

HAWAII

The MCH Federal-State Partnership

The Title V program is administered by the Family Health Services Division, Hawaii State Department of Health. The Title V program administers the following programs: maternal and child health, children with special health needs, IDEA Part C and WIC programs.

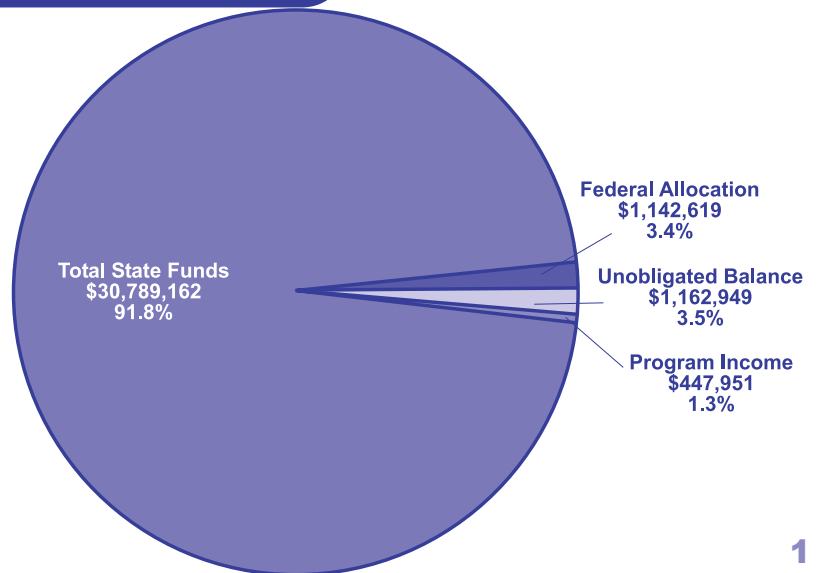
Title V Federal-State Block Grant Expenditures by Number of Individuals Served and Population Group⁴

Populations Served	Number of Individuals Served	Expenditures FY '98
Pregnant Women	5,665	\$4,775,449
Infants (<1 year)	17,341	\$6,970,134
Children (1 to 22 yrs)	71,170	\$10,402,783
CSHCN (Special Needs)	8,567	\$7,586,539
Others ³	29,600	\$3,296,984
Administration		\$510,792
TOTALS	132,343	\$33,542,681

*State Population⁵
1,193,001*

*Live Births⁵
17,583*

Title V Federal-State Block Grant Expenditures⁴ by Source of Funds



MCH PARTNERSHIP FUNDS—FY 98²

Title V Federal-State Block Grant:

\$33,542,681

Other Title V Grant Programs:

\$1,500,556

Other MCH Grant Programs:

\$ 0

TOTAL MCH Partnership Funds

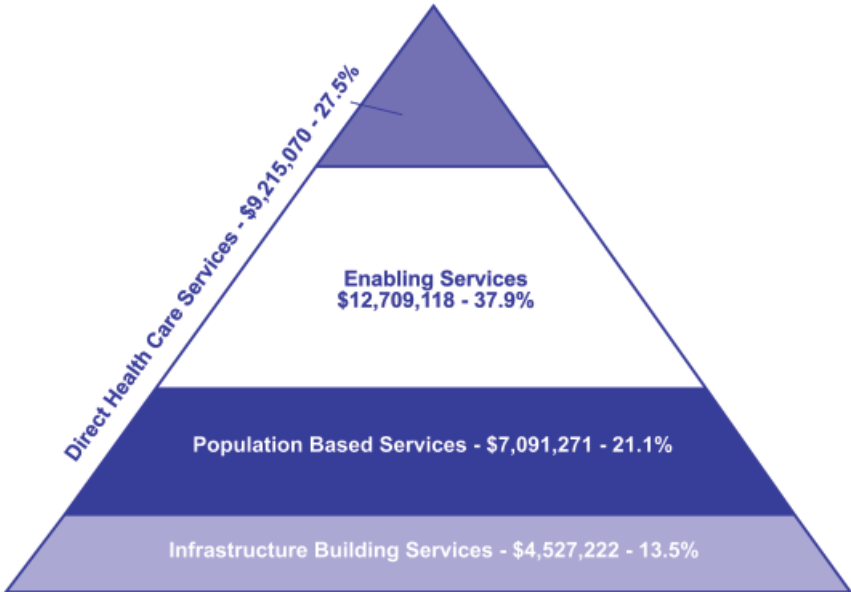
\$35,043,237

Title V - Selected National MCH Performance Measures⁷	State 1998 Results	State Year 2000 Goal
Number of specialty services for Children with Special Health Care Needs (CSHCN)	7 of 9	7 of 9
Percent of newborns screened for 4 major genetic disorders	99.7%	99%
Percent of children immunized (ages 19-35 months) against 9 diseases	80%	85%
Rate of births to teens aged 15-17 years (per 1,000 teens aged 15-17 years)	27.8	25
Rate of deaths to children aged 1-14 caused by motor vehicle crashes (per 100,000 children)	6.4	4
Percent of mothers who breast fed their infants at time of hospital discharge	72.3%	75%
Percent of newborns screened for hearing impairment before hospital discharge	94%	97%
State assurance of family participation in CSHCN programs & policies	10 of 18	12 of 18
Percent of very low birth weight live births	1.8%	1%
Percent of infants born to women who received first trimester prenatal care	81.3%	83%

Title V - National MCH Outcome Measures⁷	State 1998 Results	State Year 2000 Goal
Infant mortality rate (per 1,000 live births)	6.7	5.5
Ratio of black to white infant mortality	1.3	1.0
Neonatal mortality rate (per 1,000 live births)	5.1	3.8
Postneonatal mortality rate (per 1,000 live births)	1.6	1.7
Perinatal mortality rate (per 1,000 live births)	6.2	5
Child death rate (per 100,000 children aged 1-14)	18.9	16

Title V - Selected State-Determined MCH Performance Measures⁷	State 1998 Results	State Year 2000 Goal
Public school children 12-17 years old who consumed alcohol in past 30 days (grades 9 to 12)	40.3%	38%
Public school children 12-17 years old who smoked tobacco products in past 30 days	29.2%	27%
Child abuse/neglect cases of children from birth to 5 years old (per 1,000 children)	9.7	8.5
Prevalence of neural tube defects among fetal deaths and live births (per 10,000 live births)	9.08	8.0

Title V Federal-State Block Grant Expenditures⁴ by Category of Service⁶



FOR MORE INFORMATION ON TITLE V:

Title V Program, contact:

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Title V Program's services for Children with Special Health Care Needs, contact:

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HAWAII

Selected FY 98 Title V and Other MCH Grant Annotations

Title V—SPECIAL PROJECTS OF REGIONAL & NATIONAL SIGNIFICANCE (SPRANS)

Enhanced Community Health Options (ECHO) Ko’olauloa Healthy Tomorrows, Hawaii Department of Health, Honolulu, \$49,988 (SPRANS-MCHIP-Healthy Tomorrows)

The Ko’olauloa Healthy Tomorrows project seeks to address system problems that currently exist and to improve access to child health services for families residing in the area. This goal will be realized through increased and coordinated outreach services, promotion of an integrated system of comprehensive health care, improved continuity of care through home visiting, increased paternal participation in accessing health care, and provision of developmental/psychological assessments of at-risk children. The project will work with the existing health care system and the community to provide a community-based, family-centered, comprehensive, and culturally relevant system of care.

Health and Education Collaboration Project, Hawaii Medical Association, Honolulu, \$225,000 (SPRANS-MCHIP-Integrated Services)

The Health and Education Collaboration Project intends to use interprofessional collaboration as a personnel preparation model. It will train health, social service, and education professionals to work collaboratively with the ultimate goal of providing children with special health care needs and their families, particularly those from underserved populations, with family-centered, community-based, and coordinated care. Because of the absence of an effectual collaborative system of services, the project will determine ways

professionals can help families through the system by (1) working with the National Commission on Leadership in Interprofessional Education to identify the essential elements of collaborative practice; (2) training a regional staff of the Healthy and Ready to Learn (HRTL) program to implement and field test the practice of collaboration in a nationally recognized service program; (3) creating linkages between HRTL and university training programs; and (4) disseminating information on the essential elements of collaborative training and service provision at the regional, State, and national levels.

Malama Pono: Family Professional Partnership in the Medical Home, Hawaii Medical Association, Honolulu, \$150,000 (SPRANS-MCHIP-Integrated Services)

Barriers to achieving functional, comprehensive, family-centered medical homes for children with special health care needs have been identified. Malama Pono will develop, implement, and evaluate strategies to overcome these barriers in three target communities in Hawaii. Managed care organizations and community stakeholders including consumers will participate in the project. Project products will include a set of tested strategies for achieving medical homes in communities, and a set of outcome indicators and measurement strategies.

State Systems Development Initiative, Hawaii Department of Health, Honolulu, \$100,000 (SPRANS-MCHIP-SSDI)

The purpose of the Development of Comprehensive, Community- Based Systems of Care in Hawaii (SSDI) Project is to facilitate the linkage of family-centered, community-based systems of care by developing data linkages and by providing technical assistance to communities. The primary focus of the SSDI project in Hawaii is on interagency collaboration. By improving interagency collaboration, the Family Health Services Division also seeks to improve state support for communities involved in systems development.

Title V—COMMUNITY INTEGRATED SERVICE SYSTEMS (CISS—Title V)

Keiki Care: Nurturing Hawaii’s Children, Hawaii Department of Health, Honolulu, \$50,000 (CISS-CISS-Child Care Program)

The overall project goal is to develop an integrated preschool service system that responds to the needs of these preschool children. Services will be voluntary and will be provided to the greatest extent possible in natural child care environments identified by families. Goals and objectives include collaborating with the Department of Education to develop appropriate service options for children; working with preschool and child care programs to find appropriate placement options in natural environments for children with emotional-behavioral disorders; and providing training, support, and consultation/technical assistance for preschool, child care, and Head Start providers and family members to meet the needs of children with emotional-behavioral disorders and other developmental delays.

Title V—ABSTINENCE EDUCATION PROGRAM

Smart Moves with Abstinence Only Education, Department of Health, Family Health Services Division, Honolulu, \$131,519 (Abstinence Ed)

The project goals are to improve the health of our youth through abstinence-only education and to facilitate parent/significant adult and local community interest and action in adolescent health. The Boys and Girls Club’s science-based research curriculum, Smart Moves, will target 9-12 year old young people in site in each of the four State counties. Activities will include: education, skill building, social group session/events; inclusion of parents/significant adults, peer leaders, and mentors; community building through advisory boards to generate interest and program resources; and working with the media to promote the program and activities related to adolescent wellness.

Other Title V (non block) Grant Programs: **\$1,500,556**

Other MCH Grant Programs: **\$0**

TOTAL:
\$1,500,556

Selected FY 98 Title V and Other MCH Grant Annotations

Title V—SPECIAL PROJECTS OF REGIONAL & NATIONAL SIGNIFICANCE (SPRANS)

- Hawaii Fluoridation Systems
Development Project, Hawaii
Department of Health, Honolulu,
\$30,226 (SPRANS-MCHIP-Fluoride)
- Managed Care in Hawaii: Impact on
Children with Special Health Needs,
Hawaii Department of Health, Honolulu,
\$0 (SPRANS-MCHIP-Managed Care/
Health Care Reform)
- Maternal and Child Health
Interdisciplinary Leadership Education
for Health Professionals Caring for
Children With Neurodevelopmental and
Related Disabilities, University of Hawaii
at Manoa, Honolulu, \$441,500
(SPRANS-Training-LEND/Leadership Ed
Neuro Dev)
- Maternal and Child Health Training
Program, University of Hawaii, Manoa,
Honolulu, \$322,323 (SPRANS-Training-
School of Public Health)