

UTAH

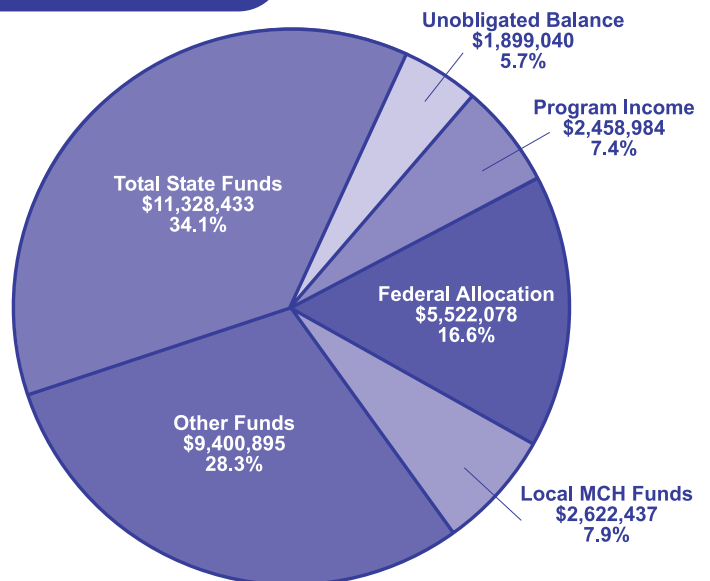
The MCH Federal-State Partnership

The State Health Department's Division of Community and Family Health Services incorporates all Title V programs in Utah as mandated by state and federal law, as well as the Individuals with Disabilities Education Act (IDEA) - Part C and the State WIC program.

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	7,259	\$5,103,413	<i>State Population⁵ 2,099,758</i>
Infants (<1 year)	43,116	\$4,692,813	
Children (1 to 22 yrs)	9,067	\$11,320,370	
CSHCN (Special Needs)	4,320	\$9,517,060	
Others ³	3,851	\$1,377,519	
Administration		\$1,210,692	
TOTALS	67,613	\$33,221,867	<i>Live Births⁵ 45,165</i>

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



MCH PARTNERSHIP FUNDS—FY 98²

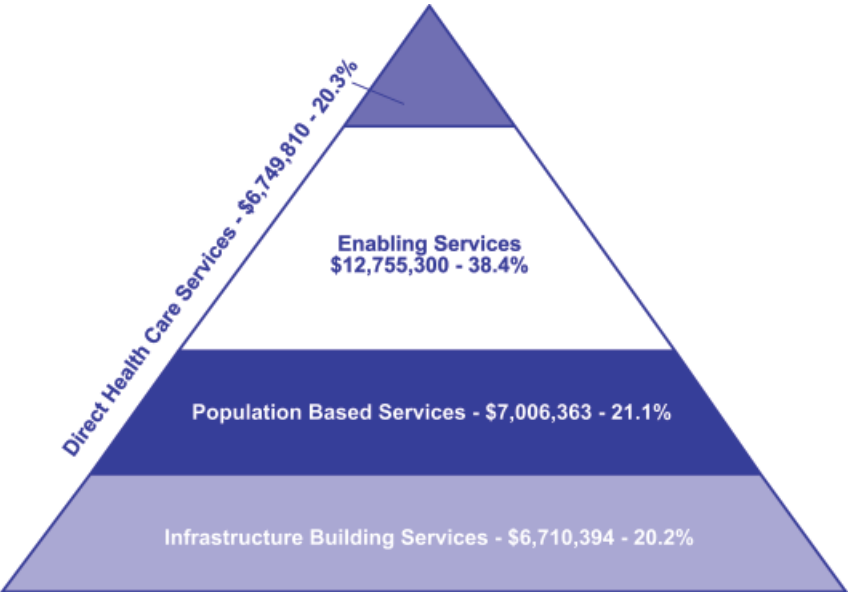
Title V Federal-State Block Grant:	\$33,221,867
Other Title V Grant Programs:	\$795,051
Other MCH Grant Programs:	\$511,889
TOTAL MCH Partnership Funds	\$34,528,807

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	7 of 9
Percent of newborns screened for 4 major genetic disorders	98.3%	98.5%
Percent of children immunized (ages 19-35 months) against 9 diseases	71% ⁹⁷	80%
Rate of births to teens aged 15-17 years (per 1,000 teens aged 15-17 years)	24.8 ⁹⁷	24.5
Rate of deaths to children aged 1-14 caused by motor vehicle crashes (per 100,000 children)	7.8 ⁹⁷	7.78
Percent of mothers who breast fed their infants at time of hospital discharge	81.5% ⁹⁷	83%
Percent of newborns screened for hearing impairment before hospital discharge	64.6% ⁹⁷	95%
State assurance of family participation in CSHCN programs & policies	12 of 18	13 of 18
Percent of very low birth weight live births	1.1% ⁹⁷	1.0%
Percent of infants born to women who received first trimester prenatal care	83% ⁹⁷	83.2%

Title V - National MCH Outcome Measures⁷	State 1998 Results	State Year 2000 Goal
Infant mortality rate (per 1,000 live births)	5.8 ⁹⁷	5.7
Ratio of black to white infant mortality	2 ⁹⁷	2
Neonatal mortality rate (per 1,000 live births)	3.6 ⁹⁷	3.4
Postneonatal mortality rate (per 1,000 live births)	2.2 ⁹⁷	2.0
Perinatal mortality rate (per 1,000 live births)	8.5 ⁹⁷	8.3
Child death rate (per 100,000 children aged 1-14)	26.5 ⁹⁷	26.47

Title V - Selected State-Determined MCH Performance Measures⁷	State 1998 Results	State Year 2000 Goal
Use of bicycle helmets among bicyclists 5-12 years of age	12.65% ⁹⁷	22.0%
Use of vehicle safety restraints among child occupants under 9 years of age	68.7% ⁹⁷	78%
Neural tube defects (per 10,000 live births)	6.7 ⁹⁷	6.4
Pregnant women with adequate weight gain who deliver live born infants	81.3% ⁹⁷	81.6%

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



FOR MORE INFORMATION ON TITLE V:

Title V Program, contact:
 Kathleen B. Glasheen
 Director, Bureau of Maternal and Child Health
 PO Box 142001
 Salt Lake City, UT 84114-2001
 Phone: (801) 538-6869
 Fax: (801) 538-9409

Title V Program's services for Children with Special Health Care Needs, contact:
 Vera Frances Tait
 Director, Bureau of CSHCN
 PO Box 144610
 Salt Lake City, UT 84114-4610
 Phone: (801) 584-8239
 Fax: (801) 584-8488

Selected FY 98 Title V and Other MCH Grant Annotations

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

Opening Doors into Rural Communities, Utah State University, Logan, \$199,993 (SPRANS-MCHIP-Integrated Services)

Opening Doors into Rural Communities represents the collective work of a consortium comprising four rural communities (Lewiston, ID; Pocatello, ID; Moberly, MO; and Augusta, ME) coordinated by Opening Doors to enhance the development of service integration strategies that address the four recommendations by the Federal Interagency Coordinating Council. The goals of the project are to (1) highlight existing service integration strategies already in place within rural communities; (2) develop action plans that address rural community needs; (3) evaluate effectiveness based on supporting medical homes, adequate insurance coverage, family satisfaction, cultural competence, coordination, and community-based systems; and (4) develop a materials package that can be disseminated.

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

Health Systems Development in Child Care, Utah Department of Health, Salt Lake City, \$50,000 (CISS-CISS-Child Care Program)

This project will stimulate and support collaborative, coordinated statewide and community-based efforts to ensure safe, healthy, developmentally appropriate child care environments for all children, including children with special health needs. Funds from this grant will be used to hire a nurse who will identify existing resources to organize a

curriculum and systems to provide training, on Child Care Facilities, Environmental Health and Safety.

Title V—ABSTINENCE EDUCATION PROGRAM

Abstinence Education Program for Utah Youth, Utah Department of Health, Division of Community and Family Health Services, Salt Lake City, \$325,666 (Abstinence Ed)

Utah's Abstinence Education Program will target youth, both boys and girls, between the ages of 9 and 14 years of age through community-based projects. Program goals include reducing adolescent sexual activity, adolescent pregnancy and birth rates, and adolescent sexually transmitted diseases. Two priority needs have been identified: 1) abstinence education for younger youth, boys and girls, between the ages of 9 and 14 years of age, incorporating strategies that reduce risk factors for adolescent sexual activity, and 2) the development of education programs for parents of youth in the target ages to provide knowledge, skills, and techniques to facilitate discussions of abstinence and related issues between parents and their children.

EMERGENCY MEDICAL SERVICES FOR CHILDREN (EMSC)

National Emergency Medical Services for Children Data Analysis Resource Center (NEDARC), University of Utah, Salt Lake City, \$289,047 (EMSC-Enhancement)

The University of Utah School of Medicine will establish the National EMSC Data Analysis Resource Center (NEDARC) to provide technical assistance with data management and analysis. The project will identify relevant data sets that are currently available or under development in each of the States, including prehospital data sets, hospital files, and trauma registries. Technical assistance will be provided to State EMS agencies, State Maternal and Child Health Bureaus, and other agencies in evaluating EMS and EMSC by using relevant data sets to

generate informative reports. NEDARC will establish an Internet World Wide Web server, and all of the project's educational materials will be provided on that server.

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

- Fluoridation of Water Supplies in Salt Lake City and County, Salt Lake City County Health Department, Salt Lake City, \$30,000 (SPRANS-MCHIP-Fluoride)
- Transportable MCH Information Internet Data Query Module, Utah Department of Health, Salt Lake City, \$89,392 (SPRANS-MCHIP-Data)
- Utah's State Systems Development Initiative Project, Utah Department of Health, Salt Lake City, \$100,000 (SPRANS-MCHIP-SSDI)

EMERGENCY MEDICAL SERVICES FOR CHILDREN (EMSC)

- Emergency Medical Services for Children/State Partnership Grant, Utah Department of Health, Salt Lake City, \$75,000 (EMSC-PRTNER)
- EMSC With Special Health Care Needs, Utah Department of Health, Salt Lake City, \$147,842 (EMSC-Target)
- Epidemiology and Cost of Emergency Medical Services Provided to Children, University of Utah, Salt Lake City, \$ (EMSC)

Other Title V (non block) Grant Programs: **\$795,051**

Other MCH Grant Programs: **\$511,889**

TOTAL: **\$1,306,940**