | \$28,319 |
| | By December 31, 2014, 81% children residing in Sheboygan County Division of Public Health's 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 \$41,799

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|---|---|----------|
| 1 | Template Objective 1 | \$41,799 |
| | By December 31, 2014, implementation activities for the Wisconsin Healthiest Families Initiative will be undertaken by the Sheboygan County Division of Public Health in collaboration with community partners focusing on child development. | |

Prevention

Program Total Value \$4,096

- | | | |
|---|--|---------|
| 1 | Template Objective 9 - National Public Health Standards | \$4,096 |
| | By August 31, 2014, Sheboygan County Division of Public Health will conduct one activity to prepare for voluntary accreditation by completing an agency accreditation readiness self-assessment. | |

WIC

Program Total Value \$412,251

- | | | |
|---|---|-----------|
| 1 | Template Objective 1 | \$412,251 |
| | During the contract budget period of January 1, 2014 through December 30, 2014, the Sheboygan County WIC Project will maintain an average monthly participation that is at least 97% of the assigned case load. | |

Total of Contract Objective Values	\$502,838
Total of Contract Statement Of Work Values	\$0

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24203

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2014

Program: Childhood Lead Consolidated

Objective #: 1 of 2

Objective Value: \$12,600

Objective: Primary Details

Objective Statement

Template Objective 1

By December 31, 2014, 700 children at risk for lead poisoning who reside in Sheboygan County Health and Human Services, Division of Public Health will receive an age-appropriate blood lead test.

Deliverable Due Date: 01/31/2015

Contract Deliverable (Evidence)

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

Programs Providing Funds for this Objective

Childhood Lead Consolidated: \$12,600

Agency Funds for this Objective:

Data Source for Measurement

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

Baseline for Measurement

As of August 31, 2013 Sheboygan County Division of Public Health has provided lead testing of 498 children.

Context

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

Context Continued

Input Activities

The children at risk for lead poisoning who will receive an age - appropriate blood lead test will include children enrolled an the WIC program and any refugees. This objective will reflect testing done at Sheboygan County Health and Human Services, Division of Public Health.

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 #: 24203

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2014

Program: Childhood Lead Consolidated

Objective #: 2 of 2

Objective Value: \$3,773

Objective: Primary Details

Objective Statement

Template Objective 6

By December 31, 2014, 14 pre-1950 housing units located in Sheboygan County Health and Human Services, Division of Public Health will be made lead-safe.

Deliverable Due Date: 01/31/2015

Contract Deliverable (Evidence)

A report to document the number of individual housing units that were assessed, year the housing units were built, and results of clearance testing after lead paint hazards have been corrected.

Programs Providing Funds for this Objective

Childhood Lead Consolidated: \$3,773

Agency Funds for this Objective:

Data Source for Measurement

An agency-generated report; or a SPHERE System Activity Report, including data from the following screens: (1) System Activity-all required fields including documentation of collaborating partners, number of housing units assessed, year housing unit was built, and results of clearance testing; and (2) Intervention: Collaboration (no detail screen).

Baseline for Measurement

Sheboygan County Health and Human Services, Division of Public Health and the City of Sheboygan City Development Department have a long standing history of working together to make properties in Sheboygan lead safe. While working together within the previous HUD grant 120 homes have been made lead safe. A HUD grant application has been approved to continue the efforts and make an additional 90 homes lead safe in 2012- February 2014. In 2012 - 36 homes have been made lead safe due to this grant. An additional 26 homes have been made lead safe as of September 30,2013.

Context

Acceptable value for this objective is between \$40 and \$350 per housing unit. Prior to 1950, paint companies produced paint with a high content of lead. Children living in pre-1950 housing are at a high risk for lead poisoning due to deteriorated lead-based paint. The most important method to prevent lead poisoning is to correct lead hazards in older housing. This objective may involve partnering with local housing or weatherization agencies, contractors or builders to assure older housing meets lead-safe standards. For example, a local health department may be able to provide lead hazard investigation and/or property clearance services. A lead-safe standard requires that, at a minimum: 1) all paint will be intact; and 2) the property passes clearance standards (visual inspection of work completion and dust wipe testing) as specified in HFS 163.

An interpretation by Department of Health Services legal staff indicates that "(GPR) grant money could be used to purchase and install materials to make high-risk properties safe . . . if the grant specifies this" (communication from Eric Wendorff, 04/02/03). This objective allows for the purchase of windows, window well liners, doors, or other components that have a high or medium impact on reducing the lead hazards in a property. A local health department that is working with the local agency that distributes the Community Development Block Grant (CDBG), Small Cities or HOME funding can select this objective to reflect an outcome of the partnership, i.e., the number of lead-safe housing units that will result from the collaboration.

Context Continued

Input Activities

Objective: Risk Profile

Percent of Objective Accomplished

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

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Corresponding Potential Recoupment Amounts

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24203

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2014

Program: Childhood Lead Consolidated

Objective #: 2 of 2

Objective Value: \$3,773

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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 #: 24203

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2014

Program: Immunization

Objective #: 1 of 1

Objective Value: \$28,319

Objective: Primary Details

Objective Statement

LHD Template Objective

By December 31, 2014, 81% children residing in Sheboygan County Division of Public Health's 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 Sheboygan County Division of Public Health's 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: \$28,319

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

Baseline benchmark report:81%

Context

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

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24203
Program: Immunization

Agency: Sheboygan County Human Services, Division of Public Health
Objective #: 1 of 1

Contract Year: 2014
Objective Value: \$28,319

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%
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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 #: 24203

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 1 of 1

Objective Value: \$41,799

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 Sheboygan County Division of Public Health in collaboration with community partners focusing on child development.

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 Annual Conference.
3. Documentation of participation in the webinar series: Data-driven Approach to Early Childhood System-building (4 sessions, 90 minutes each).
4. Documentation of the number of life course trainings held, audience, and the number of participants.
5. A completed Partnership Report for the Focus Area that directly aligns with the objective.
6. An updated Community Logic Model.
7. 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: \$41,799

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.

Note: Using SPHERE to capture ASQ-3 data with in Sheboygan County Division of Public Health and discuss with other coalition members regarding how they are document results of their ASQ-3 testing.

Baseline for Measurement

Baseline for Measurement: Our MCH Coalition was established in 2012. Our Mission Statement is: The MCH Coalition will develop a systems approach to developmental screening for children 6 weeks through 60 months of age in Sheboygan County through collaborative partnerships.

Our Coalition has expanded from just Birth to Three, pediatric nurse, and PHNs, to including many other agencies in our county serving children. Head Start, local school districts, and child care providers have now joined. We have very good discussions on how we are assessing child development, and how to refer to each other, as well as how to educate and empower parents.

Our implementation year (2014) will continue the work we have started. For example, child care providers are interested in hearing about the Life Course Theory so we will educate them. We are in the process of obtaining our own Life Course games to utilize

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24203

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 1 of 1

Objective Value: \$41,799

throughout the county.

We want to continue to outreach to the pediatric offices to offer ASQ-3 trainings, as well as continue to update them with referral resources for children that don't pass developmental screenings.

We attend our local Family Support Advisory committee internally in the Sheboygan County Human Services Building. This is another way we network with local providers.

Context

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

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

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

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

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

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

Context Continued

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

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24203

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 1 of 1

Objective Value: \$41,799

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

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

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

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

REQUIRED SUPPORT ACTIVITIES:

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

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

Input Activities

- During the implementation year of 2014 Sheboygan County Division of Public Health will continue to work with the MCH Coalition on the following activities. Input from coalition members will drive the process.
- 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 #: 24203

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2014

Program: Maternal and Child Health Block Grant

Objective #: 1 of 1

Objective Value: \$41,799

- 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).

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 #: 24203

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2014

Program: Preventive Health and Health Services
Block Grant

Objective #: 1 of 1

Objective Value: \$4,096

Objective: Primary Details

Objective Statement

Template Objective 9 - National Public Health Standards

By August 31, 2014, Sheboygan County Division of Public Health will conduct one activity to prepare for voluntary accreditation by completing an agency accreditation readiness self-assessment.

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: \$4,096

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

Our health department had submitted its letter on intent to PHAB on January 21, 2013 and had planned to submit our PHAB application on May 1, 2013. In April of 2013, our health department received a suspect MDR TB case which eventually involved into 10 active TB cases and 40 latent TB cases. This large workload abruptly stopped our ability to submit our PHAB application as planned. All staff was involved in some manner with assisting with case management and contact investigation in our community. It is difficult to assess when our department will return to normal activities as the majority of the cases will involve DPH staff into 2014.

Context

Local public health agencies selecting this objective will conduct one of the following activities to prepare for voluntary accreditation by:

- working on the accreditation prerequisite of developing an agency strategic plan.
- developing a Performance Management Plan
- developing a Quality Improvement Plan
- conducting a Quality Improvement project
- developing processes, a database, and/or record-keeping systems to meet public health accreditation documentation standards.
- completing an agency accreditation readiness self-assessment.
- updating and revising agency policies and procedures

Context Continued

Contract Agreement Addendum: Exhibit II(B)

Contract #: 24203

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2014

Program: Preventive Health and Health Services

Objective #: 1 of 1

Objective Value: \$4,096

Block Grant

Input Activities

Site the evidence based strategies, best practices or promising practices you will be using or use the web links to identify strategies to use.

<http://www.instituteforwihealth.org/wiqi-resources.html>

<http://www.naccho.org/topics/infrastructure/accreditation/strategic-plan-how-to.cfm>

http://www.dhs.wisconsin.gov/r_counties/voluntaryaccreditation/index.htm

<http://www.healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid=35>

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

<http://www.phaboard.org/accreditation-process/accreditation-materials/>

<http://www.phaboard.org/wp-content/uploads/National-Public-Health-Department-Readiness-Checklists.pdf>

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 #: 24203

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2014

Program: Women Infants Children Supplemental Nutrition

Objective #: 1 of 1

Objective Value: \$412,251

Objective: Primary Details

Objective Statement

Template Objective 1

During the contract budget period of January 1, 2014 through December 30, 2014, the Sheboygan County 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 2235 participants.

Programs Providing Funds for this Objective

Women Infants Children Supplemental Nutrition: \$412,251

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 #: 24203

Agency: Sheboygan County Human Services, Division of Public Health

Contract Year: 2014

Program: Women Infants Children Supplemental
Nutrition

Objective #: 1 of 1

Objective Value: \$412,251

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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