

**Title V Maternal and Child Health Services Block Grant Program  
NATIONAL PERFORMANCE MEASURES**

**Performance Measure #1:**

*The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their State-sponsored newborn screening programs.*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. Provide biochemical screening of newborns for mandated conditions, and, via Tandem Mass Spectrometry (TMS), screen for certain other disorders for which screening is not mandated.	X	X	X	X
2. Refer infants with positive results for care coordination if there is no physician of record listed or appointment(s) for repeat screenings have been missed.		X		
3. Refer families of all infants diagnosed with sickle cell disease to 1 of 7 community-based sickle cell organizations, for education and counseling.		X		
4. Refer infants diagnosed with cystic fibrosis to 1 of 2 accredited Cystic Fibrosis Centers in the State for genetic counseling and follow-up care.		X		
5. Facilitate communication with Hispanic families regarding follow-up care using a language line.		X	X	
6. Manage the Alabama Voice Response System, which enables providers to obtain a facsimile copy of the newborn screening results via telephone at any time.				X
7. Provide funding to the Civitan-Sparks Clinics, affiliated with the University of Alabama at Birmingham, to supply medical food and formula for persons with inherited inborn errors of metabolism.				X

**Performance Measure #2:**

*The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. Implement Alabama's 2010 Action Plan for Children and Youth with Special Health Care Needs (CYSHCN).				X
2. Facilitate collaboration and partnerships through Children's Rehabilitation Service (CRS's) State and local parent advisory committees.		X	X	X
3. Facilitate collaboration and partnerships through training activities.		X	X	
4. Facilitate collaboration and partnerships through publication of a newsletter.			X	
5. Facilitate collaboration and partnerships through employment of parent consultants.		X		
6. Support the growth of Family Voices of Alabama (FVA), financially and philosophically, including utilization of the CRS/FVA database.				X
7. Include youth and families of CYSHCN as co-presenters at all training events.			X	
8. Collaborate with FVA on activities associated with its Maternal and Child Health Bureau-funded Family to Family Health Information Center grant.				X

**Performance Measure #3:**

*The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. Continue to implement Alabama's 2010 Action Plan for CYSHCN.				X
2. Feature medical home concept in newsletters and the CRS Family Guide.			X	
3. Provide ongoing educational and CRS-related materials to enhance partnerships with primary care physicians recognized as CRS courtesy staff.			X	
4. Identify physicians willing to accept CYSHCN and assist families at the local level with linkage to medical homes.				X
5. Continue to promote communication with the medical home by sending reports of clinic visits, recommendations, and service summaries to physicians.		X		
6. Collaborate with care coordinators on medical homes through the newly awarded State Implementation Grant for Systems of Services for CYSHCN.				X
7. Continue to collaborate on advisory committees and work groups related to My Alabama (formerly the Camellia Project).				X

**Performance Measure #4:**

*The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. Continue to implement Alabama's 2010 Action Plan for CYSHCN.				X
2. Refer 100% of children with no health insurance enrolled with CRS to Supplemental Security Income (SSI), Medicaid, or Alabama's Children's Health Insurance Program (called "ALL Kids") and assist with applications as needed.		X		
3. Identify 100% of CRS clients for whom it is appropriate to pay insurance premiums and provide this service.		X		
4. Continue implementation of the CRS work plan for the Health Insurance Portability and Accountability Act (HIPAA) and provide training to new and current staff.			X	X
5. Continue collaboration with ALL Kids to implement an expanded benefit package for CYSHCN enrolled in CRS (ALL Kids Plus) and to advocate for expanded services for all CYSHCN enrolled in basic ALL Kids.		X		X
6. Advocate for the unique needs of CYSHCN, especially those with more complex conditions and/or functional limitations and those with above-routine need/use of services, and for the incorporation of necessary services in basic insurance plans.				X
7. Meet regularly with Alabama Medicaid and as needed with ALL Kids to address policies and issues that impact CYSHCN in the State.		X		X
8. Maintain a pharmacy fee schedule for better utilization of Title V funds in meeting the rising cost of medications for CYSHCN who are CRS enrollees.				X
9. Continue development of a manual and training for staff who pay bills in local offices so they may better assist families in optimizing third party resources.		X		X

**Performance Measure #5:**

*Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. Implement Alabama's 2010 Action Plan for CYSHCN and expand activities to involve local communities.				X
2. Serve Alabama CYSHCN in their communities through local CRS offices; modify and update CRS electronic client information management system (CHARMS).	X	X		X
3. Support the Alabama Early Intervention System (EIS) by increasing access to EIS services for eligible individuals.		X		
4. Provide CRS-related outreach to the staff in Social Security Administration offices in Alabama.			X	
5. Work cooperatively with other agencies to support the Universal Newborn Hearing Screening Program (discussed under National Performance Measure [NPM] 12) and also to support Alabama's expanded newborn screening initiatives through appropriate follow-up care.	X			X
6. Collaborate with ongoing emergency preparedness efforts related to CYSHCN and their families (see Section III.A).		X	X	X
7. Continue participation with the UAB-Maternal and Child Health (MCH) Collaborative.				X
8. Promote cultural competence in the system of care for CYSHCN and their families through collaborations and partnerships.				X
9. Continue to implement needs assessment activities.				X

**Performance Measure #6:**

*The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. Continue to implement Alabama's 2010 Action Plan for CYSHCN.				X
2. Facilitate collaboration and partnerships through support of youth on the CRS Youth Advisory Committee.		X		X
3. Facilitate collaboration and partnerships through training activities and articles in the family newsletter.		X	X	
4. Collaborate with Vocational Rehabilitation Service to implement interdepartmental plan to promote transition and assure that all transition-age youth have a transition plan (part of comprehensive plan of care development).		X		X
5. Have youth with special health care needs as co-presenters at all transition-related trainings.		X	X	
6. Expand transition materials and resources including public relations tools, brochures, notebooks, transition guides, etc.		X	X	
7. Collaborate with Vocational Rehabilitation Service, schools, and local community resources to hold Transition Information Expos or other activities in each district.		X	X	X
8. Assure that transition planning is sensitive to the unique needs of all CYSHCN, especially those with more complex conditions, functional limitations, and/or above-routine need or use of services.				X
9. Provide ongoing training and development opportunities for Social Work Transition Specialists to assure that these staff members maintain expertise with transition issues and have updated resource materials.	X	X		
10. Provide Teen Transition Clinics for CRS-enrolled youth to focus on all aspects of transition to adulthood.	X	X		

**Performance Measure #7:**

*Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. Provide immunizations to children seen in county health department (CHD) clinics.	X			
2. Via postcards, remind parents of 11-month-old CHD patients of vaccines that will be due soon.		X		X
3. Mail vaccine pamphlets to parents of all 4-month-old infants.			X	X
4. Operate the Alabama Perinatal Hepatitis B Program, a case management system that serves public and private maternity patients in Alabama who test positive for an antibody to the hepatitis B virus.			X	X
5. Maintain an electronic immunization registry (called "ImmPRINT"), to make all childhood vaccine histories available to all providers.				X
6. Operate the Immunization Outreach Program, which will enable Alabama physicians to determine if their practice met the Healthy People 2010 objective of having 90% of 2-year-old children appropriately vaccinated.				X
7. Administer the Vaccines for Children Program for the State.				X
8. Provide continuing education and materials on immunizations to CHDs.		X		X
9. Using a file linking ImmPRINT records with the Alabama Department of Public Health's (ADPH's) patient encounter database, identify and track CHD Child Health patients aged 4 months or older who have not been vaccinated.	X	X		X

**Performance Measure #8:**

*The rate of birth (per 1,000) for teenagers aged 15 through 17 years.*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. Provide family planning services for teens coming to CHDs for such services.	X	X		
2. Counsel teens coming to CHDs for family planning services, regarding consensual sex and Alabama Law.		X		
3. Operate InfoConnection, the toll-free telephone line that provides educational information for teens on reproductive health and family planning services.			X	X
4. Implement the Alabama Abstinence-Until-Marriage Program (AAEP).			X	X
5. As part of AAEP, support 4 community-based organizations that deliver abstinence-based programming to sixth- and seventh-grade students in 22 counties.			X	X
6. As part of AAEP, support 3 community-based organizations that are to provide lessons on reducing risk and preparing for adulthood, targeting 15-19 year-old high risk youth in 3 counties.			X	X



**Performance Measure #9:**

*Percent of third grade children who have received protective sealants on at least one permanent molar tooth.*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. In collaboration with others, provide preventive and restorative dental services to certain populations of children who tend to have unmet dental needs, at permanent sites and through mobile dental programs.	X			X
2. As part of such collaboration, rotate dental students and pediatric dental residents through a CHD dental clinic.	X			X
3. Train care coordinators with Patient 1st (Alabama Medicaid's primary care case management program) to promote good oral health for children and their families.		X		X
4. Collaborate with the Alabama Dental Association to encourage provision of school-based sealant programs in qualifying schools statewide.				X
5. In collaboration with others, conduct the Fiscal Years (FYs) 2011-12 statewide oral health needs assessment.				X

**Performance Measure #10:**

*The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. Administer the Alabama Child Death Review System (ACDRS), to review unexpected deaths of children and youth.			X	X
2. [ADPH's Bureau of Health Promotion and Chronic Disease, the Southeast Child Safety Institute, and other external entities] jointly conduct the Booster Seat Advocacy Program.			X	X
3. Maintain web pages that include information pertaining to prevention of various injuries.			X	X
4. Conduct the annual observational survey of occupant and child restraint use.				X
5. [Appropriate State authorities] enforce the law concerning motor vehicle safety restraints for passengers.				X

**Performance Measure #11:***The percent of mothers who breastfeed their infants at 6 months of age.*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. Through monthly newsletters, professional meetings, and/or other appropriate media, promote public awareness of the importance of breastfeeding.			X	X
2. Present breastfeeding education programs to CHD staff and, upon request, to hospitals.				X
3. Collaborate with the Alabama Breastfeeding Committee, the Alabama Lactation Consultant Association, the Alabama Chapter of the March of Dimes (AMOD) and, when indicated, other groups to promote breastfeeding statewide.			X	X
4. With support from a U.S. Department of Agriculture grant, maintain and expand the Alabama Breastfeeding Peer Counselor Program.			X	X
5. Send a quarterly infant breastfeeding report, based on WIC data, to Nutrition Directors for each of the State's 11 Public Health Areas.				X
6. Post the Breastfeeding Resource Guide on ADPH's web site.			X	X
7. Convene 4 breastfeeding taskforces, which cover the State's 5 perinatal regions.				X
8. Work with Alabama Medicaid to incorporate breastfeeding information into the 2 encounters that recipients of maternity care have with care coordinators.		X		X
9. Use the national Text4Baby Program to educate parents about preventive healthcare practices for their children, including information about breastfeeding as well as other topics.			X	

**Performance Measure #12:**

*Percentage of newborns who have been screened for hearing before hospital discharge.*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. Implement the State's Universal Newborn Hearing Screening (UNHS) Program.	X	X	X	X
2. Provide care coordination for the UNHS Program to Medicaid-enrolled infants.		X		X
3. When equipment belonging to a hospital participating in UNHS is being repaired, provide loaner equipment for newborn hearing screening.				X
4. For each participating hospital, provide monthly reports tabulating the number of newborns who had hearing screening and the results of the screenings.				X
5. Contract with Auburn University for 2 doctoral-level audiology students to provide follow-up services and hospital training, on a part-time basis and under the direction of the UNHS Coordinator.		X		X
6. Provide or assure follow up for infants who failed the initial hearing screening, for whom data were missing on the initial screening, or who had risk factors associated with late onset hearing loss.		X		X

**Performance Measure #13:***Percent of children without health insurance.*

<b>Activities</b>	<b>Pyramid Level of Service</b>			
	<b>DHC</b>	<b>ES</b>	<b>PBS</b>	<b>IB</b>
1. Through ADPH's Bureau of Children's Health Insurance, administer ALL Kids.		<b>X</b>	<b>X</b>	<b>X</b>
2. In partnership with sports marketing groups, both in the high school and university settings, provide outreach targeting uninsured children.			<b>X</b>	<b>X</b>
3. Collaborate with the 2 Alabama recipients of Children's Health Insurance Program Reauthorization Act (CHIPRA) Outreach Grants to insure that their outreach messages are consistent with ALL Kids messages.				<b>X</b>
4. Participate in the "Kid Check" initiative of the Alabama Rural Action Commission, which provides health screening through schools.		<b>X</b>	<b>X</b>	
5. Through ALL Kids Regional Coordinators, develop partnerships with stakeholders around the State.				<b>X</b>
6. Make combined applications for ALL Kids, SOBRA Medicaid, and Medicaid for Low Income Families available at various community locations and via the ALL Kids web page.			<b>X</b>	<b>X</b>
7. Provide stand-alone kiosks in CHDs to provide audible instructions, in Spanish and English, enabling families to apply for coverage through the web-based application.		<b>X</b>		<b>X</b>

**Performance Measure #14:**

*Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. Educate WIC clients, using a Healthy Habits kit, about the new WIC food packages that promote healthier food.		X		X
2. Maintain membership in the Alabama Obesity Task Force (AOTF), and help implement the AOTF State Plan.				X
3. Implement the WIC Nutrition Education Plan for all ADPH WIC clinics, focusing on prevention of obesity.		X		X
4. As part of the current WIC Nutrition Education Plan, emphasize use of the new WIC cash value voucher to buy fresh fruits and vegetables.		X		X
5. Maintain the WIC Lessons web page, which provides nutrition education lessons.			X	X
6. Monitor the percentage of WIC-enrolled children who are overweight or at risk for becoming overweight.				X

**Performance Measure #15:***Percentage of women who smoke in the last three months of pregnancy.*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. Partner with the Tobacco Prevention and Control Branch to implement and evaluate effective tobacco prevention and cessation activities for pregnant women.			X	X
2. Partner with the Medicaid Maternity Program to encourage care coordinators to discuss smoking cessation with SOBRA Medicaid recipients at each encounter and refer the client to the Quitline if appropriate.		X		X
3. Provide educational materials and resources about smoking cessation to organizations and agencies statewide.				X

**Performance Measure #16:***The rate (per 100,000) of suicide deaths among youths aged 15 through 19.*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. Administer ACDRS to review unexpected deaths, including suicide, of Alabama children and youth.			X	X
2. Maintain membership in the Alabama Suicide Prevention and Resource Coalition (ASPARC).			X	X
3. Through ASPARC, promote and implement strategies included in the State Suicide Prevention Plan.			X	X
4. Through ASPARC, maintain a toll-free number for suicide-related crisis calls.			X	X
5. As part of public awareness efforts, distribute an educational brochure on prevention of suicide among youth.			X	
6. Host and maintain web pages providing information pertaining to suicide prevention and related resources.			X	X

**Performance Measure 17:**

*Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. Administer the State Perinatal Program (SPP), to promote a strong system of regionalized perinatal care.				X
2. Convene annual meetings of the State Perinatal Advisory Council (SPAC).				X
3. Administer the Fetal Infant Mortality Review (FIMR) program, based on national FIMR guidelines, to review neonatal deaths and conduct maternal and family interviews.				X
4. Provide education and training to health professionals concerning preconception health.				X
5. Through SPP's 5 Regional Nurse Perinatal Coordinators, support SPAC and the 5 Regional Perinatal Advisory Councils.				X
6. As part of continued efforts to build a network among perinatal providers, conduct quarterly meetings of maternal-infant nurse managers in each perinatal region.				X

**Performance Measure #18:**

*Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. In 2 counties, provide care coordination for pregnant women.		X		X
2. Provide CHD Family Planning clients with information about the importance of early, continuous prenatal care.		X		X
3. Operate a toll-free hotline to help women access providers and to provide educational materials about pregnancy.			X	



## State of Alabama's Title V Maternal and Child Health Block Grant Program State Performance Measures

### State Performance Measure #1:

*The degree to which the State CSHCN Program increases access to culturally competent care coordination services for CYSHCN, including transition planning as appropriate.*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. The State CSHCN Program develops/modifies existing materials and disseminates public awareness materials on its Care Coordination Program and other related issues: such as cultural competence, family-centered care, medical home, and transition.		X		X
2. These materials aid in increasing awareness and knowledge of resources available to children and youth with special health care needs (CYSHCN) and their families.		X		X
3. The State CSHCN Program establishes and maintains a Care Coordination Taskforce to provide leadership and maintains an updated Care Coordination Manual to guide implementation of the program statewide.				X
4. The State CSHCN Program hosts or provides ongoing care coordination training for staff at state and local levels.				X
5. The CSHCN Program staff, including parent consultants, maintain a working knowledge of local resources to assist in linking and referring CYSHCN and their families to services as needed.		X		X
6. Host or directly provide trainings and/or resource fairs for CYSHCN and their families in local communities to increase awareness and knowledge of care coordination services and other available resources.			X	
7. Each child or youth enrolled in the State CSHCN Program is assigned to a local care coordinator (traumatic brain injury or transition care coordinator as appropriate and available).	X			
8. Each enrolled child or youth with special health care needs has an active comprehensive plan of care in place that addresses identified needs, integration into local communities, independence, and transition planning.	X			

**State Performance Measure #2:**

*The degree to which the State CSHCN Program promotes increased family and youth participation in policy-making.*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. The CSHCN Program, in collaboration with Alabama's Family to Family Health Information Center, supports the participation of families of CYSHCN in state/local taskforces/committees, interagency meetings, and partner agency initiatives.				X
2. The CSHCN Program, in collaboration with Alabama's Family to Family Health Information Center, supports the participation of youth with special health care needs in the above taskforces, committees, meetings, and initiatives.				X
3. Such participation allows representation of the unique needs of CYSHCN and promotes a comprehensive, collaborative effort to increase their participation in policy-making.				X
4. The State CSHCN Program collaborates with Alabama's Family to Family Health Information Center to promote leadership development initiatives for families of CYSHCN and for youth with special health care needs.				X
5. The State CSHCN Program staff, including Parent Consultants, in partnership with appropriate advocacy agencies and service providers, host or directly provide training for families of CYSHCN and for youth with special health care needs.		X		X
6. This training includes condition/disability-specific issues, special education rights, local resources, etc. to support increased knowledge and effective participation in policy-making.		X		X
7. The State CSHCN Program, in collaboration with partner agencies, develops new materials, modifies existing materials, and/or disseminates resources related to the unique needs of CYSHCN, including condition/disability-specific information.		X		X
8. Also included in the materials and resources are the core components of cultural competence, family-centered care, and care coordination to support increased knowledge and effective participation in policy-making.		X		X

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
9. The CSHCN Program maintains active parent and youth advisory committees (state and local), employs parent and youth consultants, and strengthens parent to parent networks to support increased knowledge.				X
10. These committees, consultants, and networks also promote effective participation in policy-making by families of CYSHCN and by youth with special health care needs.				X

**State Performance Measure #3:**

*The degree to which the State CSHCN Program promotes access to community-based services for CYSHCN and families.*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. The State CSHCN Program staff, including Parent Consultants, participate in state and local taskforces/committees, inter-agency meetings, partner agency initiatives, and local community efforts to represent unique needs of CYSHCN.				X
2. Advocate for increased access to community-based services such as transportation, recreational opportunities, respite care, child care, school-based services, etc.		X		X
3. The State CSHCN Program staff, including Parent Consultants, host or directly provide training and technical assistance for community-based organizations.				X
4. This training and technical assistance promote increased awareness of the unique needs of CYSHCN and their families and promote access to necessary services in local communities.				X
5. The State CSHCN Program staff, including Parent Consultants, host or directly provide training for families of CYSHCN and for youth with special health care needs to increase knowledge of services that may benefit them.				X
6. This training also allows for increased awareness of local community resources and supports and promotes effective advocacy for needed community-based services.				X
7. The State CSHCN Program staff, including Parent Consultants, maintain a working knowledge of local community-based resources and assist in linking or referring CYSHCN and their families to services as needed.		X		
8. The State CSHCN Program staff, including Parent Consultants, also monitor service needs that are unable to be met in local communities and share these with appropriate policy-makers.				X
9. The State CSHCN Program analyzes the 2009-10 MCH Needs Assessment findings to develop community-level reports and disseminates these to local policy-makers to help identify strengths, gaps, and needs for community-based services in local areas.				X

**State Performance Measure #4:**

*Of children and youth enrolled in Alabama Medicaid's Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program, the percentage who received any dental service in the reporting year.*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. Provide oral health services in 2 county health departments (CHDs).	X			X
2. Rotate dental students and pediatric dental residents through 1 of the above CHDs.	X			X
3. [Three additional CHDs] provide dental services through community health center-managed dental programs.	X			X
4. As resources permit, support school-based dental programs.				X
5. Provide training, oral hygiene supplies, and educational materials on oral health to CHD care coordinators.		X		X
6. Partner with the Alabama Department of Public Health's (ADPH's) Office of Primary Care and Rural Health to increase access to dental care in Dental Health Professional Shortage Areas.				X
7. Convene the Oral Health Coalition of Alabama and the Strategic Oral Health Team.				X

**State Performance Measure #5:**

*The percentage of 0-17 year-old children and youth who do not have a medical home.*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. Administer ALL Kids, Alabama's Children's Health Insurance Program, which is located in the ADPH's Bureau of Children's Health Insurance.				X
2. For ALL Kids enrollees, monitor families' satisfaction with physician availability.				X
3. Participate in the Medical Home Workgroup convened by Alabama Medicaid.				X
4. As resources permit, provide care coordination services under Alabama Medicaid's Patient 1 <sup>st</sup> Program.			X	X
5. As resources permit, provide care coordination upon referral from Alabama Medicaid's Care Networks.			X	X

**State Performance Measure #6:**

*The degree to which statewide fetal and infant mortality review (FIMR) is implemented.*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. Ensure presence of at least 1 infant death case review team (CRT) and Community Action Team in each of the State's 5 perinatal regions.				X
2. [The CRTs] review infant death cases and make recommendations to the Community Action Teams about community-level or systems-level issues.				X
3. Based on recommendations from the CRTs, [the Community Action Teams] develop and implement community-level or systems-level plans to address infant mortality.			X	X
4. Collect data on selected fetal and infant deaths.				X
5. At least quarterly, convene meetings of the CRTs to review findings from FIMR data.				X

**State Performance Measure #7:**

*The degree to which the Bureau of Family Health Services promotes a positive youth development model.*

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. Promote positive youth development mainly through 2 programs: the Abstinence-Until-Marriage Education Program (AAEP) and the Alabama Personal Responsibility Education Program (APREP).			X	X
2. As part of AAEP, emphasize positive youth development through the training and utilization of teen leaders as peer role models for younger teens.			X	X
3. As part of APREP, promote positive youth development through the use of adult preparation curriculum.			X	X
4. Provide training on evidence-based curriculum for sub-grantees operating under AAEP or APREP.				X
5. Host ADPH's Youth Advisory Council, which meets quarterly.				X

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