

Workgroup: Women & Maternal Health

Priority 1: Women have access to and receive coordinated, comprehensive services before, during and after pregnancy (Domain: Women & Maternal)

Objective	Urgency (U) 2-5	Impact (I) 1-3	Realistic (R) 1-3	Total U+I+R	Comments <i>Key insights your team has had working in this area to date, known partners, interventions, programs, etc.</i>
1.1: Increase the proportion of women receiving a well-woman visit annually.					
1.2: Increase the number of completed referrals for services in response to screening at every visit by 2020.					
1.3: Increase the number of established perinatal community collaboratives [e.g., Becoming a Mom (BAM) program] by at least 5 annually by 2020.					
1.4: Increase the percent of pregnant women on Medicaid with a previous preterm birth who receive progesterone to 40% by 2017 and increase annually thereafter.					
1.5: Decrease non-medically indicated births between 37 0/7 weeks of gestation through 38 6/7 weeks of gestation to less than 5% by 2020.					

National Performance Measure (NPM)	Data Trend	State Performance Measure (SPM)	Data Trend
NPM 01: Well-woman visit (Percent of women with a past year preventive medical visit)		SPM 1: Percent of preterm births (<37 weeks gestation)	

Priority 6: Professionals have the knowledge and skills to address the needs of maternal and child health populations. (Domain: Cross-Cutting/Life Course)

Objective	Urgency (U) 2-5	Impact (I) 1-3	Realistic (R) 1-3	Total U+I+R	Comments <i>Key insights your team has had working in this area to date, known partners, interventions, programs, etc.</i>
6.1: Increase the proportion of smoking women referred to evidence-based cessation services to 95% or higher by 2020.					
6.2: Increase abstinence from cigarette smoking among pregnant women to 90% by 2020.					
6.4*: Build MCH capacity and support the development of a trained, qualified workforce by providing professional development events at least four times each year through 2020. <i>*also reviewed by Child, Perinatal/Infant and Adolescent Health Workgroups</i>					

National Performance Measure (NPM)	Data Trend
NPM 14 (A): Smoking during Pregnancy and Household Smoking (A.) Percent of women who smoke during pregnancy	
NPM 14 (B): Smoking during Pregnancy and Household Smoking (B.) Percent of children who live in households where someone smokes	

Priority 8: Cross-Cutting/ Life Course Information is available to support informed health decisions and choices. (Domain: Women & Maternal Health)

Objective	Urgency (U) 2-5	Impact (I) 1-3	Realistic (R) 1-3	Total U+I+R	Comments <i>Key insights your team has had working in this area to date, known partners, interventions, programs, etc.</i>
8.1: Increase the proportion of MCH grantee providers who provide health information education to clients to improve health decision making among women, pregnant women, children, adolescents, and children and youth with special health care needs annually.					
8.2: Partner with Health Literacy Kansas (HLK) to provide training to improve the knowledge of parents and teens as to the importance of making informed health decisions by 2020.					
8.5: Incorporate information regarding changes to the health care system into existing trainings and technical assistance by 2020. <i>*also reviewed by Child, Perinatal/Infant and Adolescent Health Workgroups</i>					

State Performance Measure (SPM)	Data Trend
SPM 5: Percent of adults who report that it is somewhat difficult or very difficult to understand information that doctors, nurses and other health professionals tell them	

Workgroup: Child Health

Priority 3: Developmentally appropriate care and services are provided across the lifespan. (Domain: Child)

Objective	Urgency (U) 2-5	Impact (I) 1-3	Realistic (R) 1-3	Total U+I+R	Comments <i>Key insights your team has had working in this area to date, known partners, interventions, programs, etc.</i>
3.1: Increase the proportion of children aged 1 month to kindergarten entry statewide who receive a parent completed developmental screening tool annually.					
3.2: Provide annual training to child care providers that increase knowledge and promote screening to support healthy social-emotional development of children.					
3.3: Increase by 10% the number of children through age 8 riding in age and size appropriate car seats per best practice recommendations by 2020.					
3.4: Increase the proportion of families receiving education and risk assessment regarding home safety and injury prevention by 2020.					
3.5: Increase the percent of home-based child care facilities implementing daily routines involving at least 60 minutes of daily physical activity per CDC recommendations to decrease risk of obesity by 2020.					
3.6: Increase the percent of children and adolescents (K-12 students) participating in 60 minutes of daily physical activity.					

National Performance Measure (NPM)	Data Trend	State Performance Measure (SPM)	Data Trend
NPM 06: Developmental screening (Percent of children, ages 10 through 71 months, receiving a developmental screening using a parent-completed screening tool)		SPM 3: Percent of children 6 through 11 and adolescents 12 through 17 who are physically active at least 60 minutes per day	
NPM 07: Child Injury (Rate of hospitalization for non-fatal injury per 100,000 children ages 0 through 9)			

Priority 6: Professionals have the knowledge and skills to address the needs of maternal and child health populations. (Domain: Cross-Cutting/Life Course)

Objective	Urgency (U) 2-5	Impact (I) 1-3	Realistic (R) 1-3	Total U+I+R	Comments <i>Key insights your team has had working in this area to date, known partners, interventions, programs, etc.</i>
6.3: Implement collaborative oral health initiatives, identify baseline measures, and expand oral health screening, education, and referral by 2020.					
6.4: Build MCH capacity and support the development of a trained, qualified workforce by providing professional development events at least four times each year through 2020. <i>*also reviewed by Child, Perinatal/Infant and Adolescent Health Workgroups</i>					
6.5: Deliver annual training and education to ensure that providers have the ability to promote diversity, inclusion, and integrate supports in the provision of services for the Special Health Care Needs (SHCN) population into adulthood. <i>*also reviewed by Adolescent Health Workgroups</i>					

National Performance Measure (NPM)	Data Trend
NPM 14 (A): Smoking during Pregnancy and Household Smoking (A.) Percent of women who smoke during pregnancy.	
NPM 14 (B): Smoking during Pregnancy and Household Smoking (B.) Percent of children who live in households where someone smokes.	

Priority 7: Services are comprehensive and coordinated across systems and providers (Domain: CYSHCN)

Objective	Urgency (U) 2-5	Impact (I) 1-3	Realistic (R) 1-3	Total U+I+R	Comments <i>Key insights your team has had working in this area to date, known partners, interventions, programs, etc.</i>
7.1: Increase family satisfaction with the communication among their child's doctors and other health providers to 75% by 2020. <i>*also reviewed by Adolescent Health Workgroups</i>					
7.3: Develop an outreach plan to engage partners, providers, and families in the utilization of a shared resource to empower, equip, and assist families to navigate systems for optimal health outcomes by 2020.					

Performance Measures	Data Trend
NPM 11: Medical home (Percent of children with and without special health care needs having a medical home)	

Priority 8: Information is available to support informed health decisions and choices. (Domain: Cross-Cutting/Life Course)

Objective	Urgency (U) 2-5	Impact (I) 1-3	Realistic (R) 1-3	Total U+I+R	Comments <i>Key insights your team has had working in this area to date, known partners, interventions, programs, etc.</i>
8.3: By 2020, create and disseminate a toolkit for preschool through school aged providers with a curriculum and activities designed to teach children and adolescents about healthy habits and choices.					
8.5: Incorporate information regarding changes to the health care system into existing trainings and technical assistance by 2020. <i>*also reviewed by Child, Perinatal/Infant and Adolescent Health Workgroups</i>					

State Performance Measure (SPM)	Data Trend
SPM 5: Percent of adults who report that it is somewhat difficult or very difficult to understand information that doctors, nurses and other health professionals tell them	

Workgroup: Perinatal/Infant

Priority 4: Families are empowered to make educated choices about nutrition and physical activity (Domain: Perinatal/Infant)

Objective	Urgency (U) 2-5	Impact (I) 1-3	Realistic (R) 1-3	Total U+I+R	Comments <i>Key insights your team has had working in this area to date, known partners, interventions, programs, etc.</i>
4.1: Increase the number of communities in Kansas that provide a multifaceted approach to breastfeeding support across community sectors by at least 10 by 2020.					
4.2: Increase the number of Baby Friendly Hospitals in Kansas by 2020.					
4.3: Increase the proportion of women and pregnant women receiving education related to the impact of prenatal and postpartum nutrition and exercise on optimal infant feeding by 2020.					

National Performance Measure (NPM)	Data Trend
NPM 04: Breastfeeding (A) Percent of infants who are ever breastfed	
NPM 04: Breastfeeding (B) Percent of infants breastfed exclusively through 6 months	

Priority 2: Services and supports promote healthy family (Domain: Cross-Cutting/Life Course)

Objective	Urgency (U) 2-5	Impact (I) 1-3	Realistic (R) 1-3	Total U+I+R	Comments <i>Key insights your team has had working in this area to date, known partners, interventions, programs, etc.</i>
2.2: Increase the number of providers with capacity to provide trauma-informed care by 2020. (Track training offered to providers)					
2.3: Increase the number of families receiving home visiting services through coordination and referral services by 5% annually.					

State Performance Measure (SPM)	Data Trend
SPM 2: Percent of children living with parents who have emotional help with parenthood	

Priority 6: Professionals have the knowledge and skills to address the needs of maternal and child health populations. (Domain: Cross-Cutting/Life Course)

Objective	Urgency (U) 2-5	Impact (I) 1-3	Realistic (R) 1-3	Total U+I+R	Comments <i>Key insights your team has had working in this area to date, known partners, interventions, programs, etc.</i>
6.4: Build MCH capacity and support the development of a trained, qualified workforce by providing professional development events at least four times each year through 2020. <i>*also reviewed by Child, Perinatal/Infant and Adolescent Health Workgroups</i>					
6.6: Implement a multi-sector (community, hospitals, maternal and infant clinics) safe sleep promotion model by 2018.					

National Performance Measure (NPM)	Data Trend
NPM 14 (A): Smoking during Pregnancy and Household Smoking (A.) Percent of women who smoke during pregnancy.	
NPM 14 (B): Smoking during Pregnancy and Household Smoking (B.) Percent of children who live in households where someone smokes.	
SPM 4: Number of Safe Sleep (SIDS/SUID) trainings provided to professionals	

Priority 8: Cross-Cutting/ Life Course Information is available to support informed health decisions and choices. (Domain: Cross-Cutting/Life Course)

Objective	Urgency (U) 2-5	Impact (I) 1-3	Realistic (R) 1-3	Total U+I+R	Comments <i>Key insights your team has had working in this area to date, known partners, interventions, programs, etc.</i>
8.5: Incorporate information regarding changes to the health care system into existing trainings and technical assistance by 2020. <i>*also reviewed by Child, Perinatal/Infant and Adolescent Health Workgroups</i>					

State Performance Measure (SPM)	Data Trend
SPM 5: Percent of adults who report that it is somewhat difficult or very difficult to understand information that doctors, nurses and other health professionals tell them	

Workgroup: Adolescent Health

Priority 5: Communities and providers support physical, social and emotional health (Domain: Adolescent Health)

Objective	Urgency (U) 2-5	Impact (I) 1-3	Realistic (R) 1-3	Total U+I+R	Comments <i>Key insights your team has had working in this area to date, known partners, interventions, programs, etc.</i>
5.1: Increase the number of schools that are implementing programs that decrease risk factors associated with bullying by 2020.					
5.2: Increase the number of adolescents aged 12 through 17 years accessing positive youth development, prevention, and intervention services and programs by 2020.					
5.3: Increase the number of providers serving adolescents that assess for and intervene with adolescents at risk for suicide.					
5.4: Develop a cross-system partnership and protocols to increase adolescents' receipt of annual preventive services by 2020.					
5.5: Increase the number of adolescents receiving immunizations according to the recommended schedule (AIP) by 2020.					

National Performance Measure (NPM)	Data Trend
NPM 09: Bullying (Percent of adolescents, 12 through 17, who are bullied or who bully others)	
NPM 10: Adolescent well-visit (Percent of adolescents, ages 12 through 17, with a preventive medical visit in the past year)	

Priority 2: Services and supports promote healthy family (Domain: Cross-Cutting/Life Course)

Objective	Urgency (U) 2-5	Impact (I) 1-3	Realistic (R) 1-3	Total U+I+R	Comments <i>Key insights your team has had working in this area to date, known partners, interventions, programs, etc.</i>
2.1: Increase opportunities to empower families and build strong MCH advocates by 2020.					

State Performance Measure (SPM)	Data Trend
SPM 2: Percent of children living with parents who have emotional help with parenthood	

Priority 6: Professionals have the knowledge and skills to address the needs of maternal and child health populations. (Domain: Cross-Cutting/Life Course)

Objective	Urgency (U) 2-5	Impact (I) 1-3	Realistic (R) 1-3	Total U+I+R	Comments <i>Key insights your team has had working in this area to date, known partners, interventions, programs, etc.</i>
6.4: Build MCH capacity and support the development of a trained, qualified workforce by providing professional development events at least four times each year through 2020. <i>*also reviewed by Child, Perinatal/Infant and Adolescent Health Workgroups</i>					
6.5: Deliver annual training and education to ensure that providers have the ability to promote diversity, inclusion, and integrate supports in the provision of services for the Special Health Care Needs (SHCN) population into adulthood. <i>*also reviewed by Child Health Workgroups</i>					

National Performance Measure (NPM)	Data Trend
NPM 14 (A): Smoking during Pregnancy and Household Smoking (A.) Percent of women who smoke during pregnancy.	
NPM 14 (B): Smoking during Pregnancy and Household Smoking (B.) Percent of children who live in households where someone smokes.	

Priority 7: Services are comprehensive and coordinated across systems and providers (Domain: CYSHCN)

Objective	Urgency (U) 2-5	Impact (I) 1-3	Realistic (R) 1-3	Total U+I+R	Comments <i>Key insights your team has had working in this area to date, known partners, interventions, programs, etc.</i>
7.1: Increase family satisfaction with the communication among their child's doctors and other health providers to 75% by 2020. <i>*also reviewed by Child Health Workgroups</i>					
7.2: By 2020, increase the proportion of families who received care coordination supports through cross-system collaboration by 25%.					

National Performance Measure (NPM)	Data Trend
NPM 11: Medical home (Percent of children with and without special health care needs having a medical home)	

Priority 8: Information is available to support informed health decisions and choices. (Domain: Cross-cutting/Life Course)

Objective	Urgency (U) 2-5	Impact (I) 1-3	Realistic (R) 1-3	Total U+I+R	Comments <i>Key insights your team has had working in this area to date, known partners, interventions, programs, etc.</i>
8.4: Increase youth-focused and youth-driven initiatives to support successful transition, self-determination, and advocacy by 2020.					
8.5: Incorporate information regarding changes to the health care system into existing trainings and technical assistance by 2020. <i>*also reviewed by Child, Perinatal/Infant and Adolescent Health Workgroups</i>					

State Performance Measure (SPM)	Data Trend
SPM 5: Percent of adults who report that it is somewhat difficult or very difficult to understand information that doctors, nurses and other health professionals tell them	

INSTRUCTIONS

Objective Assessment and Performance Measure Review: Work as a team to rate the Objectives based on the identified strategies, work being done in the state, the state's needs, resources, and data. Rate each Objective on urgency of the work to be done, impact on the issue (reach and resulting impact of change), and how realistic it is that it could result in timely changes. For the performance measure review, refer to the data snapshot and observe the trend so this can be kept in mind as contextual information during the prioritization process. Sum the results of each objective. Report Out: Be ready to share the top scoring 3-5 objectives as well as the lowest scoring 1-2 objectives. Share key insights recorded in the last column. Did anything score as low impact? Was there a lot of disparity in scoring or did everything score evenly?

Important reminder: This is not a prioritization process to determine which priorities and objectives will be addressed and which will not. Everything in the action plan will be addressed over the next five years. The process today, along with other factors will be used to help determine allocation of staff time and resources on where to start and how to focus work, particular the first year. Progress on objectives and resource priorities will be re-evaluated and adjusted accordingly throughout the five-year period.

OBJECTIVE ASSESSMENT RATING SCALES

Urgency:

- (5) Essential = Critical to do right now
- (4) High = Extremely important to do right now
- (3) Medium = It's important, but it doesn't have to be done right now
- (2) Low = It's somewhat important, but not time sensitive

Impact:

- (3) High = Major impact on critical issues and maximum population reach resulting in significant change
- (2) Medium = Moderate impact on issues and moderate impact on the population resulting in notable change
- (1) Low = Some impact on issues, but does not impact the majority of the population resulting in minimal change

Realistic:

- (3) High = It will be pretty easy to see some level of change in the next 12 months
- (2) Medium = It will be tough, but I believe we can see some level of change in the next 12 months
- (1) Low = It's not realistic to think that we can make any change on this in the next 12 months

PERFORMANCE MEASURE REVIEW: Review the rate for National and/or State Performance Measure(s) and note the trend as indicated.

(+) Positive Trend

(-) Negative Trend

(0) No Trend or Flat/Unchanged