

MARYLAND

The MCH Federal-State Partnership

The Maryland Department of Health and Mental Hygiene is the designated Title V Agency in the State. There is no designated MCH Administration, however, all of the MCH program components are in the Community and Public Health Administration.

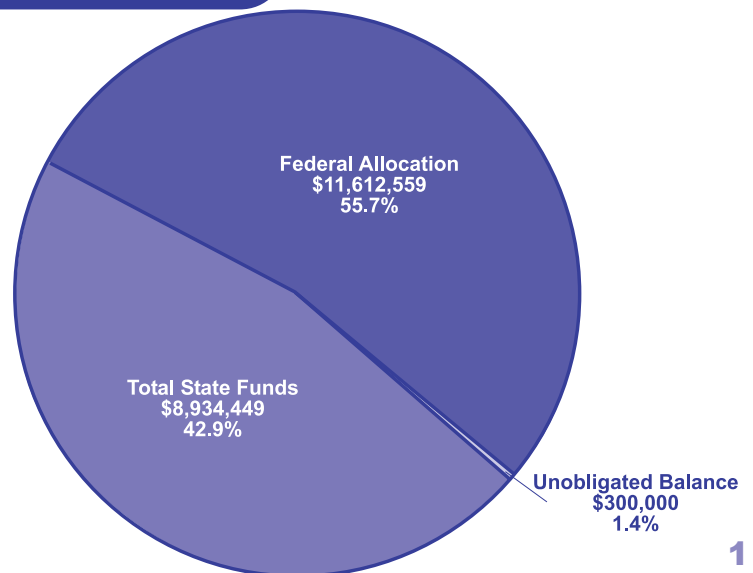
Title V Federal-State Block Grant Expenditures by Number of Individuals Served and Population Group⁴

Populations Served	Number of Individuals Served	Expenditures FY '98
Pregnant Women	70,151	\$4,347,678
Infants (<1 year)	69,214	\$0
Children (1 to 22 yrs)	57,864	\$8,907,414
CSHCN (Special Needs)	14,125	\$7,394,570
Others ³	0	\$0
Administration		\$197,346
TOTALS	211,354	\$20,847,008

*State Population⁵
5,134,808*

*Live Births⁵
71,972*

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



MCH PARTNERSHIP FUNDS—FY 98²

Title V Federal-State Block Grant:

\$20,847,008

Other Title V Grant Programs:

\$7,055,665

Other MCH Grant Programs:

\$5,092,177

TOTAL MCH Partnership Funds

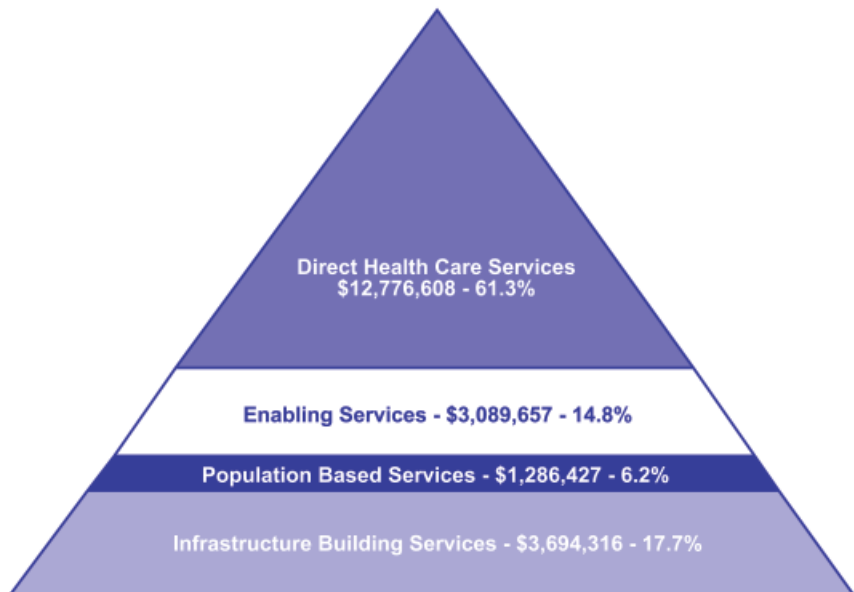
\$32,994,850

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)	8 of 9	8 of 9
Percent of newborns screened for 4 major genetic disorders	109%	100%
Percent of children immunized (ages 19-35 months) against 9 diseases	80%	84%
Rate of births to teens aged 15-17 years (per 1,000 teens aged 15-17 years)	28.1	28.5
Rate of deaths to children aged 1-14 caused by motor vehicle crashes (per 100,000 children)	2.4	3.1
Percent of mothers who breast fed their infants at time of hospital discharge	58.1 ⁹⁷	65%
Percent of newborns screened for hearing impairment before hospital discharge	7.9%	50%
State assurance of family participation in CSHCN programs & policies	6 of 18	12 of 18
Percent of very low birth weight live births	2% ⁹⁷	1.9%
Percent of infants born to women who received first trimester prenatal care	88.9% ⁹⁷	90.0%

Title V - National MCH Outcome Measures⁷	State 1998 Results	State Year 2000 Goal
Infant mortality rate (per 1,000 live births)	8.6 ⁹⁷	7.8
Ratio of black to white infant mortality	3 ⁹⁷	1.9
Neonatal mortality rate (per 1,000 live births)	6.2	5.0
Postneonatal mortality rate (per 1,000 live births)	2.4 ⁹⁷	2.3
Perinatal mortality rate (per 1,000 live births)	14.4 ⁹⁷	12.4
Child death rate (per 100,000 children aged 1-14)	23.1 ⁹⁷	22.5

Title V - Selected State-Determined MCH Performance Measures⁷	State 1998 Results	State Year 2000 Goal
Hospitalization for asthma rate among children aged 0-9 (per 10,000)	61.9 ⁹⁷	45
Women who do not smoke during pregnancy	88.9%	90%
Perinatal health care organizations participating in statewide perinatal data system	92%	100%
Death rate of children aged 1-4 caused by sickle cell disease (per 1,000)	7 ⁹⁷	4

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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 Maryland Department of Health and Mental Hygiene
 201 W. Preston Street
 Baltimore, MD 21201
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Title V Program's services for Children with Special Health Care Needs, contact:
 Susan Panny, M.D.
 Director, Office of Genetics and Children with Special Health Care Needs
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 201 W. Preston Street
 Baltimore, MD 21201
 Phone: (410) 767-6730
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* Data not available

MARYLAND

Selected FY 98 Title V and Other MCH Grant Annotations

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

Perinatal Care System Development to Reduce Infant Mortality on Maryland's Eastern Shore, Maryland Department of Health and Mental Hygiene, Baltimore, \$150,000 (SPRANS-MCHIP-PN)

The Maryland MCHIP Project will establish an effective, regional perinatal care system in a five-county area on the Eastern Shore. Perinatal health indicators including infant mortality will improve as a result. Key objectives of the project are to establish formal systems structures, to develop quality of care standards, and to engage the community in promoting the health of woman and infants. Formal systems structures will include a Regional Perinatal Board, a Regional Perinatal Coordinator, and local Healthy Mothers/Healthy Babies coalitions. Continuous quality improvement activities, provider education programs, and the development of preconception health and smoking cessation interventions are the primary activities that will be conducted. Community involvement and coalition building result from strategies based on a community-based needs assessment.

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

Reducing Preterm Birth by Bacterial Vaginosis Screening, The Johns Hopkins University, Baltimore, \$265,518 (CISS-Research)

The goal of this community-based intervention study is to determine the effect of a screening/treatment program for bacterial vaginosis (BV) that will be integrated into existing prenatal

services. The program will identify and treat 2,500 asymptomatic and symptomatic pregnant African-American women with BV from four east Baltimore community clinics to reduce preterm and low-birthweight births. Partners of asymptomatic women in the treatment arm will also be assessed and treated whenever possible.

Title V—ABSTINENCE EDUCATION PROGRAM

Maryland Abstinence Education and Coordination, Maryland Department of Health and Mental Hygiene, Office of Children's Health, Baltimore, \$535,712 (Abstinence Ed)

The goal of the Maryland Abstinence Education Program is to reduce the rates of sexual activity among pre-teens and early adolescents. Activities include developing new abstinence education programs in the context of after school programs, supporting a statewide abstinence media campaign, establishing an abstinence education coordinating committee, forming an Advisory Group, and evaluating the Program.

EMERGENCY MEDICAL SERVICES FOR CHILDREN (EMSC)

Maryland EMSC Partnership, Maryland Institute for Emergency Medical Services Systems, Baltimore, \$99,539 (EMSC-PRTNER)

This project plans to establish partnerships and increase collaboration with existing partners to enhance the emergency medical services for children (EMSC) program at the Maryland Institute for Emergency Medical Services Systems (MEIMSS). This effort will become an integral part of the statewide emergency medical services (EMS) and EMSC programs in Maryland. These partnerships will focus on two specific projects: (1) Expanding injury prevention initiatives at the State, regional, and local levels based on injury patterns, and creating a written and online resource document for EMS providers; and (2) developing a faculty group and instructor resources based on existing continuing education workshops on children with

special health care needs. Training conferences will be held in the five regions of the State to increase the availability of the workshop across Maryland.

HEALTHY START

Baltimore City Healthy Start, Baltimore City Health Department, Baltimore, \$4,992,638 (Healthy Start-Mentor)

The Baltimore City Healthy Start Project has had the goal of reducing the infant mortality (IMR) of 20.1 in the Healthy Start Project Area by 50 percent over a 5-year period during the demonstration phase of the Healthy Start project. Baltimore's IMR is one of the highest rates among U.S. cities, attributable to barriers to care and high-risk lifestyles resulting in the lack of early and continuing prenatal care and low birthweight births. Baltimore's Healthy Start activities to address these problems during Phase II of the program include the provision of case management and care coordination services to women in two target areas within the project area, offering very intensive door-to-door outreach and recruitment to ensure all pregnant women are enrolled, and operating two Neighborhood Healthy Start Centers providing a host of support and collocated services to promote healthy birth outcomes.

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

- Advancing Education and Public Policy Development for Women's Health and Perinatal Concerns, Johns Hopkins University, Baltimore, \$675,000 (SPRANS-Training-Continuing Education)
- Advancing Family-Centered Care: A Training and Technical Assistance Project, Institute for Family-Centered Care, Bethesda, \$0 (SPRANS-MCHIP)
- Advancing Mental Health Services in Schools, University of Maryland, Baltimore, \$274,567 (SPRANS-MCHIP-Mental Health of School-Age Children and Adolescents)

Other Title V (non block) Grant Programs:

\$7,055,665

Other MCH Grant Programs:

\$5,092,177

TOTAL:

\$12,147,842

Selected FY 98 Title V and Other MCH Grant Annotations

- Alliance of Genetic Support Groups, Alliance of Genetic Support Groups, Chevy Chase, \$186,728 (SPRANS-Genetics)
- Behavioral Pediatrics Training at Johns Hopkins, Johns Hopkins University, Baltimore, \$110,485 (SPRANS-Training-Behavioral Pediatrics)
- Behavioral Pediatrics Training, University of Maryland at Baltimore, Baltimore, \$112,631 (SPRANS-Training-Behavioral Pediatrics)
- Children's Safety Network Economics and Insurance Resource Center, National Public Services Research Institute, Landover, \$43,750 (SPRANS-MCHIP)
- Data Utilization and Enhancement, The Johns Hopkins University, Baltimore, \$25,000 (SPRANS-MCHIP-Data)
- Development of a Comprehensive Maternal Child Health Service System, Maryland Department of Health and Mental Hygiene, Baltimore, \$100,000 (SPRANS-MCHIP-SSDI)
- Evaluating the Cost-Effectiveness of a Statewide Program of Coordinated Comprehensive Care for Children With Sickle Cell Disease, Maryland Department of Health and Mental Hygiene, Baltimore, \$140,000 (SPRANS-Genetics)
- Evaluation of Hawaii's Healthy Start Program, Johns Hopkins University, Baltimore, \$125,301 (SPRANS-Research)
- Graduate Education in Adolescent Health Care, University of Maryland at Baltimore, Baltimore, \$93,680 (SPRANS-Training-Adolescent Health)
- Healthy Tomorrows Parenting Program, Johns Hopkins Bayview Medical Center, Baltimore, \$50,000 (SPRANS-MCHIP-Healthy Tomorrows)
- Healthy Tomorrows Program for Children, Spanish Catholic Center, Inc., Silver Spring, \$50,000 (SPRANS-MCHIP-Healthy Tomorrows)
- Injury Prevention in an Urban Pediatric Clinic, Johns Hopkins University, Baltimore, \$322,922 (SPRANS-Research)
- Maryland Perinatal Outcome Review Program, Maryland Department of Health and Mental Health, Baltimore, \$140,310 (SPRANS-MCHIP-FIMR)
- Maternal and Child Health Science Consortium, Johns Hopkins University, Baltimore, \$277,500 (SPRANS-Training-Continuing Education)
- Maternal and Child Health Social Work Training Project, University of Maryland at Baltimore, Baltimore, \$125,365 (SPRANS-Training-Social Work)
- Maternal and Child Health Training Program in Neurodevelopmental Disabilities, The Johns Hopkins University, Baltimore, \$1,368,969 (SPRANS-Training-LEND/Leadership Ed Neuro Dev)
- National Policy Center on Managed Care Policy and Children with Special Health Care Needs, Johns Hopkins University, Baltimore, \$350,000 (SPRANS-MCHIP-Managed Care/COOP)
- New Bridges to Improved Child Health, Department of Women's and Children's Services, Baltimore, \$50,000 (SPRANS-MCHIP-Healthy Tomorrows)
- Partnership for Genetic Services MARHGN Pilot Program, Alliance of Genetic Support Groups, Chevy Chase, \$107,886 (SPRANS-Genetics)
- Poverty and the Ecology of African-American Children, Johns Hopkins University, Baltimore, \$331,473 (SPRANS-Research)
- Preventing Mental Health Problems in Ill Children, The Johns Hopkins University, Baltimore, \$368,640 (SPRANS-Research)
- Promoting Psychosocial Child Health Supervision and Care, Johns Hopkins University, Baltimore, \$12,000 (SPRANS-Training-Continuing Ed/Collaborative Office Rounds)
- Three-Generation Intervention Among Adolescent Mothers, University of Maryland School of Medicine, Baltimore, \$200,523 (SPRANS-Research)
- Training Program in Maternal and Child Health, Johns Hopkins University, Baltimore, \$411,705 (SPRANS-Training-School of Public Health)

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

- Health Systems Development in Child Care, Department of Human Resources, Baltimore, \$50,000 (CISS-CISS-Child Care Program)