Legend

A Objective Statment D Input Activities G For your Information

B Deliverable
 C Context
 E Base Line for Measurement
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1.

A. Objective 1- Breastfeeding

By December 31, 2020, 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. 1.Data in Redcap to document basic information, activities and outputs, barriers and facilitators.
 - 2.Documentation of agency participation in the learning community calls/meetings.
- C. 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.

C.

D. 1. Implement and evaluate the selected strategy with activity details identified in the 2020 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 an assessment.
- Assist community group in making improvements to policies and practices, based on the
- 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. Maintain a link to the Well Badger Resource Center website and searchable directory at: www.wellbadger.org. Display and provide marketing information and referral resources and services for Well Badger. Provide a voice message for the Well Badger MCH/First Step Resource Line:

Call: 1-800-642-7837 Text: 608-360-9328

Email: help@wellbadger.org

- E. Baseline information as identified in the 2020 Supplement to GAC Objectives.
- F. 1. Redcap
 - 2. Learning community attendee list

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G.

2.

A. Objective 2- Safe Sleep

By December 31, 2020, 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. 1. Data in Redcap to document basic information, activities and outputs, barriers and facilitators.
 - 2. Documentation of agency participation in the learning community calls/meetings.
- C. 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.

C.

Legend

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 D. 1. Implement and evaluate the selected strategy with activity details identified in the 2020 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:

- 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. Maintain a link to the Well Badger Resource Center website and searchable directory at: www.wellbadger.org. Display and provide marketing information and referral resources and services for Well Badger. Provide a voice message for the Well Badger MCH/First Step Resource Line:

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G.

3.

Legend

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A. Objective 3- Developmental Screening

By December 31, 2020, 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. 1. Data in Redcap to document basic information, activities and outputs, barriers and facilitators.
 - 2. Documentation of agency participation in the learning community calls/meetings.
- C. 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.

C.

Implement and evaluate the selected strategy with activity details identified in the 2020 Supplement to GAC Objectives.

Strategy 1: 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

Provide trainings/education for community groups to support implementation of developmental Strategy 2: 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 3: 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.
- 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. Maintain a link to the Well Badger Resource Center website and searchable directory at: www.wellbadger.org. Display and provide marketing information and referral resources and services for Well Badger. Provide a voice message for the Well Badger MCH/First Step Resource Line:

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A Objective Statment D Input Activities G For your Information
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C Context E Base Line for Measurement

E Base Line for Measurement

F Data Source for Measurement

4.

- A. Objective 4- Adolescent Suicides and Self-Harm Prevention
 By December 31, 2020, 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. 1. Data in Redcap to document basic information, activities and outputs, barriers and facilitators.
 - 2. Documentation of agency participation in the learning community calls/meetings.
- C. 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.

C.

Legend

A Objective Statment D Input Activities G For your Information

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 F Data Source for Measurement

 D. 1. Implement and evaluate the selected strategy with activity details identified in the 2020 Supplement to GAC Objectives.

Strategy 1: Coordinate and facilitate community suicide awareness campaign activities and or events. Note: If choosing Strategy 1 you must choose one additional strategy below)

Core Activities:

- Collaborate with local groups and/or coalitions to design and facilitate community-based suicide awareness activities. Strategy 2: Coordinate and/or facilitate evidence-based and promising practice suicide prevention interventions with coalitions, organizations, clubs, and businesses and or other community groups.

Core Activities: (See 2020 GAC Supplement for the 3 specific 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 is prevention recommendations.*

Strategy 3: 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.
- Participate on the local CDR team and ensure reporting in the National Case Reporting System, to align with the team; s prevention recommendations.*

Strategy 4: 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. Core Activities:

- Engage and recruit local high schools to implement the YRBS 2020, if your school district doesn't conduct it.
- Outreach and recruit local 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: (http://www.sprc.org/resources-programs/trevor-lifeguard-workshop)
- ACT on FACTS: (http://www.sprc.org/resources-programs/making-educators-partners-youth-scuicide-prevention-act-facts) and Signs of Suicide: (http://www.sprc.org/resources-programs/sos-signs-suicide)
- Hope Squad: https://hopesquad.com/
- Sources of Strength: https://www.sprc.org/resources-programs/sources-strength OR https://sourcesofstrength.org/
- Participate on the local CDR team and ensure reporting in the National Case Reporting System, to align with the team is 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. Maintain a link to the Well Badger Resource Center website and searchable directory at: www.wellbadger.org. Display and provide marketing information and referral resources and services for Well Badger. Provide a voice message for the Well Badger MCH/First Step Resource Line:

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5.

Objective 5- Health Equity

By December 31, 2020, the agency will implement at least one practice change to advance health equity and at least one practice change to enhance family, youth and community engagement in MCH-funded activities.

- B. 1. Data in Redcap to document practice changes and impact
 - 2. Documentation of agency participation in the learning community calls/meetings.
- C. The MCH/CYSHCN Program Parameters apply to this objective. Agencies selecting the Health Equity objective must also select at least one additional MCH objective. Agencies will be asked to consider their other MCH-funded objectives and determine the following to develop an action plan:
 - Who is affected by this MCH-funded activity?
 - Are there populations that are disproportionately affected in a negative way?
 - Who are they?
 - In what ways are the identified populations negatively affected?
 - What conditions, systems, and structures support these different outcomes?
 - Which Foundational Practices can help you address those conditions, systems and structures?

C.

- D. 1. Complete the BARHII or Foundational Practices for Health Equity self-assessment of organizational capacity or other health equity assessment tool. If a self-assessment was completed in a previous year, it is not necessary to repeat the assessment.
 - 2. Complete the Community Engagement Assessment Tool.
 - 3. Based on assessment findings, develop an action plan to improve one component related to health equity and one indicator for community engagement.
 - 4. Implement the action plan to support at least one practice change to advance health equity in other MCH-funded activities.
 - 5. Implement the action plan to support at least one practice change to enhance family, youth and/or community engagement in other MCH-funded activities.
 - 6. Work with impacted stakeholders, including consumers.
 - 7. Identify the impact or potential impact of the practice changes.
 - 8. Utilize available training and tools.
 - 9. Participate in all quarterly Learning Community sessions to support progress on health equity to include 3 virtual meetings and 1 in-person session.
 - 10. Participate in up to 3 educational webinars to support family, youth and community engagement.
 - 11. Maintain a link to the Well Badger Resource Center website and searchable directory at: www.wellbadger.org. Display and provide marketing information and referral resources and services for Well Badger. Provide a voice message for the Well Badger MCH/First Step Resource Line:

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G.

6.

A. Objective 6- Perinatal Disease

By December 31, 2020, the agency will implement at least 2 practice changes to improve perinatal depression screening and follow-up services.

- B. 1. Data in REDCap to document practice changes and impact
 - 2. Documentation of agency participation in the learning community calls/meetings

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C. This work will address The Title V MCH State Performance Measure for perinatal depression: 1) Percent of women who are asked whether they are feeling down or depressed by a doctor, nurse, or other health care provider during any of their prenatal care visits; 2) Percent of women who are asked whether they are feeling down or depressed by a doctor, nurse, or other health care provider during the postpartum visit.

C.

- D. 1. Identify the scope for the perinatal depression objective to:
 - a. Improve services within a program area that currently provides perinatal depression screening (i.e. PNCC, home visiting).
 - b. Implement new services within a program area that engages pregnant and postpartum women but does not currently provide screening (i.e. WIC, well child services).
 - 2. Utilize a QI process to test and implement changes in at least 2 of the 4 areas identified below. Examples of practice changes are listed below:
 - a. Screening
 - Policy and procedures for screening that identify validate, standardized tools and periodicity schedule
 - Guidance for initiating the screening process that focuses on building relationships and ongoing conversations
 - Guidance for sharing screening results with families
 - Reminder system for rescreens
 - b. Referral and Follow-up
 - Policy and procedures for referral and linkage to services for women who screen positive
 - Policy and procedures to assess and respond to suicide risk
 - Tracking system for referrals
 - c. Support
 - Materials and discussion points related to identifying personal supports, scheduling breaks, getting sleep, and other support strategies.
 - d. Workforce:
 - Education of public health providers utilizing the Perinatal Mental Health Training Modules
 - Enrollment of public health and health care providers in The Periscope Project to receive consultation with a perinatal psychiatrist, information on community resources, and education (https://the-periscope-project.org)
 - 3. Participate in quarterly Learning Community calls/meetings to support progress on the MCH State Performance Measure on Perinatal Depression Screening.
 - 4. Maintain a link to the Well Badger Resource Center website and searchable directory at: www.wellbadger.org. Display and provide marketing information and referral resources and services for Well Badger. Provide a voice message for the Well Badger MCH/First Step Resource Line:

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G.

7.

A. Objective 7- Family Planning Services

By December 31, 2020, (#) of unduplicated people of reproductive age will receive family planning services under current WHFP guidelines.

- B. 1. Data entered into REDCap to document required clinical and demographic information
 - 2. Documentation of agency staff participating in required WHFP program trainings and the annual meeting
 - 3. Documentation of agency staff participating in required Title X initiatives, trainings and meetings
 - 4. Documentation of agency staff providing required Title X services through patient record reviews

Legend

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C. The context for this WHFP objective is to assure family planning services are provided according to the WHFP Program Guidelines and meet all required Title X Rules and Regulations. The program is purpose is to promote healthy birth spacing and healthy birth outcomes while reducing the number of unintended pregnancies.

C.

D. Services that are directly related to preventing unintended pregnancies as well as achieving planned pregnancies that result in healthy birth outcomes. These services include contraceptive services, pregnancy testing and counseling, STD services and other preconception health services for people of reproductive age.

Strategy 1: Comprehensive Services

Core Activities:

- WHFP projects will provide the required Title X family planning services as outlined in the WHFP Program Guidelines and can be found in the document Providing Quality Family Planning Services
- Provide confidential contraceptive visits with contraceptive supplies
- Provide STD testing, treatment, and retesting services
- Encourage family involvement in the provision of family planning services to a minor
- Mandatory reporting including but not limited to human trafficking, child molestation, rape, incest, and intimate partner violence as defined by WI statutes
- Provide pregnancy testing and counseling
- Provide basic infertility services
- Provide an annual visit for patients of reproductive age
- Assure appropriate cytology screening
- Utilize a trauma informed care approach to provide services
- Establish and implement policy and procedures for charging, billing and collecting funds, including billing Third Party Payers

Strategy 2: Dual Protection Services

Core Activities:

- Provide STD testing, treatment, and retesting services
- Provide pregnancy testing and counseling
- Provide dual protection education and supplies
- Provide primary initial contraceptive method
- Screen for health insurance eligibility and Family Planning Only Services (FPOS) Enrollment
- Utilize a trauma informed care approach to providing services
- Establish a billing method, policy and procedures under PR 71 certification
- Establish a partnership agreement with full service family planning provider for continuous contraceptive supplies and reproductive medical home
- E. The number of unduplicated people of reproductive age who received family planning and dual protection services in 2019
- F. 1. REDCap required demographic and visit level data
 - 2. Required Title X trainings and meetings attendance records

G.