

Year 2017 Template Objectives for MCH

Legend

A Objective Statement	D Input Activities	G For Your Information
B Deliverable	E Base Line for Measurement	
C Context	F Data Source for Measurement	

Objective 1: Breastfeeding

A. Objective Statement:

By December 31, 2017, the agency, in collaboration with community partners, will implement and evaluate strategy ____ (Insert strategy number(s) from Input Activities) to improve breastfeeding initiation and duration rates in their community.

B. Deliverable:

1. Data in Redcap to document basic information, activities and outputs, barriers and facilitators.
2. Documentation of agency participation in the 2017 MCH Summit.
3. Documentation of agency participation in the learning community calls/meetings.

C. Context:

The MCH/CYSHCN Program Parameters apply to this objective. This work will address the Title V National Performance Measurement for breastfeeding: Percent of infants who are ever breastfed and percent of infants breastfed exclusively through 6 months.

D. Input Activities:

1. Implement and evaluate the selected strategy with activity details identified in the 2017 Supplement to GAC Objectives.

Strategy 1: Support **workplaces** to become breastfeeding friendly.

Core Activities:

- Collaborate with the Wisconsin Breastfeeding Coalition and utilize available resources.
- Engage and recruit worksite(s).
- Assist worksites to complete an assessment.
- Assist worksites in making improvements to policies and practices, based on assessment results.

Strategy 2: Support **childcare sites** to become breastfeeding friendly.

Core Activities:

- Collaborate with the Wisconsin Breastfeeding Coalition and utilize available training materials and guidance to support breastfeeding friendly childcare sites.
 - Engage and recruit childcare site(s).
 - Provide onsite assessment and technical assistance to child care providers.
 - Assure recognition through child care resource and referral agency as well as media recognition of breastfeeding friendly status of child care agencies.
2. Collaborate with community partners.
 3. Participate in all quarterly Learning Community meetings/calls to support progress on the MCH National Performance Measure related to Breastfeeding.
 4. Attend the 2017 MCH Summit.
 5. Establish a link to the MCH Hotline website at <http://www.mch-hotlines.org/> and provide a voice message of the hotline numbers after hours: MCH Hotline 1-800-722-2295 & Wisconsin First Step 1-800-722-2295.

E. Baseline Data for Measurement:

Baseline information as identified in the 2017 Supplement to GAC Objectives.

F. Data Source for Measurement:

1. Redcap
2. MCH Summit attendee list.

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3. Learning community attendee list.

Objective 2: Safe Sleep

A. Objectives Statement:

By December 31, 2017, the agency, in collaboration with community partners, will implement and evaluate strategy ____ (insert strategy number(s) from Input Activities) to support safe infant sleep practices in their communities.

B. Deliverable:

1. Data in Redcap to document basic information, activities and outputs, barriers and facilitators.
2. Documentation of agency participation in the 2017 MCH Summit.
3. Documentation of agency participation in the learning community calls/meetings.

C. Context:

The MCH/CYSHCN Program Parameters apply to this objective. This work will address the Title V National Performance Measure for safe sleep: Percent of infants placed to sleep on their backs. The problem is that too many babies in Wisconsin are not put to sleep alone, on their back, and in a crib, putting them at risk of adverse health outcomes.

D. Input Activities

1. Implement and evaluate the selected strategy with activity details identified in the 2017 Supplement to GAC Objectives.

Strategy 1: Coordinate and/or provide trainings to implement safe sleep practices with **community groups** using common messaging.

Core Activities:

- Collaborate with Children's Health Alliance of Wisconsin and utilize available tools and resources to promote safe sleep.
- Engage and recruit community groups (e.g., parent or family organizations, home visiting agencies, churches, businesses).
- Conduct trainings and education for community groups to support implementation of safe sleep practices, using tools and resources with common messaging.
- Participate on the local CDR and/or FIMR team(s) and report in the Case Reporting System, to align with the team's prevention recommendations.*

Strategy 2: Coordinate and/or provide trainings to implement safe sleep practices with **childcare providers**, using common messaging.

Core Activities:

- Collaborate with Children's Health Alliance of Wisconsin and utilize available tools and resources to promote safe sleep.
- Engage and recruit childcare site(s).
- Conduct trainings for childcare providers, or collaborate with the Child Care Resource and Referral Agencies to support implementation of safe sleep practices, using tools and resources with common messaging.
- Participate on the local CDR and/or FIMR team(s) and report in the Case Reporting System, to align with the team's prevention recommendations.*

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Strategy 3: Promote the use of the safe sleep policies and procedures developed for **hospitals and health systems**.

Core Activities:

- Utilize the safe sleep webinars and resource kits developed by Children’s Health Alliance of Wisconsin to promote safe sleep.
- Engage and recruit hospitals and health systems.
- Conduct trainings for hospitals and health systems utilizing the safe sleep webinars and resource kit.
- Support the adoption of safe sleep policies and procedures by the pediatric and birthing hospitals and health systems in your jurisdiction utilizing the safe sleep webinars and resource kit.
- Participate on the local CDR and/or FIMR team(s) and report in the Case Reporting System, to align with the team’s prevention recommendations.*

*For those jurisdictions with no CDR or FIMR team, consult with your contract monitor.

2. Collaborate with community partners.
3. Participate in all quarterly Learning Community meetings/calls to support progress on the MCH National Performance Measure related to Safe Sleep.
4. Attend the 2017 MCH Summit.
5. Establish a link to the MCH Hotline website at <http://www.mch-hotlines.org/> and provide a voice message of the hotline numbers after hours: MCH Hotline 1-800-722-2295 & Wisconsin First Step 1-800-722-2295.

E. Baseline for Measurement:

Baseline information as identified in the 2017 Supplement to GAC Objectives

F. Data Source for Measurement:

1. Redcap
2. MCH Summit attendee list.
3. Learning community attendee list.

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Objective 3: Developmental Screening

- A. **Objectives Statement:** By December 31, 2017, the agency, in collaboration with community partners, will implement and evaluate strategy ____ (insert strategy number(s) from Input Activities) to improve rates of **developmental screening** in their community.
- B. **Deliverable:**
1. Data in Redcap to document basic information, activities and outputs, barriers and facilitators.
 2. Documentation of agency participation in the 2017 MCH Summit.
 3. Documentation of agency participation in the learning community calls/meetings.
- C. **Context:** The MCH/CYSHCN Program Parameters apply to this objective. This work will address the Title V National Performance Measure for developmental screening: Percent of children, ages 10 through 71 months, receiving a developmental screening using a parent-completed screening tool.
- D. **Input Activities:**
1. Implement and evaluate the selected strategy with activity details identified in the 2017 Supplement to GAC Objectives.
Strategy 1: Coordinate and/or provide developmental screening trainings to medical providers.
Core Activities:
 - Collaborate with the Wisconsin Statewide Medical Home Initiative and utilize available tools and resources to promote developmental screening.
 - Engage and recruit medical providers/clinics/health systems.
 - Promote consistent use of a standardized tool for developmental screening through training and education.
 - Promote resources and a system of coordinated referrals and follow-up services.Strategy 2: Coordinate and/or provide developmental screening trainings to childcare providers.
Core Activities:
 - Collaborate with the Wisconsin Statewide Medical Home Initiative and utilize available tools and resources to promote developmental screening.
 - Engage and recruit childcare providers.
 - Promote consistent use of a standardized tool for developmental screening through training and education.
 - Promote resources and a system of coordinated referrals and follow-up services.
 - Implement resources to address barriers to developmental screening in child care centers
 2. Collaborate with community partners.
 3. Participate in all quarterly Learning Community meetings/calls to support progress on the MCH National Performance Measure related to Developmental Screening.
 4. Attend the 2017 MCH Summit.
 5. Establish a link to the MCH Hotline website at <http://www.mch-hotlines.org/> and provide a voice message of the hotline numbers after hours: MCH Hotline 1-800-722-2295 & Wisconsin First Step 1-800-722-2295.
- E. **Baseline for Measurement:** Baseline information as identified in the 2017 Supplement to GAC Objectives
- F. **Data Source for Measurement:**
1. Redcap
 2. MCH Summit attendee list.

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3. Learning community attendee list.

Objective 4: Smoking

- A. **Objectives Statement:** By December 31, 2017, the agency, in collaboration with community partners, will implement and evaluate a strategy to decrease rates of children exposed to smoking in the household.
- B. **Deliverable:**
1. Data in Redcap to document basic information, activities and outputs, barriers and facilitators.
 2. Documentation of agency participation in the 2017 MCH Summit.
 3. Documentation of agency participation in the learning community calls/meetings.
- C. **Context:** The MCH/CYSHCN Program Parameters apply to this objective. This work will address the Title V National Performance Measure for smoking: a) Percent of women who smoke during pregnancy and b) Percent of children who live in households where someone smokes. This MCH-funded objective focuses on household smoking.
- D. **Input Activities:**
1. Implement and evaluate the strategy with activity details identified in the 2017 supplement to GAC Objective.

Strategy: Implement and evaluate CEASE to increase access to smoking cessation services for postpartum women and family members who smoke.

Core Activities:

- Collaborate with the Wisconsin Women's Health Foundation to educate community partners who regularly see postpartum women and families (e.g. WIC, home visiting, Birth to 3, Head Start, childcare, lactation support, and family support programs) to provide or refer to smoking cessation services for the entire family.
 - Engage and recruit medical providers/health systems and/or community providers who see postpartum women and families to implement CEASE.
 - Collaborate with the Wisconsin Women's Health Foundation to support CEASE sites to ASK (screen for second hand smoke exposure), ASSIST (support access to Nicotine Replacement Therapy) and CONNECT (refer to First Breath, WI Quit Line, local resources).
 - Promote available resources and a system of coordinated referrals and follow-up services.
2. Collaborate with community partners.
 3. Participate in all quarterly Learning Community meetings/calls to support progress on the MCH National Performance Measure related to Smoking.
 4. Attend the 2017 MCH Summit.
 5. Establish a link to the MCH Hotline website at <http://www.mch-hotlines.org/> and provide a voice message of the hotline numbers after hours: MCH Hotline 1-800-722-2295 & Wisconsin First Step 1-800-722-2295.
- E. **Baseline for Measurement:** Baseline information as identified in the 2017 Supplement to GAC Objectives
- F. **Data Source for Measurement:**
1. Redcap
 2. MCH Summit attendee list.
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Objective 5: Adolescent Suicides

- A. Objectives Statement:** By December 31, 2017, the agency, in collaboration with community partners, will implement and evaluate strategy ____ (insert strategy number(s) from Input Activities) to decrease rates of adolescent suicides.
- B. Deliverable:**
1. Data in Redcap to document basic information, activities and outputs, barriers and facilitators.
 2. Documentation of agency participation in the 2017 MCH Summit.
 3. Documentation of agency participation in the learning community calls/meetings.
- C. Context:** The MCH/CYSHCN Program Parameters apply to this objective. This work will address the Title V National Performance Measure for adolescent injury prevention: Rate of hospitalization for non-fatal injury per 100,000 adolescents 10 through 19.
- D. Input Activities:**
1. Implement and evaluate the selected strategy with activity details identified in the 2017 Supplement to GAC Objectives.

Strategy 1: Coordinate and/or facilitate evidence-based suicide prevention practices with **community groups**.

Core Activities:

- Collaborate with Mental Health America of Wisconsin and local suicide coalitions to promote QPR (Question, Persuade and Refer) and Mental Health First Aid training.
- Collaborate with law enforcement and other partners on strategies to restrict means such as distribution of firearm locks and access to medication drop boxes.
- Participate on the local CDR team(s) and report in the Case Reporting System, to align with the team's prevention recommendations.*

Strategy 2: Promote Zero Suicide principles and practices with **health care providers and health care systems**.

Core Activities:

- Collaborate with Mental Health America of Wisconsin and local suicide coalitions to implement the Zero Suicide toolkit. (<http://zerosuicide.sprc.org/toolkit>) with health care providers and health care system.
- Coordinate and/or provide training to Emergency Departments utilizing available resources (e.g. ED focused tools from Zero Suicide, CALM (Counseling on Access to Lethal Means) training) and include planning for continuity of care after an ED visit.
- Participate on the local CDR team(s) and report in the Case Reporting System, to align with the team's prevention recommendations.*

Strategy 3: Work with **local school districts** to understand and/or reduce youth suicides and suicidal thoughts/behaviors.

- Engage and recruit local high schools to implement the YRBS 2017, if your school district doesn't conduct it.
- Engage and recruit local high schools to use existing YRBS data to inform the implementation of an evidence-based suicide-prevention program in the local school district (e.g., Signs of Suicide, Mental Health First Aid, anti-bullying program)
- Participate on the local CDR team(s) and report in the Case Reporting System, to align with the team's prevention recommendations.*

*For those jurisdictions with no CDR or FIMR team, consult with your contract monitor.

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2. Collaborate with community partners.
3. Participate in all quarterly Learning Community meetings/calls to support progress on the MCH National Performance Measure related to adolescent suicide prevention.
4. Attend the 2017 MCH Summit.
5. Establish a link to the MCH Hotline website at <http://www.mch-hotlines.org/> and provide a voice message of the hotline numbers after hours: MCH Hotline 1-800-722-2295 & Wisconsin First Step 1-800-722-2295.

E. Baseline for Measurement: Baseline information as identified in the 2017 Supplement to GAC Objectives

F. Data Source for Measurement:

1. Redcap
2. MCH Summit attendee list.
3. Learning community attendee list.

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Objective 6: Adolescent Transport-related Injury

A. Objectives Statement: By December 31, 2017, the agency, in collaboration with community partners, will implement and evaluate a strategy to decrease rates of adolescent transport-related injury.

B. Deliverable:

1. Data in Redcap to document training session information.
2. Documentation of agency participation in the 2017 MCH Summit.
3. Documentation of agency participation in the learning community calls/meetings.

C. Context: The MCH/CYSHCN Program Parameters apply to this objective. This work will address the Title V National Performance Measure for adolescent injury prevention: Rate of hospitalization for non-fatal injury per 100,000 adolescents 10 through 19.

D. Input Activities:

1. Implement and evaluate the strategy with activity details identified in the 2017 Supplement to GAC Objectives.

Strategy: Implement and evaluate the TEEN DRIVING PLAN to increase the quantity and diversity of parent/guardian supervised learner practice in different driving environments.

Core Activities:

- Collaborate with Children’s Hospital of Wisconsin Crossroads to implement the TEEN DRIVING PLAN (TDP) model developed by Children’s Hospital of Philadelphia.
(<http://www.crossroadsteendriving.org/witdp/index.aspx>)
 - Complete a TDP facilitator training provided by Children’s Hospital of Wisconsin.
 - Engage and recruit additional professionals from the community to serve as facilitators and deliver TDP parent sessions.
 - Engage and recruit groups and organizations to support programming and messaging (e.g. schools, primary care settings, driver licensing settings, community events, driver’s education)
 - Plan and deliver education sessions with parent groups.
 - Collect data to include group size, demographics and changes in knowledge.
 - Participate on local CDR team and report in the Case Reporting System, to align with the team’s prevention recommendations. (For those jurisdictions with no CDR, consult with your contract monitor.)
2. Collaborate with community partners.
 3. Participate in all quarterly Learning Community meetings/calls to support progress on the MCH National Performance Measure related to adolescent transportation-related injury prevention.
 4. Attend the 2017 MCH Summit.
 5. Establish a link to the MCH Hotline website at <http://www.mch-hotlines.org/> and provide a voice message of the hotline numbers after hours: MCH Hotline 1-800-722-2295 & Wisconsin First Step 1-800-722-2295.

E. Baseline for Measurement: Baseline information as identified in the 2017 Supplement to GAC Objectives

F. Data Source for Measurement:

1. Redcap
2. MCH Summit attendee list.
3. Learning community attendee list.

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Objective 7: Youth, Family, and Consumer Engagement and Leadership

A. Objectives Statement: By December 31, 2017, the agency will implement and evaluate a strategy to increase youth, family and consumer engagement and leadership in MCH-funded activities.

B. Deliverable:

1. Data in Redcap to document Plan-Do-Study-Act cycle(s).
2. Documentation of agency participation in the 2017 MCH Summit.
3. Documentation of agency participation in the learning community calls/meetings.

C. Context: The MCH/CYSHCN Program Parameters apply to this objective. **Agencies selecting this objective must also select an additional MCH objective(s).** The objective is to increase youth, family and consumer engagement and leadership to support MCH activities related to breastfeeding, safe sleep, developmental screening, smoking, adolescent suicide and/or adolescent transportation-related injury.

The MCH Program strives for youth, family and consumer engagement and leadership at 4 levels:

- Youth/Family/Consumer level: Individuals and families are supported in their role of an expert on and advocate for themselves and their children. Youth, families and consumers participate in the development of goals and service plans, as well as program decisions that affect them and their child/family.
- Peer Support level: Youth, families and consumers have opportunities to connect with and support others in their community and more broadly.
- Agency decision-making level: Partnerships between Youth/Families/Consumers and providers/policy makers in the areas of policy, program development, evaluation, professional education, and the delivery of supports and services increases the likelihood that systems of support and services are helpful, effective, and responsive.
- Systems Change level: Youth, family and consumer perspectives contribute to the quality of systems of supports and services and are essential for effective policies and practices at all levels of care and system planning, including access, integration, accountability and equity.

D. Input Activities:

1. Implement and evaluate the strategy with activity details identified in the 2017 Supplement to GAC Objectives.

Strategy: Utilize a quality improvement process to increase youth, family and consumer engagement and leadership opportunities in MCH objectives and activities.

- Complete an assessment of youth/family/consumer engagement and leadership opportunities.
- Select a level of family engagement for the focus of the work: family, peer support, agency decision making, systems change.
- Participate in educational opportunities or initiatives to learn how to include and support youth/families/consumers as active voices in the planning, implementation and evaluation of MCH objectives and activities (e.g., Leading Together initiative facilitated by Family Voices of Wisconsin)
- Based on assessment findings, complete 1 or more Plan-Do-Study-Act cycle(s) to increase youth, family and consumer engagement and leadership in MCH-funded activities.

2. Collaborate with community partners.

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3. Participate in all quarterly Learning Community calls/educational meetings to support progress on youth/family/consumer engagement and leadership.
 4. Attend the 2017 MCH Summit.
 5. Establish a link to the MCH Hotline website at <http://www.mch-hotlines.org/> and provide a voice message of the hotline numbers after hours: MCH Hotline 1-800-722-2295 & Wisconsin First Step 1-800-722-2295.

E. Baseline for Measurement: Baseline information as identified in the 2017 Supplement to GAC Objectives

F. Data Source for Measurement:

1. Redcap
2. MCH Summit attendee list.
3. Learning community attendee list.