

Year 2019 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, 2019, 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 2019 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 infant's breastfed exclusively through 6 months.

D. Input Activities:

1. Implement and evaluate the selected strategy with activity details identified in the 2019 Supplement to GAC Objectives.

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

Core Activities:

- Collaborate with the Wisconsin Breastfeeding Coalition and utilize available resources.
- Outreach 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.
- Outreach 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.

Strategy 3: Support **community groups** to become breastfeeding friendly promote consistent messaging throughout the community.

Core Activities:

- Collaborate with the Wisconsin Breastfeeding Coalition and utilize available resources.
 - Outreach and recruit community group(s) (e.g., parent or family organizations, home visiting agencies, churches).
 - Assist community group to complete a pre-test and post-test.
 - Assist community group in making improvements to policies and practices, based on assessment results.
2. Collaborate with community partners to promote consistent messaging throughout the community.
 3. Participate in all quarterly Learning Community meetings/calls to support progress on the MCH National Performance Measure related to Breastfeeding.
 4. Attend the 2019 MCH Summit.
 5. Promote and establish links to the Well Badger MCH/First Step Resource Line: 1-800-642-7827

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and website <https://wellbadger.org/>

E. Baseline Data for Measurement:

Baseline information as identified in the 2019 Supplement to GAC Objectives.

F. Data Source for Measurement:

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

Objective 2: Safe Sleep

A. Objectives Statement:

By December 31, 2019, 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 2019 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, in a crib, and in a smoke free environment, putting them at risk of adverse health outcomes.

D. Input Activities

1. Implement and evaluate the selected strategy with activity details identified in the 2019 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. <https://www.chawisconsin.org/sbs/>
- Outreach 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 ensure reporting in the National 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:

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- Collaborate with Children’s Health Alliance of Wisconsin and utilize available tools and resources to promote safe sleep.
- Outreach 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 ensure reporting in the National Case Reporting System, to align with the team’s prevention recommendations.*

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.
- Outreach and recruit hospitals and health systems.
- Conduct trainings for hospitals and health systems utilizing the safe sleep webinars and resource kit. <http://www.chawisconsin.org/documents/IP6HospitalPacket.pdf>
- 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 ensure reporting in the National 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 2019 MCH Summit.
5. Promote and establish links to the Well Badger MCH/First Step Resource Line: 1-800-642-7827 and website <https://wellbadger.org/>

E. Baseline for Measurement:

Baseline information as identified in the 2019 Supplement to GAC Objectives

F. Data Source for Measurement:

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

Objective 3: Developmental Screening

- A. **Objectives Statement:** By December 31, 2019, 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.

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B. Deliverable:

1. Data in Redcap to document basic information, activities and outputs, barriers and facilitators.
2. Documentation of agency participation in the 2019 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 2019 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.
- Outreach 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.
- Outreach 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

Strategy 3: Coordinate to promote awareness and education of importance of developmental monitoring and screening with **community groups**.

Core Activities:

- Collaborate with Wisconsin Statewide Medical Home Initiative to utilize available tools and resources (i.e., CDC Learn the Signs Act Early Materials) to promote developmental monitoring and screening.
 - Outreach and recruit community groups (e.g., parent or family organizations, home visiting agencies, churches, businesses).
 - Provide trainings/education for community groups to support implementation of developmental monitoring and screening practices, using tools and resources with common messaging.
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.

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4. Attend the 2019 MCH Summit.
5. Promote and establish links to the Well Badger MCH/First Step Resource Line: 1-800-642-7827 and website <https://wellbadger.org/>

E. **Baseline for Measurement:** Baseline information as identified in the 2019 Supplement to GAC Objectives

F. **Data Source for Measurement:**

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

Objective 4: Adolescent Suicides

A. **Objectives Statement:** By December 31, 2019, 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 2019 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 2019 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 gatekeeper trainings such as QPR (Question, Persuade and Refer), (Youth) Mental Health First Aid, or adverse childhood experiences and trauma-informed care education/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 and ensure reporting in the National 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(ED) 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.

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- Participate on the local CDR team and ensure reporting in the National Case Reporting System, to align with the team's prevention recommendations.*

Strategy 3: Work with **local school districts** to better understand adolescent suicide risk and support implementation of evidence-based prevention programs/policy in effort to reduce youth suicide attempts and suicidal thoughts/behaviors.

- Engage and recruit local high schools to implement the YRBS 2019, if your school district doesn't conduct it.
 - Outreach and recruit local high schools to Use YRBS data to inform the implementation of at least one evidence-based suicide-prevention program or training in the local school district targeted towards youth most at risk. Suicide prevention programs include but are not limited to the following:
 - Trevor Lifeguard Workshop: free 1-hour interactive workshop for LGBTQ youth and general youth audiences in middle schools and high schools (<http://www.sprc.org/resources-programs/trevor-lifeguard-workshop>)
 - ACT on FACTS: free two-hour online interactive training program for educators which highlights four categories of youth who may be at elevated risk for suicide: youth involved in bullying, LGBTQ youth, gifted youth, and students being reintegrated back into school after a suicide attempt (<http://www.sprc.org/resources-programs/making-educators-partners-youth-suicide-prevention-act-facts>)
 - Signs of Suicide: Providing tools to help youth identify the signs and symptoms of depression, suicide, and self-injury in themselves and their peers (<http://www.sprc.org/resources-programs/sos-signs-suicide>)
 - Participate on the local CDR team and ensure reporting in the National Case Reporting System, to align with the team's prevention recommendations.*
- *For those jurisdictions with no CDR 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 adolescent suicide prevention.
4. Attend the 2019 MCH Summit.
5. Promote and establish links to the Well Badger MCH/First Step Resource Line: 1-800-642-7827 and website <https://wellbadger.org/>

E. Baseline for Measurement: Baseline information as identified in the 2019 Supplement to GAC Objectives

F. Data Source for Measurement:

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

Objective 5: Adolescent Transport-related Injury

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A. Objective Statement: By December 31, 2019, the agency, in collaboration with community partners and other stakeholders will strengthen implementation of the Graduated Drivers Licensing law (GDL) to reduce morbidity and mortality rates associated with adolescent driver-related motor vehicle crashes.

B. Deliverable:

1. Data in Redcap to document basic information, activities and outputs, barriers and facilitators.
2. Documentation of agency participation in the 2019 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 2019 Supplement to GAC Objectives.

Strategy: Leverage state resources (such as the county-level Traffic Safety Commission and Child Death Review team) and local partnerships (law enforcement, schools, driver education, and community groups) to strengthen implementation of Graduated Driver Licensing law through increased awareness, compliance, and/or enforcement.

Core Activities:

- Conduct (or update) an assessment of current GDL implementation in the county/region.
 - Outreach and recruit key partners to identify and implement activities to strengthen GDL implementation based on assessment of current GDL implementation.
 - Collaborate with Children’s Hospital of Wisconsin Crossroads and utilize their tools and resources within your community to support increase awareness and knowledge of GDL.
 - Participate on local CDR team and ensure reporting in the National 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 2019 MCH Summit.
 5. Promote and establish links to the Well Badger MCH/First Step Resource Line: 1-800-642-7827 and website <https://wellbadger.org/>

E. Baseline for Measurement: Baseline information as identified in the 2019 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: Health Equity

A. Objectives Statement: By December 31, 2019, the agency will implement at least two practice changes to advance health equity in MCH-funded activities.

B. Deliverable:

1. Data in Redcap to document practice changes and impact.
2. Documentation of agency participation in the 2019 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 health equity 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 health equity in its funded strategies. The Foundational Practices for Health Equity: A Learning and Action Tool was developed to assist public health organizations to:

- Introduce a set of foundational practices to advance health equity within an organization and with partners.
- Identify and document the organization's current capabilities and practices against seven practices that provide a solid foundation for public health to advance health equity.
- Track improvements and changes in capabilities and practices.

D. Input Activities:

1. Complete the [Foundational Practices](#) for Health Equity self-assessment of organizational capacity or other self-assessment (e. g. [BARHII](#), [CLAS](#) , etc.). If a self-assessment was completed in the previous year, it is not necessary to repeat the assessment.
2. Work with impacted stakeholders, including consumers.
3. Based on assessment findings, identify possible health equity related interventions/changes to test.
4. Utilize available training and tools.
5. Integrate at least 2 practice changes into other MCH-funded activities to advance health equity.
6. Identify the impact or potential impact of the practice change.
7. Participate in all quarterly Learning Community sessions to support progress on health equity.
8. Attend the 2019 MCH Summit.
9. Promote and establish links to the Well Badger MCH/First Step Resource Line: 1-800-642-7827 and website <https://wellbadger.org/>

2. **Baseline for Measurement:** Baseline information as identified in the 2019 Supplement to GAC Objectives

3. **Data Source for Measurement:**

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