



KAREN L. SMITH, MD, MPH  
Director and State Health Officer

State of California—Health and Human Services Agency  
California Department of Public Health



EDMUND G. BROWN JR.  
Governor

November 2, 2017

Cindy Wilson  
MCAH Director  
Nevada County Public Health Department  
500 Crown Point Circle, Suite 110  
Grass Valley, California 95945

Dear Ms. Wilson:

APPROVAL OF AGREEMENT FUNDING APPLICATION (AFA) FOR  
AGREEMENT #201729 – FISCAL YEAR 2017-18

The California Department of Public Health, Maternal, Child and Adolescent Health (CDPH/MCAH) Division approves your Agency's AFA, including the enclosed Scope(s) of Work (SOW) and Budget(s) for administration of MCAH related programs.

To carry out the program(s) outlined in the enclosed SOW(s) and Budget(s), during the period of July 1, 2017 through June 30, 2018, the CDPH/MCAH Division will reimburse expenditures up to the following amounts:

Maternal Child and Adolescent Health.....\$177,541

The availability of Title V funds and State General funds (BIH only) are based upon funds appropriated in the FY 2017-18 Budget Act. Reimbursement of invoices is subject to compliance with all federal and state requirements pertaining to the CDPH/MCAH related programs and adherence to all applicable regulations, policies and procedures. Your Agency agrees to invoice actual and documented expenditures and to follow all the conditions of compliance stated in the current CDPH/MCAH Program and Fiscal Policies and Procedures manuals, including the ability to substantiate all funds claimed.



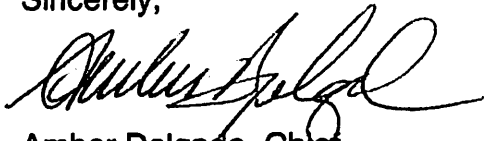
Ms. Wilson  
November 2, 2017  
Page 2

For agencies claiming Title XIX funds, you also agree to maintain secondary documentation that clearly substantiates time study activities as being non-program related, unmatched, non-enhanced or enhanced. You also agree to use either:

1. The web-posted CDPH/MCAH, BIH, and/or AFLP Base Medi-Cal Factor (MCF), and/or
2. A Variable Base MCF for specific staff who serve a unique client population, and who verify and document 100% of their Medi-Cal enrolled and non-Medi-Cal enrolled clients during each time study period (MCAH Program only).

Please ensure that all necessary individuals within your Agency are notified of this approval and that the enclosed documents are carefully reviewed. This approval letter constitutes a binding agreement. If any of the information contained in the enclosed SOW(s) and Budget(s) is incorrect or different from that negotiated, or if you require any additional forms, please contact your Contract Manager, Mary Rodriguez, at (916) 650-0370 or by e-mail at [Mary.Rodriguez@cdph.ca.gov](mailto:Mary.Rodriguez@cdph.ca.gov) within 14 calendar days from the date of this letter. Non-response constitutes acceptance of the enclosed documents.

Sincerely,



Amber Delgado, Chief  
Contract Management and Allocation Process

Enclosure(s)

cc: Julie Patterson-Hunter  
Clerk of the Board  
Nevada County  
950 Maidu Ave.  
Nevada, CA 95959

Mary Rodriguez  
Contract Manager

Kathy Sanchez  
Program Consultant

Central File

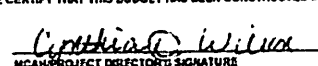

<b>BUDGET SUMMARY</b>	<b>FISCAL YEAR</b> 2017-18	<b>BUDGET</b> ORIGINAL	<b>BUDGET STATUS</b> ACTIVE	<b>MCAH &amp; SIDS BALANCE</b>	<b>TITLE XIX BALANCE</b>	Total Active 1
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Program: Maternal, Child and Adolescent Health	UNMATCHED FUNDING										NON-ENHANCED MATCHING (60/50)	ENHANCED MATCHING (75/25)		
Agency: 201729 Nevada											MCAH Cnty-N	MCAH Cnty-E		
SubK:													(16)	(17)
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)
	TOTAL FUNDING	%	TITLE V	%	SIDS	%	Agency Funds*	%	Combined Fed/Agency*	%	Combined Fed/Agency*	%	Combined Fed/Agency*	%
	ALLOCATION(S)		102,052		3,000									

NOT ACTIVE

EXPENSE CATEGORY														
(I) PERSONNEL	165,733		75,806		2,910					34,606			52,413	
(II) OPERATING EXPENSES	5,655		5,565		90									
(III) CAPITAL EXPENDITURES														
(IV) OTHER COSTS	11,000		1,000							10,000				
(V) INDIRECT COSTS	41,433		19,681							21,752				
<b>BUDGET TOTALS*</b>	<b>223,821</b>	<b>45.50%</b>	<b>102,052</b>	<b>1.34%</b>	<b>3,000</b>				<b>29.55%</b>	<b>66,358</b>	<b>25.42%</b>	<b>52,413</b>		
<b>BALANCE(S)</b>														

TOTAL TITLE V	102,052	102,052												
TOTAL SIDS	3,000		3,000											
TOTAL TITLE XIX	72,489													
TOTAL AGENCY FUNDS	46,282													

<b>\$ 177,541</b>	<b>Maximum Amount Payable from State and Federal resources</b>
WE CERTIFY THAT THIS BUDGET HAS BEEN CONSTRUCTED IN COMPLIANCE WITH ALL MCAH ADMINISTRATIVE AND PROGRAM POLICIES.	
 MCAH PROJECT DIRECTOR'S SIGNATURE	 AGENCY FISCAL AGENT'S SIGNATURE
11/8/17 DATE	11/8/17 DATE

\* These amounts contain local revenue submitted for information and matching purposes. MCAH does not reimburse Agency contributions.

STATE USE ONLY - TOTAL STATE AND FEDERAL REIMBURSEMENT	PCA Codes	MCAH-TV	SIDS	AGENCY FUNDS	MCAH Cnty-N	MCAH Cnty-E
		53107	53117		53118	53117
(I) PERSONNEL		75,806	2,910		17,303	39,310
(II) OPERATING EXPENSES		5,565	90			
(III) CAPITAL EXPENSES						
(IV) OTHER COSTS		1,000			5,000	
(V) INDIRECT COSTS		19,681			10,876	
<b>Totals for PCA Codes</b>	<b>177,541</b>	<b>102,052</b>	<b>3,000</b>		<b>33,179</b>	<b>39,310</b>

NOT ACTIVE

Program: Agency: Subid:	UNMATCHED FUNDING													
	WCAH-TV			EDS			AGENCY FUNDS			NON-EXCHANGED MATCHING (5000)			EXCHANGED MATCHING (7620)	
										MCAH City-N			MCAH City-E	
		(3)	(2)	(1)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(12)		
		TOTAL FUNDING		%	TITLE V	%	5000	%	Agency Fund*	%	Exchanged Fed/Agency*	%	Combined Fed/Agency*	
														(16)
														(17)

Program: Agency: SubN:	Maternal, Child and Adolescent Health 201729 Nevada		UNMATCHED FUNDING							NON-ENHANCED MATCHING (50/50)		ENHANCED MATCHING (75/25)			
			MCAH-TV		SIDS		AGENCY FUNDS		MCAH Only-N		MCAH Only-E				
	(1)		(2)	(3)	(4)	(5)	(6)	(7)	(10)	(11)	(14)	(15)	(16)	(17)	
	TOTAL FUNDING		%	TITLE V	%	GDG	%	Agency Funds	%	Combined Fed/Agency	%	Combined Fed/Agency			
(V) INDIRECT COSTS DETAIL															
TOTAL INDIRECT COSTS			41,433		19,681						21,752				
25.00% of Total Wages + Fringe Benefits			41,433	47.50%	19,681					52.50%	21,752				

(I) PERSONNEL DETAIL															
TOTAL PERSONNEL COSTS					168,733		75,806		2,910				34,606		52,413
FRINGE BENEFIT RATE 53.97%					58,083		28,572		1,020				12,130		18,372
TOTAL WAGES					107,640		49,234		1,890				22,476		34,041
INITIALS	TITLE OR CLASSIFICATION	% FTE	ANNUAL SALARY	TOTAL WAGES											
1	DF MCAH Coordinator - Senior PHN	60.00%	92,492	55,495	23.16%	12,853						33.50%	16,591	43.34%	24,052
2	DF PSC Coordinator - Senior PHN	15.00%	92,492	13,874								28.00%	3,885	72.00%	9,869
3	CW MCAH Director - Director of PHN's	15.00%	118,073	17,411	100.00%	17,411									
4	CS MCAH Clinical - Admin Assistant	10.00%	51,808	5,191	100.00%	5,191									
5	CWW Public Health Nurse	20.00%	76,348	15,669	87.94%	13,779	12.06%	1,890							
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California Department of Public Health (CDPH)  
Maternal, Child and Adolescent Health (MCAH) Program  
Scope of Work (SOW)

**x IMPORTANT:** By clicking this box, I agree to allow the state MCAH Program to post my Scope of Work on the CDPH/MCAH website.

The Local Health Jurisdiction (LHJ), in collaboration with the State MCAH Program, shall strive to develop systems that protect and improve the health of California's women of reproductive age, infants, children, adolescents and their families. The goals and objectives in this MCAH SOW incorporate local problems identified by LHJs 5-Year Needs Assessments and reflect the Title V priorities of the MCAH Division. The local 5-Year Needs Assessment identified problems that LHJs may address in their 5-Year Action Plans. The LHJ 5-Year Action Plans will then inform the development of the annual MCAH SOW.

All LHJs must perform the activities in the shaded areas in Goals 1-3 and monitor and report on the corresponding evaluation/performance measures. In addition, each LHJ is required to develop at least one objective in each of Goals 1 and 2 and 2 objectives for Goal 3, a SIDS objective and an objective to improve infant health. LHJs that receive FIMR funding will perform the activities in the shaded area in Goal 3, Objectives 3.5-3.7 and 3.8. In the second shaded column, Intervention Activities to Meet Objectives, insert the number and percent of cases you will review for the fiscal year. If resources allow, LHJs should also develop additional objectives, which they may place under any of the Goals 1-6. All activities in this SOW must take place within the fiscal year. Please see the MCAH Policies and Procedures Manual for further instructions on completing the SOW.

<http://www.cdph.ca.gov/services/funding/mcah/Pages/LocalMCAHProgramDocuments.aspx>

The development of this SOW was guided by several public health frameworks listed below. Please consider integrating these approaches when conceptualizing and organizing local program, policy, and evaluation efforts.

- o The Ten Essential Services of Public Health: <http://www.cdc.gov/nphpsp/essentialServices.html>;
- o The Spectrum of Prevention: <http://www.preventioninstitute.org/component/taxonomy/term/list/94/127.html>
- o Life Course Perspective: <http://mchb.hrsa.gov/lifecourseresources.htm>
- o The Social-Ecological Model: <http://www.cdc.gov/violenceprevention/overview/social-ecologicalmodel.html>
- o Social Determinants of Health: <http://www.cdc.gov/socialdeterminants/>
- o Strengthening Families: <http://www.cssp.org/reform/strengthening-families>

All Title V programs must comply with the MCAH Fiscal Policies and Procedures Manual which is found on the CDPH/MCAH website at:

<http://www.cdph.ca.gov/services/funding/mcah/Pages/FiscalDocuments.aspx>

CDPH/MCAH Division expects each LHJ to make progress towards Title V State Performance Measures and Healthy People 2020 goals. These goals involve complex issues and are difficult to achieve, particularly in the short term. As such, in addition to the required activities to address Title V State Priorities, and Title V and State requirements, the MCAH SOW provides LHJs with the opportunity to develop locally determined objectives and activities that can be realistically achieved given the scope and resources of local MCAH programs.

LHJs are required to comply with requirements as stated in the MCAH Program Policies and Procedures Manual, such as attending statewide meetings, conducting a Needs Assessment every five years, submitting Agreement Funding Applications, and completing Annual Reports.

<sup>1</sup> 2016-2020 Title V State Priorities

<sup>2</sup> Title V Requirement

<sup>3</sup> State Requirement

**Goal 1: Increase access and utilization of health and social services (cross-cutting)**

- Increase access to oral health services<sup>1</sup>
- Increase screening and referral for mental health and substance use services<sup>1</sup>
- Increase utilization of preventive health services<sup>1</sup>
- Target outreach services to identify pregnant women, women of reproductive age, infants, children and adolescents and their families who are eligible for Medi-Cal assistance or other publicly provided health care programs and assist them in applying for these benefits<sup>2</sup>
- Provide developmental screening for children in MCAH programs<sup>1</sup>

The shaded area represents required activities. Nothing is entered in the shaded areas, except for 1.7 as needed.

Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures (Report on these measures in the Annual Report)	
		Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
<b>1.1-1.6</b> <b>All women of reproductive age, pregnant women, infants, children, adolescents and children and youth with special health care needs (CYSHCN) will have access to:</b> <ul style="list-style-type: none"> <li>• Needed and preventive medical, dental, mental health, substance use services, and social services</li> <li>• Early and comprehensive perinatal care</li> <li>• An environment that maximizes their health</li> </ul>	<b>Assessment</b> <b>1.1</b> Identify and monitor the health status of women of reproductive age, pregnant women, infants, children, adolescents, and CYSHCN, including the social determinants of health and access/barriers to the provision of: <ol style="list-style-type: none"> <li>1. Preventive, medical, dental, mental health, substance use services, and social services</li> <li>2. Early and comprehensive perinatal care</li> </ol> Monitor trends over time, geographic areas and population group disparities.  Annually, share your data with your key health department leadership.	<b>1.1</b> This deliverable will be fulfilled by completing and submitting your Community Profile with your Agreement Funding Application each year  Report date data shared with the key health department leadership. Briefly describe their response, if significant.	Nothing is entered here.

<sup>1</sup> 2016-2020 Title V State Priorities

<sup>2</sup> Title V Requirement

<sup>3</sup> State Requirement



Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures (Report on these measures in the Annual Report)	
		Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
	<b>1.2</b> Participate in collaboratives, coalitions, community organizations, etc., to review data and develop policies and products to address social determinants of health and disparities.	<b>1.2</b> Report the total number of collaboratives with MCAH staff participation.  Submit online Collaborative Surveys that document participation, objectives, activities and accomplishments of MCAH – related collaboratives.	<b>1.2</b> List policies or products developed to improve infrastructure and address MCAH priorities.
	<b>Policy Development</b> <b>1.3</b> Review, revise and enact policies that facilitate access to Medi-Cal, Medi-Cal Access Program (MCAP), California Children's Services (CCS), Covered CA, Child Health and Disability Prevention Program (CHDP), Women, Infants, and Children (WIC), Family Planning, Access, Care, and Treatment (Family PACT), Text 4 Baby, or other relevant programs.	<b>1.3</b> Describe efforts to develop policy and systems changes that facilitate access to Medi-Cal, MCAP, Covered CA, CHDP, WIC, CCS, Family PACT, Text 4 Baby, or other relevant programs.  List formal and informal agreements, including Memoranda of Understanding with Medi-Cal Managed Care (MCMC) plans or other organizations that address the needs of mothers and infants.	<b>1.3</b> Describe the impact of policy and systems changes that facilitate access to Medi-Cal, MCAP, Covered CA, CHDP, WIC, CCS, Family PACT, or other relevant programs.
	<b>Assurance</b> <b>1.4</b> Participate in and/or deliver trainings in MCAH and public health competencies and workforce development as resources allow.	<b>1.4</b> List trainings attended or provided and numbers attending.	<b>1.4</b> Describe outcomes of workforce development trainings in MCAH and public health competencies, including but not limited to, knowledge or skills gained, practice changes or partnerships developed.

<sup>1</sup> 2016-2020 Title V State Priorities

<sup>2</sup> Title V Requirement

<sup>3</sup> State Requirement

Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures (Report on these measures in the Annual Report)	
		Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
	<b>1.5</b> Conduct activities to facilitate referrals to Medi-Cal, MCAP, Covered CA, CCS, and other low cost/no-cost health insurance programs for health care coverage <sup>2</sup>	<b>1.5</b> Describe activities to facilitate referrals to health insurance and programs.	<b>1.5</b> Report the number of referrals to Medi-Cal, MCAP, Covered CA, CCS, or other low/no-cost health insurance or programs.
	<b>1.6</b> Provide a toll-free or "no-cost to the calling party" telephone information service and other appropriate methods of communication, e.g. local MCAH Program web page to the local community <sup>2</sup> to facilitate linkage of MCAH population to services	<b>1.6</b> Describe the methods of communication, including the, cultural and linguistic challenges and solutions to linking the MCAH population to services.	<b>1.6</b> Report the following: <ol style="list-style-type: none"> <li>1. Number of calls to the toll-free or "no-cost to the calling party" telephone information service</li> <li>2. The number of web hits to the appropriate local MCAH Program webpage</li> </ol>

<sup>1</sup> 2016-2020 Title V State Priorities

<sup>2</sup> Title V Requirement

<sup>3</sup> State Requirement

Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures (Report on these measures in the Annual Report)	
		Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
<p><b>1.7 All LHJs are required to perform activities for CYSHCN.</b></p> <p><b>As resources allow, all LHJs are required to adopt protocols/policies for developmental screening and access/linkage to health insurance and services for children in MCAH Home Visiting (HV) or Case Management (CM) programs (bolded activities and measures #1,2,3)</b></p> <p><b><i>You may also choose to implement activities #4,5,6 in the second column or develop locally specific activities by inserting the activity and the performance measures. You are required to report on the activities you chose to implement.</i></b></p> <ul style="list-style-type: none"> <li><b><i>You may also add additional CYSHCN activities to the MCAH SOW Goal 5, Child Health</i></b></li> </ul> <p><b>1.7 Increase the rate of:</b></p> <ul style="list-style-type: none"> <li>Developmental screening for children ages 0-5 years according to AAP guidelines – 9 months, 16 months and 30 months</li> <li>All children, including CYSHCN, receive a yearly preventive medical visit</li> </ul>	<p><b>1.7 Promote the <u>American Academy of Pediatrics</u> (AAP) developmental screening guidelines.</b></p> <p><b><u>Required:</u></b></p> <ol style="list-style-type: none"> <li><b>Promote the yearly medical visit for children, including CYSHCN</b></li> <li><b>Adopt protocols/policies to screen, refer, and link all children in MCAH HV or CM Programs</b></li> <li><b>Develop quality assurance (QA) activities to ensure children in MCAH programs are screened, referred and linked</b></li> </ol> <p><b><u>As resources allow, choose one or more (Bold or highlight in yellow):</u></b></p> <ol style="list-style-type: none"> <li><b>Promote the use of <u>Birth to 5: Watch Me Thrive</u> or other screening materials consistent with AAP guidelines</b></li> <li><b>Participate in <u>Help Me Grow</u> (HMG) or programs that promote the core components of HMG</b></li> <li><b>Work with health plans (HPs), including MCMC, to identify and address barriers to screening, referral, linkage and increase the number of HPs requiring screening per AAP guidelines</b></li> <li><b>Other activities to promote developmental screening, referral and linkages and improve services for CYSHCN (specify activity here)</b></li> </ol>	<p><b>1.7 Describe or report the following:</b></p> <p><b><u>Required</u></b></p> <ol style="list-style-type: none"> <li><b>Activities to promote the yearly preventive medical visit</b></li> <li><b>Describe protocols/policies to screen, refer and link all children in MCAH programs</b></li> <li><b>List QA process developed to ensure screening, referral and linkage</b></li> </ol> <p><b><u>Report the following based on the activities you chose to implement in the second column (Bold or highlight in yellow):</u></b></p> <ol style="list-style-type: none"> <li>Number of providers receiving information about Birth to 5 or other screening materials</li> <li>Describe participation in HMG or HMG like programs</li> <li>Describe barriers and strategies to increase screening, referral and linkage           <ul style="list-style-type: none"> <li>Number of HPs requiring screenings per AAP guidelines</li> </ul> </li> <li><b>List process or performance measures for other activities here</b></li> </ol>	<p><b>1.7 Describe or report the following:</b></p> <p><b><u>Required</u></b></p> <ol style="list-style-type: none"> <li><b>Number of children, including CYSHCN, receiving a yearly preventive medical visit</b></li> <li><b>Number of children in local MCAH programs receiving developmental screening</b> <ul style="list-style-type: none"> <li>Number of children with positive screens that complete a follow-up visit with their primary care provider</li> <li>Number of children with positive screens linked to services</li> <li>Number of calls received for referrals and linkages to services</li> </ul> </li> <li><b>Outcomes of protocols/policies and QA activities to ensure screening, referral and linkage</b></li> </ol> <p><b><u>Describe the following based on the activities you chose to implement in the second column (Bold or highlight in yellow):</u></b></p> <ol style="list-style-type: none"> <li>See Column 3</li> <li>Outcomes of participation in HMG or HMG like programs. Describe results of work to implement HMG core components</li> <li>Outcomes of activities with HPs</li> <li><b>List outcomes of other activities here</b></li> </ol>

<sup>1</sup> 2016-2020 Title V State Priorities

<sup>2</sup> Title V Requirement

<sup>3</sup> State Requirement

Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures (Report on these measures in the Annual Report)	
		Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
Insert Short and/or Intermediate Outcome Objective(s), Activities, Evaluation/Performance Measures in the appropriate column below.			
<p><b>1.8</b></p> <p><b>At least one specific short and/or intermediate SMART outcome objective(s) to address access and utilization of health and social services</b></p> <p>Consider addressing problems related to:</p> <ul style="list-style-type: none"><li>• Access to preventive and medical health services</li><li>• Access to dental services</li><li>• Access to mental health and substance use services</li><li>• Enrollment in insurance for the MCAH population</li><li>• Increase access to well-women visit</li><li>• Rate of post-partum women without health insurance</li></ul> <p>Through June 30, 2018 continue to provide PMAD screening services to the perinatal population receiving home visiting services; if (+) screen, provide referral to appropriate agency/program follow-up, including Moving Beyond Depression (MBD);</p> <p>Reduce the clinical symptoms for women experiencing depression who receive MBD services.</p>	<p><b>1.8</b></p> <p>List activities to address health disparities, social determinants and barriers to increased access to health and human services here.</p> <p>Organize intervention activities and performance measures using the three core functions of public health: Assessment, Policy Development and Assurance. <a href="http://www.publichealth.lacounty.gov/qi/corefcns.htm">http://www.publichealth.lacounty.gov/qi/corefcns.htm</a></p> <ul style="list-style-type: none"><li>• Home visitors provide Edinburg Perinatal Depression Screening (EPDS) for all pregnant and post-partum women per agency policies at routine times and as needed</li><li>• Women screening (+) for depression referred to appropriate resource, including MBD</li><li>• Track EPDS scores for women who receive MBD services</li></ul>	<p><b>1.8</b></p> <p>Develop process measures for applicable intervention activities here.</p> <p>Describe or report :</p> <ul style="list-style-type: none"><li>• Policies for EPDS screening in home visiting programs</li><li>• Report number of women screened, disposition of referrals, number of women receiving MBD services, number of women who complete 8, 15, and booster sessions</li><li>• Enter EPDS scores in REDCap database at each MBD visit</li></ul>	<p><b>1.8</b></p> <p>Develop short and/or intermediate outcome related performance measures for the objectives and activities here.</p> <ul style="list-style-type: none"><li>• Number of women in home visiting services who receive EPDS screening at intervals per policy / Number of women in home visiting services</li><li>• Number of women who are referred to appropriate resources for depression / Number of women who score ≥11 on EPDS</li><li>• Number of women who have EPDS score &lt;11 at conclusion of MBD services / Number of women who receive MBD services</li></ul>

<sup>1</sup> 2016-2020 Title V State Priorities

<sup>2</sup> Title V Requirement

<sup>3</sup> State Requirement

Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures (Report on these measures in the Annual Report)	
		Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
	<ul style="list-style-type: none"> <li>• Create Directory for Perinatal Mood and Anxiety Disorder resources</li> <li>• Resource Directory distributed and available to home visitors, service providers, and the public through NCPHD website &amp; 211</li> <li>• Moving Beyond Depression (MBD) program overview/referral process provided to PCP's and community partners thru in-services</li> </ul>	<ul style="list-style-type: none"> <li>• Provide directory of currently existing or newly created resources and support groups for MMH/PMAD</li> <li>• List distribution of directory and provide link to directory on website</li> <li>• Track MBD in-services provided through</li> </ul>	

<sup>1</sup> 2016-2020 Title V State Priorities

<sup>2</sup> Title V Requirement

<sup>3</sup> State Requirement

**Goal 2: Improve preconception health by decreasing risk factors for adverse life course events among women of reproductive age**

- Decrease unintended pregnancies<sup>1</sup>
- Decrease the burden of chronic disease<sup>1</sup>
- Decrease intimate partner violence<sup>1</sup>
- Assure that all pregnant women will have access to early, adequate, and high quality perinatal care with a special emphasis on low-income and Medi-Cal eligible women<sup>2</sup>

The shaded area represents required activities. Nothing is entered in the shaded areas.

Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures (Report on these measures in the Annual Report)	
		Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
<b>2.1-2.3</b> All women will have access to quality maternal and early perinatal care, including CPSP services for Medi-Cal eligible women.	<b>Assurance</b>  <b>2.1</b> Develop MCAH staff knowledge of the system of maternal and perinatal care.  Conduct local activities to facilitate increased access to early and quality perinatal care.	<b>2.1</b> Report the following: 1. List of trainings received by staff on perinatal care 2. List activities implemented to increase access of women to early and quality perinatal care 3. Barriers and opportunities to improve access to early and quality perinatal care	<b>2.1</b> Describe outcomes of the following: 1. Behavior or practice change following receipt of training 2. Activities implemented to increase access to and improve the quality of perinatal care 3. Activities addressing the barriers to improve access to early and quality perinatal care
	<b>2.2</b> Maintain and manage a network of perinatal providers, including certified CPSP providers.  Provide technical assistance or education to improve perinatal care access and quality of perinatal services.  Conduct activities with local provider	<b>2.2</b> Describe local network of perinatal providers, including CPSP providers (e.g. concentration of Medi-Cal Managed Care, Fee-for Service, etc)  List technical assistance activities provided to perinatal and CPSP providers (e.g. resources,	<b>2.2</b> Describe adequacy of current network of perinatal providers in meeting the needs of local maternal population.  Describe improvement/s in provider knowledge or practice following technical assistance on perinatal care access and quality of perinatal services.

<sup>1</sup> 2016-2020 Title V State Priorities

<sup>2</sup> Title V Requirement

<sup>3</sup> State Requirement

Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures (Report on these measures in the Annual Report)	
		Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
	networks and/or health plans to improve access to and quality of perinatal services including coordination and integration of care.	referrals, tracking system for follow-up, assessments, interventions, infant care etc).  ** If above is not applicable to the local site,  Briefly summarize shared activities performed with current provider networks and/or local health plans to improve access to and quality of perinatal services including coordination and integration of care.	Describe outcomes of shared activities performed with the perinatal provider networks and/or local health plan in improving access to and quality of perinatal services
	2.3 Conduct face-to-face quality assurance/quality improvement (QA/QI) activities with CPSP providers or Medi-Cal Managed Care (MCMC) liaison to ensure that protocols are in place and implemented.	2.3 List the types of CPSP provider QA/QI activities conducted during site visits.  Identify your MCMC liaison contact  Report the number of actual site visits conducted with enrolled CPSP providers and/or MCMC liaison	2.3 Describe the results of QA/QI activities that were conducted.
Insert Short and/or Intermediate Outcome Objective(s), Activities, Evaluation/Performance Measures in the appropriate column below.			
2.4 At least one specific short and/or intermediate SMART	2.4 List activities to improve access to early, adequate and high quality perinatal care	2.4 Develop process measures for applicable intervention	2.4 Develop short and/or intermediate outcome related performance

<sup>1</sup> 2016-2020 Title V State Priorities

<sup>2</sup> Title V Requirement

<sup>3</sup> State Requirement

Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures (Report on these measures in the Annual Report)	
		Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
<p>outcome objective(s) to address the health of mothers/women is required here.</p> <p>Consider addressing local problems related to:</p> <ul style="list-style-type: none"> <li>• Late initiation of and/or inadequate prenatal care</li> <li>• Perinatal mood and anxiety disorders</li> <li>• Partner/family violence</li> <li>• Chronic disease</li> <li>• Unintended pregnancy</li> <li>• Birth Intervals-Spacing</li> <li>• Long-Acting Reversible Contraceptives (LARCs)</li> <li>• Zika virus and pregnancy</li> </ul> <p>By June 30, 2018, increase the percentage of OB providers who are Comprehensive Perinatal Services Program (CPSP) providers. (2017 is 2/5)</p>	<p>and maternal health here.</p> <p>Organize intervention activities and performance measures using the three core functions of public health: Assessment, Policy Development and Assurance.  <a href="http://www.publichealth.lacounty.gov/qi/corefcns.htm">http://www.publichealth.lacounty.gov/qi/corefcns.htm</a></p> <ul style="list-style-type: none"> <li>• Identify OB providers who are not currently CPSP            Explain benefits of CPSP            Refer OB providers to the CPSP website at:  <a href="http://www.cdph.ca.gov/programs/CPSP/Pages/default.aspx">http://www.cdph.ca.gov/programs/CPSP/Pages/default.aspx</a>            Personalize the PPT: Introduction to CPSP:  <a href="http://www.cdph.ca.gov/programs/CPSP/Documents/MO-CPSP-RRFINAL.ppt">http://www.cdph.ca.gov/programs/CPSP/Documents/MO-CPSP-RRFINAL.ppt</a></li> <li>• Assist the provider in applying to be a CPSP provider</li> <li>• Provide continuing technical assistance to the provider in implementing CPSP in their practice</li> </ul>	<p>activities here.</p> <ul style="list-style-type: none"> <li>• Provide dates and list of attendees at meetings with OB Providers</li> <li>• Briefly describe the process to encourage additional providers to become CPSP providers</li> <li>• Briefly describe successes and barriers and opportunities for solutions</li> </ul>	<p>measures for the objectives and activities here.</p> <ul style="list-style-type: none"> <li>• Number of CPSP OB Providers in Nevada County / Number of OB Providers in Nevada County</li> </ul>

<sup>1</sup> 2016-2020 Title V State Priorities

<sup>2</sup> Title V Requirement

<sup>3</sup> State Requirement



**Goal 3: Reduce infant morbidity and mortality**

- Reduce pre-term births and infant mortality<sup>1</sup>
- Increase infant safe sleep practices<sup>1</sup>
- Increase breastfeeding initiation and duration<sup>1</sup>

The shaded area represents required activities. Nothing is entered in the shaded areas, except for FIMR LHJs.

Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures (Report on these measures in the Annual Report)	
		Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
<b>3.1-3.2</b> <b>All infants are provided a safe sleep environment</b>	<b>Assurance</b> <b>3.1</b> Establish contact with parents/caregivers of infants with presumed SIDS death to provide grief and bereavement support services <sup>3</sup> .	<b>3.1</b> (Insert number) of parents/caregivers who experience a presumed SIDS death and the number who are contacted for grief and bereavement support services.	
	<b>3.2</b> Attend the SIDS Annual Conference/ SIDS training(s) and other conferences/trainings related to infant health <sup>3</sup> .	<b>3.2</b> Provide staff member name and date of attendance at SIDS Annual Conference/SIDS training(s) and other conferences/trainings related to infant health.	<b>3.2</b> Describe results of staff trainings related to infant health.

<sup>1</sup> 2016-2020 Title V State Priorities

<sup>2</sup> Title V Requirement

<sup>3</sup> State Requirement

Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures (Report on these measures in the Annual Report)	
		Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
Insert Short and/or Intermediate Outcome Objective(s), Activities, Evaluation/Performance Measures in the appropriate column below.			
<p><b>3.3</b></p> <p>At least one specific objective(s) addressing infant safe sleep practices and SIDS risk reduction community health education is required here.</p> <p>By June 30, 2018, both SNMH and TFH birthing centers will adopt infant safe sleep and SIDS risk reduction information in their current practices to keep the Nevada County SIDS / SUID death rate at 0.</p>	<p><b>3.3</b></p> <p>List activities to promote infant safe sleep practices and SIDS risk reduction education activities to the community here.</p> <p>Organize intervention activities and performance measures using the three core functions of public health: Assessment, Policy Development and Assurance. <a href="http://www.publichealth.lacounty.gov/qi/corefcns.htm">http://www.publichealth.lacounty.gov/qi/corefcns.htm</a></p> <ul style="list-style-type: none"><li>• SIDS Coordinator-outreach and develop a relationship with the birth hospitals</li><li>• SIDS Coordinator-assess the birth hospitals infant safe sleep policies and practice</li><li>• SIDS Coordinator-observe infant safe sleep practices in the birth hospitals</li><li>• SIDS Coordinator-outreach to birthing hospital staff to assist them to develop and implement evidence-based policies to promote infant safe sleep and SIDS risk reduction information in their current practice</li><li>• SIDS Coordinator-provide infant safe sleep education and SIDS risk reduction to birth hospitals and</li></ul>	<p><b>3.3</b></p> <p>Develop process measures for applicable intervention activities here.</p> <ul style="list-style-type: none"><li>• Describe the frequency and content of communication with birthing hospitals</li><li>• Provide example of current policies on safe infant sleep</li><li>• Briefly describe the results of observation and assessment of infant safe sleep of the birth hospital</li><li>• Describe the elements of the technical assistance provided to birthing hospitals</li><li>• Provide example of updated policies on safe infant sleep</li><li>• Briefly describe evaluation tool developed</li><li>• Briefly describe the process to</li></ul>	<p><b>3.3</b></p> <p>Develop short and/or intermediate outcome related performance measures for the objectives and activities here.</p> <p>Number of SIDS / SUID deaths = 0</p>

<sup>1</sup> 2016-2020 Title V State Priorities

<sup>2</sup> Title V Requirement

<sup>3</sup> State Requirement

Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures (Report on these measures in the Annual Report)	
		Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
	<p>ongoing technical assistance if needed</p> <ul style="list-style-type: none"> <li>Partner with local hospitals to distribute Safe Sleep/Baby Boxes for use w/families without means for securing bassinet or crib for infant Safe Sleep</li> </ul>	<p>implement infant safe sleep and SIDS risk reduction practices in the birth hospitals</p> <ul style="list-style-type: none"> <li>Maintain list of referrals for safe sleep environment and documentation of SIDS risk reduction for families who receive Baby Boxes</li> </ul>	
3.4	3.4	3.4	3.4

<sup>1</sup> 2016-2020 Title V State Priorities

<sup>2</sup> Title V Requirement

<sup>3</sup> State Requirement

Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures (Report on these measures in the Annual Report)	
		Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
<p><b>At least one specific short and/or intermediate SMART outcome objective(s) to address perinatal/infant health is required here.</b></p> <p>Objectives that improve infant health may address local problems related to:</p> <ul style="list-style-type: none"> <li>• Prematurity/Low birth weight</li> <li>• Perinatal substance use</li> <li>• Access to enhanced perinatal (neonatal) services</li> <li>• Breastfeeding initiation and duration</li> <li>• Birth intervals/Birth Spacing</li> <li>• Long-acting reversible contraceptives (LARCs)</li> </ul> <p>By June 30, 2018, identify potential partners and resources to engage in a process to address community related issues associated with substance abuse in the perinatal female population</p>	<p>List activities to improve perinatal/infant health here.</p> <p>Organize intervention activities and performance measures using the three core functions of public health: Assessment, Policy Development and Assurance.  <a href="http://www.publichealth.lacounty.gov/qi/corefcns.htm">http://www.publichealth.lacounty.gov/qi/corefcns.htm</a></p> <p>Perform the following activities:</p> <ul style="list-style-type: none"> <li>• Engage existing community partners/collaborative groups working with the perinatal female population</li> <li>• Convene a community partners group of existing and new partners to begin discussion re: Perinatal Substance use</li> <li>• Attend training on effects of substances on infants during the perinatal period</li> </ul>	<p>Develop process measures for applicable intervention activities here.</p> <p>Briefly describe or report:</p> <ul style="list-style-type: none"> <li>• Collaborative relationships that support PSU screening of all pregnant and postpartum women</li> <li>• Keep Documentation of attendance list &amp; minutes from meeting discussions</li> <li>• Provide training dates, learning objectives</li> </ul>	<p>Develop short and/or intermediate outcome related performance measures for the objectives and activities here.</p> <p>Measures include:</p> <ul style="list-style-type: none"> <li>• Number of community partners addressing substance abuse issues in the perinatal female population/Number of community partners working with the perinatal female population in Nevada County</li> <li>• Number of trainings attended</li> </ul>
<b>For FIMR LHJs Only: 3.5-3.7</b>	<b>For FIMR LHJs Only:</b>	<b>For FIMR LHJs Only:</b>	<b>For FIMR LHJs Only:</b>

<sup>1</sup> 2016-2020 Title V State Priorities

<sup>2</sup> Title V Requirement

<sup>3</sup> State Requirement

Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures (Report on these measures in the Annual Report)	
		Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
Preventable fetal, neonatal and postneonatal deaths will be reduced.	<b>Assessment</b> <b>3.5</b> Complete the review of at least __ cases, which is approximately __% of all fetal, neonatal, and postneonatal deaths.	<b>Assessment</b> <b>3.5</b> Submit number of cases reviewed as specified in the Annual Report table.	<b>Assessment</b> <b>3.5</b> Submit periodic local summary report of findings and recommendations (periodicity to be determined by consulting with MCAH).
	<b>Assurance</b> <b>3.6</b> Establish, facilitate, and maintain a Case Review Team (CRT) to review selected cases, identify contributing factors to fetal, neonatal, and postneonatal deaths, and make recommendations to address these factors.	<b>Assurance</b> <b>3.6-3.7</b>  Submit FIMR Tracking Log and FIMR Committee Membership forms for CRT and CAT with the Annual Report.	
	<b>3.7</b> Establish, facilitate, and maintain a Community Action Team (CAT) to recommend and implement community, policy, and/or systems changes that address review findings.		
Insert Short and/or Intermediate Outcome Objective(s), Activities, Evaluation/Performance Measures in the appropriate column below.			
For FIMR LHJs Only: 3.8	For FIMR LHJs Only: 3.8	For FIMR LHJs Only: 3.8	For FIMR LHJs Only: 3.8

<sup>1</sup> 2016-2020 Title V State Priorities

<sup>2</sup> Title V Requirement

<sup>3</sup> State Requirement

Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures (Report on these measures in the Annual Report)	
		Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
One objective addressing the development of interventions to prevent fetal, neonatal, and postneonatal deaths is required here.	Based on CRT recommendations, identify and implement at least one intervention involving policy, systems, or community norm changes here.	Develop process measures for applicable intervention activities here.	Develop short and/or intermediate outcome-related performance measures for the objectives and activities here.

<sup>1</sup> 2016-2020 Title V State Priorities

<sup>2</sup> Title V Requirement

<sup>3</sup> State Requirement

**Goal 4: Increase the proportion of children, adolescents and women of reproductive age who maintain a healthy weight**

- Increase consumption of a healthy diet<sup>1</sup>
- Increase physical activity<sup>1</sup>

Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures (Report on these measures in the Annual Report)	
		Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
<b>4.1</b> <b>Add specific short and/or intermediate SMART outcome objective(s) here.</b>  Consider addressing local problems related to: <ul style="list-style-type: none"> <li>• Overweight/obesity</li> <li>• Physical activity</li> </ul>	<b>4.1</b> List activities to meet the Outcome Objective(s) here.  Organize intervention activities and performance measures using the three core functions of public health: Assessment, Policy Development and Assurance. <a href="http://www.publichealth.lacounty.gov/qi/corefcns.htm">http://www.publichealth.lacounty.gov/qi/corefcns.htm</a>	<b>4.1</b> Develop process measures for applicable intervention activities here.	<b>4.1</b> Develop short and/or intermediate outcome related performance measures for the objectives and activities here.

<sup>1</sup> 2016-2020 Title V State Priorities

<sup>2</sup> Title V Requirement

<sup>3</sup> State Requirement

**Goal 5: Improve the cognitive, physical, and emotional development of all children, including children and youth with special health care needs**

- Reduce unintentional injuries<sup>1</sup>
- Reduce child abuse and neglect<sup>1</sup>
- Provide developmental screening for all children<sup>1</sup>

Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures (Report on these measures in the Annual Report)	
		Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
<b>5.1</b> <b>Add specific short and/or intermediate SMART outcome objective(s) here.</b>  Consider addressing local problems related to: <ul style="list-style-type: none"> <li>• Childhood injury</li> <li>• Child abuse and neglect</li> <li>• CYSHCN</li> </ul>	<b>5.1</b> List activities to meet the Outcome Objective(s) here.  Organize intervention activities and performance measures using the three core functions of public health: Assessment, Policy Development, and Assurance. <a href="http://www.publichealth.lacounty.gov/qi/corefcns.htm">http://www.publichealth.lacounty.gov/qi/corefcns.htm</a>	<b>5.1</b> Develop process measures for applicable intervention activities here.	<b>5.1</b> Develop short and/or intermediate outcome related performance measures for the objectives and activities here.

<sup>1</sup> 2016-2020 Title V State Priorities

<sup>2</sup> Title V Requirement

<sup>3</sup> State Requirement



**Goal 6: Promote and enhance adolescent strengths, skills, and supports to improve adolescent health.**

- Decrease teen pregnancies<sup>1</sup>
- Reduce teen dating violence, bullying and harassment<sup>1</sup>

Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures (Report on these measures in the Annual Report)	
		Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
<p><b>6.1</b></p> <p><b>Add specific short and/or intermediate SMART outcome objective(s) here.</b></p> <p>Consider addressing local problems related to:</p> <ul style="list-style-type: none"> <li>• Adolescent sexual health</li> <li>• Adolescent pregnancy</li> <li>• Adolescent injuries</li> <li>• Adolescent violence</li> <li>• Adolescent mental health</li> </ul> <p>By June 30, 2018, improve the health, social/emotional, and educational outcomes for pregnant and parenting teens through support of Nevada Joint Union High School District's Young Parents Program (YPP) (The only way this optional goal will become a reality is if the \$20,000 request in the budget submission from Title XIX is granted to create a contract with NJUHSD for implementation of these services.)</p>	<p><b>6.1</b></p> <p>List activities to meet the Outcome Objective(s) here.</p> <p>Organize intervention activities and performance measures using the three core functions of public health: Assessment, Policy Development, and Assurance. <a href="http://www.publichealth.lacounty.gov/qi/corefcns.htm">http://www.publichealth.lacounty.gov/qi/corefcns.htm</a></p> <p>If funds granted:</p> <ul style="list-style-type: none"> <li>• Evaluate the feasibility of partnership between NCPHD and NJUHSD to continue to provide the YPP to NC pregnant and parenting teens</li> <li>• Hold meetings with partnering agencies</li> <li>• Develop contract, including scope of work and outcome measures</li> <li>• Provide case management services as specified in contract</li> </ul>	<p><b>6.1</b></p> <p>Develop process measures for applicable intervention activities here.</p> <ul style="list-style-type: none"> <li>• Describe meeting process through notes and sign-in sheets;</li> <li>• Submit contract to MCAH fiscal and program staff for review and approval;</li> <li>• Complete contracting process;</li> <li>• Receive monthly and annual reports from case manager describing service outcomes</li> </ul>	<p><b>6.1</b></p> <p>Develop short and/or intermediate outcome related performance measures for the objectives and activities here.</p> <p>Measures:</p> <ul style="list-style-type: none"> <li>• Number of pregnant and parenting teens provided with case management services; then</li> <li>• Number of pregnant teens who enter prenatal care in first trimester or within 1 month of commencement of case management;</li> <li>• Number of infants of teens who receive health exams per Bright Futures periodicity;</li> <li>• Number of teens who initiate breastfeeding;</li> <li>• Number of teens who exclusively breastfeed at 6 months;</li> </ul>

<sup>1</sup> 2016-2020 Title V State Priorities

<sup>2</sup> Title V Requirement

<sup>3</sup> State Requirement

Short and/or Intermediate Objective(s)	Intervention Activities to Meet Objectives (Describe the steps of the intervention)	Evaluation/Performance Measures Process, Short and/or Intermediate Measures (Report on these measures in the Annual Report)	
		Process Description and Measures	Short and/or Intermediate Outcome Measure(s)
			<ul style="list-style-type: none"> <li>• Number of teens who receive EPDS screening at specified intervals during the perinatal period;</li> <li>• Number of teens who report increased social connections 1 year after case management services begin;</li> <li>• Number of case-managed teens who are enrolled in school and on-target to receive a high school diploma or GED</li> </ul> <p>(All above over number of teens who are case-managed through YPP and fit criteria for the measure ie: pregnant female)</p>

<sup>1</sup> 2016-2020 Title V State Priorities

<sup>2</sup> Title V Requirement

<sup>3</sup> State Requirement