

**DIVISION OF PUBLIC HEALTH  
DPH CONTRACT 30497  
AMENDMENT #1**

The Department of Health Services, on behalf of the Division of Public Health and the Ashland County Health & Human Services Department agree to amend their original agreement for the Personal Responsibility Education program (Profile 159354) as follows:

**REVISION:** SECTION 5. SERVICES

Additional projects to be completed as detailed in attached Exhibit(s).

**REVISION:** SECTION 34.A.2

Insert: "The due date of the final fiscal report for Profile 159354 shall be sixty (60) days after the Grant Agreement Period ending date. Expenses incurred during the Grant Agreement period on Profile 159354, 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."

Adjustment will be made to the Community Aids Reporting System (CARS) based on the information in the table below.

Agency #	Agency Type	Profile #	Current Contract Level	Contract Change Amount	New Contract Level	Funding Period
2	630	159354	\$0	\$100,000	\$100,000	1/1/2016-12/31/2016

All other terms and conditions of the original agreement remain unchanged.

\_\_\_\_\_  
GRANTEE's Authorized Representative  
Name:  
Title:

\_\_\_\_\_  
Date

\_\_\_\_\_  
GRANTOR's Authorized Representative  
Chuck J. Warzecha  
Administrator / Deputy Administrator, Division of Public Health  
Department of Health Services

\_\_\_\_\_  
Date

**Exhibit I**  
**Project Positive Youth Development**  
**Ashland and Bayfield Health Departments**  
**January 1, 2016 through December 31, 2016**  
**Work plan Agreement**

**Statement of Need**

The leading causes of death and disability in the Wisconsin's over half million adolescents are largely preventable. Adolescence is one of the most dynamic stages of human development. It is a time of rapid change and development and it is a critical time to intervene to promote behaviors that will improve health in the long term.

The Maternal Child Health (MCH) program is aligning to the national strategy to prioritize adolescent health, and is committed to targeting adolescent populations in the communities with greatest need. Following a detailed adolescent health needs assessment, several local health departments were identified as having the greatest need for adolescent health.

The MCH program would like to offer eligible local health departments the opportunity to establish and grow a local adolescent health program. Programs should be based on the Positive Youth Development approach. Positive Youth Development (PYD) is an intentional, pro-social approach that engages youth within their communities, schools, organizations, peer groups, and families in a manner that is productive and constructive; recognizes, utilizes, and enhances youths' strengths; and promotes positive outcomes for young people by providing opportunities, fostering positive relationships and furnishing the support needed to build on their leadership strengths.

See Appendix A for more details on the statewide vision.

Who shall DHS contact regarding Project PYD. Please update this information when new staff are hired.

<b>Name</b>	<b>Role</b>	<b>Title</b>	<b>Phone</b>	<b>E-mail</b>
Tbd	Program Lead	Grant Program Coordinator	715-682-7028	
Cyndi Zach	Contract Administrator	PH Administrator, Ashland Cnty HHS	715-682-7028, ext 214	<a href="mailto:czach@hsd.co.ashland.wi.us">czach@hsd.co.ashland.wi.us</a>
Peter Herlevi	Fiscal Contact	Fiscal Admin, Ashland Cnty HHS	715-682-7028, ext 132	pherlevi@hsd.co.ashland.wi.us

## Project PYD Program Deliverables

The requirements of this contract are to develop and implement an adolescent health program in Ashland and Bayfield County. The required adolescent health program activities include the following:

1. Support the Department of Health Services, Maternal Child Health Program in reaching the statewide adolescent health goals by 2020.
2. Implement at least one evidence-based program; serving 300 youth  
*Example Settings:* 8<sup>th</sup> grade class at George Washington Middle School, Boys and Girls club afterschool program, Detention Center youth group.

Setting	Evidence-based Program
Ashland School District, Ashland WI	Safer Choices; Lead & Seed
Washburn School District, Washburn WI	Safe Dates; Lead & Seed

3. Implement at least one parent education workshop; serving 30 parents  
*Example Settings:* Parent Teacher Organization Fall Meeting, Detention Center Parent Group, Parent Support group for Child Service, Community Church.

Setting	Program
Northern Great Lakes Visitor Center	Lead & Seed

4. Ensure all program facilitators are trained prior to program implementation. Local programs shall monitor local program facilitator performance and ensure programs are being implemented with fidelity in any and all program settings. All program facilitators agree to fidelity monitoring and observations by DHS, the Training and Technical Assistance Provider, and the program evaluator.
5. Send **at least** one adult and one teen (14-18 years old) to the annual quality improvement conference. Successful conference attendance includes engaging in workshops, quality improvement activities, and system-building initiatives as determined by the adolescent health program. Teen representative can be determined in spring/summer.

Name	Responsibility	Agency
Grant Program Coordinator	Adolescent Health Program Oversight	Ashland County HHS
TBD	Teen Representative	TBD

6. Ensure at least one staff from the program attends the Adolescent Health System Building Initiative (AHSBI) Quarterly Meetings.

Name	Responsibility	Agency	Contact Information
Grant Program Coordinator	Adolescent Health Program Oversight	Ashland County HHS	715-682-7028

**Meeting schedule TBD in spring.**

7. Ensure at least one staff from the program attends monthly program meetings.

Name	Responsibility	Agency	Contact Information
Grant Program Coordinator	Adolescent Health Program Oversight	Ashland County HHS	715-682-7028

**Monthly Meeting:**

Last Wednesday of every month; 1:00 PM

8. Ensure at least one staff from the program attends 75% of the Quarterly Community of Practice calls. Individuals implementing evidence-based programs must be present on at least 1 call each year.

Name	Responsibility	Agency	Contact Information
Grant Program Coordinator	Adolescent Health Program Oversight	Ashland County HHS	715-682-7028

**Community of Practice Call Schedule**

- Friday February 19<sup>th</sup> from 10a-12 noon- Measuring youth development, engagement, and program impact on adolescents
- Friday May 13<sup>th</sup> form 10a-12 noon- Using interactive learning to enhance engagement
- Friday July 15<sup>th</sup> from 10a-12 noon- TBD
- Friday October 14<sup>th</sup> 10a-12 noon- TBD

9. **All** program partners and program facilitators agree to collect program data including but not limited to youth surveys, tracking attendance and program completion, stakeholder engagement, referrals to health care services, youth leadership activities, and activities related to achieving the

adolescent health program goals. Additional measures may be defined by AHSBI in 2016.

10. Engage a local health care provider in your area to promote youth friendly health care and/or the adolescent champion model.
11. Offer one youth leadership program/opportunity for youth of greatest need in the community. The Youth Leadership program must align to the youth-adult partnership model and demonstrate authentic youth engagement.
12. Develop, implement and evaluate a required annual quality improvement plan. This plan template will be provided at the quality improvement conference. Activities shall demonstrate program and staff growth each successive year of the program. The plan should include youth and community voice and shall be available to all program stakeholders as identified by the health department.
13. Ensure all youth programs are implemented in safe spaces, respect participant diversity and values, and align to the positive youth development framework.
14. Ensure program activities and impacts are shared with the community at least once per year. Enact one strategy as identified by AHSBI in 2016.
15. Ensure program expenditures fall within DHS and Office of Management and Budget guidelines. This includes contacting Project PYD administrator with any changes to scope of work.
16. Submit quarterly and annual reports as requested.

Pilot Year FY 2016 universal work plan												
Project	Phase 1: Planning and Readiness		Phase 2: Training Program Staff in Evidence-based Programs (EBP) & Quality Improvement planning			Phase 3: Quality Improvement Kick off and Adolescent Champion Recruitment			Phase 4: Program Launch			Phase 5: Reflect and Plan for 2017
	Jan	Feb	March	April	May	June	July	August	Sept	Oct	Nov	Dec
<i>Project PYD</i>	Contract begins 1/1 Hire/Identify staff Purchase all EBP materials Attend monthly planning meetings		Attend EBP trainings Attend AHSBI meetings Check in meeting with DHS and TA provider Finalize stakeholder engagement Finalize youth leaders Identify a Parent Trainer Attend monthly planning meetings			Attend QI conference Attend Parent Engagement trainings Finalize implementation partners and sites for fall launch Pilot programs as able Complete QI plan Implement Youth Leadership activities Finalize program materials and tracking systems Promote adolescent Brain Development Campaign Attend monthly planning meetings			Pilot Programs Observe peer program if desired Implement Youth Surveys Provide feedback on QI tools, youth survey, and evaluation plans Attend AHSBI meeting Pilot Parent Education Work with Health Care partner to apply for Adolescent Champion model Implement Youth Leadership activities Promote adolescent Brain Development Campaign Attend monthly planning meetings			Gear up for fall 2017 Annual Reports due

### **Required Modification Narrative:**

The settings for the initial implementation of the Project Positive Youth Development will occur in one setting at each county, the Ashland School District in Ashland County and the Washburn School District in Bayfield County. Both of these school districts have been approached by the health departments in the planning of this project and have expressed desire to be a participant. The Ashland School District has representation on the Ashland County's Wellness for Life Coalition. This coalition's members consist of public health staff, that school district's guidance and curriculum staff, the Bad River Tribe's Youth Services Coordinator, Ashland County Extension Service, and community representatives. This coalition receives technical support from the Healthy WI Leadership Institute and has been involved in the planning of this project since it's beginning. Likewise, Bayfield County staff work with the Washburn School District's SADD and Prevention Through Youth's Eyes programs. Their Health Educator facilitates those programs, with that county's extension service in the school setting. These programs work side-by-side with students to implement healthy and safer choices.

Three milestones this project will establish to demonstrate youth engagement:

- Prepare youth to make healthy and safe choices. This will be achieved through the implementation of evidence-based curriculum in the school setting, available to all students in selected grades.
- Engage youth in processes with opportunities to address inequitable conditions. This will be achieved through youth participation on planned teen councils and parent groups, understanding the public health principle of a population-based approach.
- Engage youth in critical dialogue, assessment, and action about their community's health. This will be achieved through the implementation of a teen council to serve as advisory to both local health departments. Participation as an advisory council will provide an opportunity for those youth to understand the community health needs, and provide input to best engage the youth population.

The Ashland and Bayfield Health Departments Project Positive Youth Development will incorporate the CDC's Whole School, Whole Community, and Whole Child Model after establishment of this project, with school's approval. While this model accentuates the values of our project, it will be essential first to gain schools' confidence in this model.

Both health departments' medical advisors are affiliated with the Northlakes Clinic. Those medical advisors will meet with school boards and staff to stress the need and promote the benefit of implementation of this project. Likewise local health officers will enforce that need and benefit through implementation of goals and strategies of the shared Community Health Improvement Plan. The Program Coordinator will regularly meet with health department staff, school personnel, clinical providers, and other related agencies/partners/coalitions to promote this project.

These modification will not alter the submitted proposed budget.

Enclosed: Appendix A, 2016 Work plan, and Budget