

## **ATTACHMENT #3**

### **2019-20 KDHE Aid to Local Grant Expected Measurable Outcomes – Order by Grant Number Category**

#### **#3 - Public Health Emergency Preparedness (PHEP)**

Program: Public Health Emergency Preparedness

##### **By June 30, 2020:**

- Will conduct an exercise testing public health preparedness capabilities.
- Complete 100% of grant deliverables listed on the grant work plan.
- Conduct and complete an annual review of the Division of Health's Emergency Operations Plan.

#### **#5 - Family Planning (FP):**

Programs: Family Planning & Laboratory Services

##### **By June 30, 2020:**

- **Assure at least 63% of pregnancies among Family Planning clients are intended.** (*Healthy People 2020 goal: 56%; SCDOH: CY 2018 = 67%; CY 2017 = 65%; CY 2016 = 61%*).
- **Reduce pregnancies among Family Planning females age 15 to 19 years to less than 5 pregnancies per 1,000 specified populations.** (*U.S. in 2011 = 52; KS in 2013 = 40; SCDOH: CY 2018 = 0; CY 2017 = 9.3; New goal established in 2018*).
- **Promote healthy birth spacing by assuring that 75% or more of pregnancies are conceived at least 18 months after the most recent birth.** (*Healthy People 2020 Target: 70%; SCDOH: CY 2018 = 82%; CY 2017 = 96%; New goal established in 2017*).

#### **#16 - Sexually Transmitted Infection (STI) Intervention & Prevention:**

Programs: STI Control & Laboratory Services

##### **By June 30, 2020:**

- **Disease Intervention Specialists (DIS) will interview 70% of all syphilis, and 80% of all HIV cases within 7 days of accepting a case.** (*SCDOH: CY 2018 = DIS interviewed 96% of syphilis and 88% of HIV cases within 7 days; CY 2017 = DIS interviewed 95% of syphilis and 97% of HIV cases within 7 days; CY 2016 = DIS interviewed 89% of syphilis and 93% of HIV cases within 7 days*).
- **DIS will interview an average of 2 contacts per syphilis case and 2 contacts per HIV case.** (*SCDOH: CY 2018 = DIS interviewed an average of 1.3 contacts per syphilis case and 2.4 contacts per HIV case; CY 2017 = DIS interviewed an average of 2.6 contacts per syphilis case and 4 contacts per HIV case; CY 2016 = DIS interviewed an average of 2.9 contacts per syphilis case and 2.7 contacts per HIV case*).
- **DIS will interview 70%\* of new, locatable, in jurisdiction partners of syphilis and 80% of HIV cases in 7 days.** (*SCDOH: CY 2018 = DIS interviewed and tested 95% of syphilis case partners and 96% of HIV case partners; CY 2017\* = DIS interviewed and tested 92% of syphilis case partners and 93% of HIV case partners*).

\*Each of these are grant required goals set by KDHE. Future funding may be decreased at the discretion of the funder if goals are not consistently met. Currently we do not have the capacity to increase these goals. The difference in percent is based on past KDHE baseline numbers for each disease in Kansas. KDHE has commended Sedgwick County DIS for consistency in responding to case needs during 2018 and periods of outbreak.

## #17 – Maternal & Child Health (MCH)

### MCH Dental:

Program: Children's Dental Clinic

#### By June 30, 2020:

- **The Children's Dental Clinic will provide preventive services to 349 unduplicated children.** (SCDOH: CY 2018 = 320; CY 2017 = 335; CY 2016 = 334).
- **The Children's Dental Clinic will provide 17,000 visual oral screenings annually in Sedgwick County schools.** (SCDOH: CY 2018 = 18,662; CY 2017 = 17,470; CY 2016 = 15,204).
- **The Children's Dental Clinic will provide services to decrease oral decay in at least 90% of clients seen in the clinic.** (New goal established for 2019-20 grant period.)
- **The Children's Dental Clinic will provide sealants to at least 90% of clients needing sealants.** (New goal established for 2019-20 grant period.)
- **The Children's Dental Clinic will provide school screenings for 95% of Sedgwick County schools that have no expanded care providers on site.** (New goal established for 2019-20 grant period.)

### MCH Healthy Babies:

Program: Healthy Babies

#### By June 30, 2020:

- **Decrease the number of preterm births to Healthy Babies program participants to 10% or lower.** (SCDOH: CY 2018 = 7.6%; CY 2017 = 15.6%; CY 2016 = 12.88%).
- **Decrease low birth weight births to Healthy Babies program participants to 7.87% or lower.** (SCDOH: CY 2018 = 10.2%; CY 2017 = 12%; CY 2016 = 9.52%).
- **Increase the proportion of Healthy Babies participants who engage in safe sleep behaviors (which includes the space in which the child is placed to sleep, placing baby on their back for sleeping, removing all toys, blankets, bumper padding, etc. from the sleep environment, as well as if anyone smokes in the home) to 90%.** (SCDOH: CY 2018 = 95.6%; CY 2017 = 94%; CY 2016 = 88%).
- **Increase the proportion of Healthy Babies Healthy Start women and children participants with health insurance to 75%.** (New goal established for 2019-20 grant period.)
- **Increase the proportion of Healthy Babies Healthy Start women participants who have a documented reproductive life plan to 90%.** (New goal established for 2019-20 grant period.)
- **Increase the proportion of Healthy Babies Healthy Start women participants who receive a postpartum visit to 90%.** (New goal established for 2019-20 grant period.)

## MCH Care Coordination (MCHCC):

Program: MCH Care Coordination

### By June 30, 2020:

- **Preconception counseling post-tests will show that as a result of the counseling, 95% of MCHCC clients age 22 or under have an improved understanding of the requirements to create and maintain a healthy lifestyle which will decrease the risk of low birth weight deliveries, premature labor, and birth defects.** (SCDOH: CY 2018 = 99%; CY 2017 = 98.5%; CY 2016 = 95%).
- **Ensure that 95% of MCHCC clients who are pregnant receive prenatal care at their provider of choice to decrease likelihood of low birth weight deliveries, premature labor, and birth defects.** (SCDOH: CY 2018 = 100%; CY 2017 = 100%; CY 2016 = 100%).
- **Assure that 90% of MCHCC clients who identify as smokers receive a referral to KanQuit Hotline which will decrease the risk of low birth weight deliveries, premature labor, and birth defects.** (No baseline – new objective began July '18; SCDOH: July – Dec '18 = 100%).

## #17 - Immunization Action Plan (IAP):

Program: Immunizations

### By June 30, 2020:

- **Reduce missed opportunities for vaccination to 10% or less among children up to age 2 served through SCDOH vaccination clinics. Missed opportunities % = # of missed opportunities ÷ # of clients served. Measuring children at ages 24-35 months.** (SCDOH: CY 2018 = 5.76%; CY 2017 = 9.05%; CY 2016 = 10.75%).
- **Assure progress towards eliminating vaccine preventable diseases by providing at least one educational presentation to immunization providers on ACIP recommendations, the VFC Program and WebIZ.** {SCDOH: CY 2018 = 4 presentations; CY 2017 = 1 presentation (Immunization staff provided training to school nurses during the Annual School Nurse In-Service Conference held in April '17).}