




Welcome!
LMCH
 Year End Report
FY 2021

WE WILL BEGIN SHORTLY


September 29, 2021; 3 – 4 pm
 Trudy Esch, MS, BSN, RN
 Virtual Webinar

1


Welcome!
 Introductions



CARRIE TARRY, MPH
 DIRECTOR,
 DIVISION OF CHILD & ADOLESCENT HEALTH



TRUDY ESCH, MS, BSN, RN
 MCH NURSE CONSULTANT
 LOCAL MATERNAL CHILD HEALTH



LOCAL HEALTH DEPARTMENTS
 PLEASE ADD NAME & AGENCY IN
 CHAT

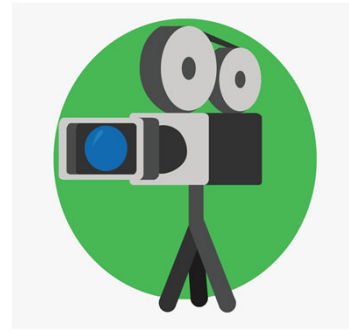
LOCAL MATERNAL CHILD HEALTH PROGRAM

2

2

THIS MEETING IS BEING RECORDED

- Remaining in the webinar is your consent to be recorded and subsequently have recording in public domain (LMCH web page)
- If you do not want to be part of the recording, you can leave the session at any time.



3

Virtual webinar guidelines & norms

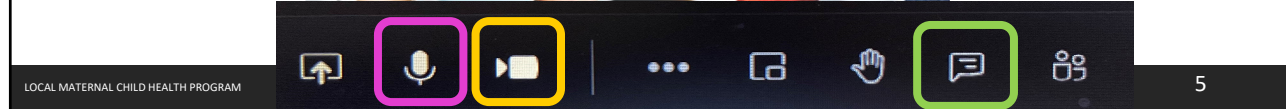
- Please stay on mute to avoid background noise and disruptions.
- Share your video if able – we want to see one another!
- Use the chat box for comments or questions.
- Try to stay present and engaged.
- Resist multi-tasking.
- Practice patience and understanding.
- Be gracious and flexible of where each of us is at in our own learning and understanding



4

How will we work together?

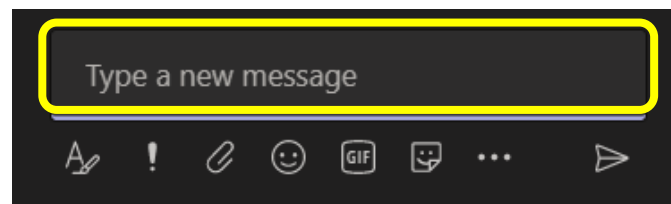
- We will use the **chat** feature for interaction.
- Feel free to **unmute** yourself for comments/discussion.
- Share your **video** if able – we want to see one another!



5

Chat check-in

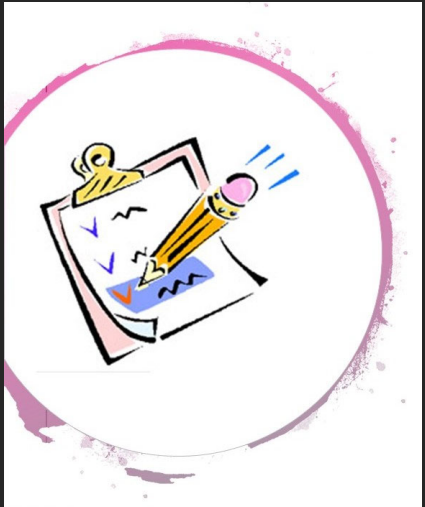
Use the chat box to check in. Type in your **name, and agency**.



LOCAL MATERNAL CHILD HEALTH PROGRAM

6

6



LOCAL MATERNAL CHILD HEALTH PROGRAM

Today's Agenda

1. Brief overview Federal/State Legislative requirements
2. Year End Report Template Instructions
3. Reporting on COVID-19 activities for LMCH
4. Sample Year End Report
5. Final FSRs
6. LMCH Amendment Cycle for FY 2022

7

7

Reminder: Federal and State Legislation Requirements


FEDERAL & STATE LEGISLATIVE REQUIREMENTS

LOCAL MATERNAL CHILD HEALTH PROGRAM


8

8


Federal Fiscal & Program Requirements




A **minimum of 30%** of funding must be used for services for Children with Special Health Care Needs (CSHCN).




States must identify **7-10 state priority needs** (total) across five population domains




A **minimum of 30%** of funding must be used for preventive and primary care services for children 1 through 21.




States must choose a minimum of one **National Performance Measure** (defined by HRSA) in each population domain*




A **maximum of 10%** of funding can be used for administration of the block grant.



States can create **State Performance Measures** (defined by the State) to address other needs



Every \$4 of federal funding must be matched by \$3 of state funding.




Each state priority need must link to a National Performance Measure or State Performance Measure


LOCAL MATERNAL CHILD HEALTH PROGRAM
9

9


Federal Fiscal & Program Requirements, cont.



States must report on **Types of Individuals Served** (Form 3A)



States must report on **Types of Services Provided** (Form 3B)



States must report on **Number of Individuals Served** (Form 5A)

Title V requirements related to reporting on **populations served, types of services, and health coverage**

LOCAL MATERNAL CHILD HEALTH PROGRAM
10

10

State Appropriation Requirements

FAMILY, MATERNAL, AND CHILD HEALTH

Sec. 1301. (1) Before April 1 of the current fiscal year, the department shall submit a report to the house and senate fiscal agencies and the state budget director on planned allocations from the amounts appropriated in part 1 for local MCH services, prenatal care outreach and service delivery support, family planning local agreements, and pregnancy prevention programs. Using applicable federal definitions, the report shall include information on all of the following:

- (a) Funding allocations.
 - (b) Actual number of women, children, and adolescents served and amounts expended for each group for the immediately preceding fiscal year.
 - (c) A breakdown of the expenditure of these funds between urban and rural communities.
- (2) The department shall ensure that the distribution of funds through the programs described in subsection (1) takes into account the needs of rural communities.
- (3) For the purposes of this section, "rural" means a county, city, village, or township with a population of 30,000 or less, including those entities if located within a metropolitan statistical area.

State of Michigan National & State Performance Measures, 2021-2025

NPM	Priority Area	National Performance Measure
2	Low-risk cesarean delivery (NEW)	Percent of cesarean deliveries among low-risk first births
4	Breastfeeding	A) Percent of infants who are ever breastfed and B) Percent of infants breastfed exclusively through 6 months
5	Safe sleep	A) Percent of infants placed to sleep on their backs, B) Percent of infants placed to sleep on a separate approved sleep surface, C) Percent of infants placed to sleep without soft objects or loose bedding
9	Bullying (NEW)	Percent of adolescents, ages 12 through 17, who are bullied or who bully others
12	Transition	Percent of adolescents with and without special health care needs, ages 12 through 17, who received services necessary to make transitions to adult health care
13	Preventive dental visit	13.1 Percent of women who had a dental visit during pregnancy; and 13.2 Percent of children, ages 1 through 17, who had a preventive dental visit in the past year

SPM	Priority Area	State Performance Measure
1	Childhood lead poisoning prevention	Percent of children less than 72 months of age who receive a venous lead confirmation testing within 30 days of an initial positive capillary test
2	Immunizations (Children)	Percent of children 19 to 36 months of age who have received a completed series of recommended vaccines (4313314 series)
3	Immunizations (Adolescents)	Percent of adolescents 13 to 18 years of age who have received a completed series Human Papilloma Virus vaccine
4	Medical care and treatment for CSHCN	Percent of children with special health care needs enrolled in CSHCS that receive timely medical care and treatment without difficulty
5	Intended pregnancy (NEW)	Percent of women who had a live birth and reported that their pregnancy was intended
6	Behavioral/ Mental Health (NEW)	Support access to developmental, behavioral, and mental health services through Title V activities and funding



Unmute yourself to ask a question

OR

Type a question in the chat box.

What questions do you have regarding federal/state requirements?

13

LMCH Year End Report Template Instructions – FY 2021

14

LMCH Year End Report Notification and Logistics

NOTE: Year End Report is DUE before Final FSR due – exceptions granted for agencies who could not get FY books closed.

FY 2021 Year End reports are due **November 15, 2021**

FY 2021 Final FSRs are due November 30, 2021

- Notification of the Year End Report is sent in the 4th quarter which includes a **customized year end report template** for each agency
- The report is due date will be communicated via email; usually a couple weeks before the final FSRs are due
- The report is reviewed and approved. Then it is returned to the agency to upload to EGrAMS
- The approved LMCH Year End Report should be attached to the Final FSR, MCH Source of Funds line

15

Instructions – FY 2021 Year End Report

Instructions – See also FY 2021 Guidance Document

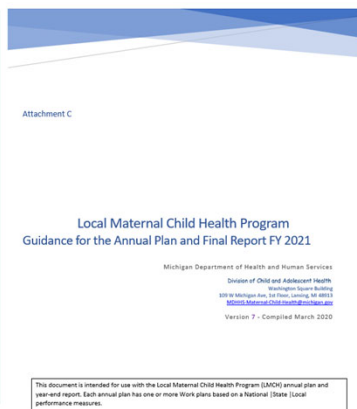
I. The department moved toward utilizing work plans in the LMCH Plan to describe the data, activities and outcomes. The work plan also contains a **green colored column** on the far right which should be utilized for final LMCH reporting. Please utilize your FY 21 approved work plans and add information in the **final reporting columns**.

1. Did you meet, partially meet or miss your targeted objective? Provide the objective metric attained.
2. Briefly describe the progress in achieving each action step.
3. State the number of deliverables achieved. This number should match the numbers in the Year End Number and Expenditure Table.
4. Briefly describe any challenges and successes that were experienced.

II. Complete the last column in the Types of Services Provided by reporting expended funds by direct service, enabling service and public health systems.

III. Complete the Numbers and Expenditure Table.

As in previous years, the Urban/Rural Designation and Expenditure Table needs to be completed. MDHHS will complete this section, if desired.



Attachment C

Local Maternal Child Health Program
Guidance for the Annual Plan and Final Report FY 2021

Michigan Department of Health and Human Services
Division of Child and Adolescent Health
300 W. Washington Ave., 3rd Floor, Lansing, MI 48913
MDHHS.MaternalChildHealth@mi.gov
Version 7 - Compiled March 2020

This document is intended for use with the Local Maternal Child Health Program (LMCH) annual plan and year-end report. Each annual plan has one or more Work plans based on a National [State] Local performance measures.

Table of Contents	
Overview	1
Federal and State Legislative Requirements	1
MCH Needs Assessment	2
Section I: Local MCH Processes for Annual Plan and Year-End Reporting	2
I. LMCH Annual Plan	2
II. Year-End Reporting	3
Section II: LMCH Plan Instructions	3
I. Contact Information	3
II. Complete overview questions, and tables	3
III. Completing the Local MCH Work Plan(s)	4
IV. Complete LMCH Projected Count and Allocation Table	5
V. Complete Types of Services Provided by LMCH Budget Allocation	6
VI. Complete Services/Assess/Enhance/Support/Other and Other Programs, if available	6
Section III: Year-End Report Instructions	7
I. Reporting	7
II. Financial	8
III. EGrAMS Tips	9
Appendix A: Title V National/State Performance Measures	10
Appendix B: Definitions	11
Appendix C: Budget Justification Examples	14
Appendix D: Pilot Proposal	15
Appendix E: Budget Guidance	16
Appendix F: Frequently Asked Questions	18

16

Customized Year End Report Template – Sample

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES
LOCAL MATERNAL CHILD HEALTH (MCH)
YEAR END REPORT
FY 2021 (10/1/2020 – 9/30/2021)
[Please attach to Electronic Grants Administration and Management System (EGAMS) on Final FSR – MCH Source of Funds Line]

Local MCH funds were made available to local health departments to address locally identified health needs of women and children in their jurisdictions. The Local Maternal Child Health (MCH) Grant Program Year End Report requires completion of the work plan submitted with the FY 2021 budget application or amendment, numbers of individuals served and actual expended funds in your Fiscal Year 2020-2021 MCH programming. *Please note: this report should only include those activities and expenditures for which Local MCH funds were expended.*

Your Local Maternal Child Health Grant Program Year End Report is due **November 15, 2021**. The Local MCH Year End Report, approved by the department, is to be uploaded with the Final FSR into the Electronic Grants Administration and Management System (EGAMS/MI E-Grants)

Contact information for further information

Name of Local Health Department:

Local MCH Coordinator Contact Information

Name:

Email:

Telephone:

Local MCH Allocation for FY 2021:

Instructions – See also FY 2021 Guidance Document

I. The department moved toward utilizing work plans in the LMCH Plan to describe the data, activities and outcomes. The work plan also contains a **green colored column** on the far right which should be utilized for final LMCH reporting. Please utilize your FY 21 approved work plans and add information in the **final reporting columns**.

- Did you meet, partially meet or miss your targeted objective? Provide the objective metric attained.
- Briefly describe the progress in achieving each action step.
- State the number of deliverables achieved. This number should match the numbers in the Year End Number and Expenditure Table.
- Briefly describe any challenges and successes that were experienced.

II. Complete the last column in the Types of Services Provided by reporting expended funds by direct service, enabling service and public health systems.

III. Complete the Numbers and Expenditure Table.

IV. As in previous years, the Urban/Rural Designation and Expenditure Table needs to be completed. MDHHS will complete this section, if desired.

If you have any questions regarding preparing the report, contact Trudy Esch at 517-241-3593 or email at MDHHS-MaternalChildHealth@michigan.gov.

Name of Local Health Department: Tero County Public Health Department 1 | Page

17

Customized Work Plan Template

Local Health Department Name: Tero County Public Health Department (TCPHD)

<p>NPM #5: Safe Sleep</p> <p>Goal: Ensure all Ter</p> <p>Objectives:</p> <p>1.) By 09/30/2021, T</p> <p>2.) By September 3</p> <p>Relevant Data</p> <p>List baseline data and any trends noticed in the data. Please include the year and source of data.</p> <p>From 2015-2018, the rate of post-neonatal deaths related to unsafe sleep in Tero County was 1.4 per 10,000 (positional asphyxia) v the Michigan rate of 1.1 per 10,000.</p> <p>In Tero County 3 in 5 infants that continue to be found unresponsive are not on their backs sleep. 4 in 5 sleep-related deaths occur in an unsafe sleep locale and 2 in 3 sleep-related deaths involve an infant sharing a sleep surface.</p>	<p>Local Health De</p> <p>NPM 13: Oral He</p> <p>Goal: Enhance th</p> <p>Objective: 1) By County WIC child dental visit in 1 ye</p> <p>Relevant Data</p> <p>List baseline data and a trends noticed in the dat Please include the year source of data.</p> <p>In 2018, 44% of beneficiaries in Tero County had 1+ pre-dental visit in 1 year (National Survey of Children's Health, 2</p> <p>Local dental screer exams conducted in County as part of it Dental Sealant Pro have identified 30% the 2nd grade stude Tero County have c decay, and 7% are to have urgent dent needs that have go untreated (2019)</p>	<p>Local Health Department Name: Tero County Public Health Department (TCPHD)</p> <p>NPM or SPM 2: Immunizations - Children</p> <p>Goal: Herd immunity for children in Tero County</p> <p>Objective: By 09/30/2021, TCPHD will increase the percentage of 19-35-month-old children fully immunized (4:3:1:3:3:1:4:2 series) by 10% from 51% to 56.1%</p> <p>Relevant Data</p> <p>List baseline data and any trends noticed in the data. Please include the year and source of data.</p> <p>Percent 19-35 month olds with full schedule of age appropriate immunizations including: 4 doses of DTaP, 3 doses Polio, 1 dose MMR, 3 doses Hib, 3 doses Hep B, 1 dose Varicella, 4 doses PCV, and 2 Hep A (4:3:1:3:3:1:4:2 series)</p> <ul style="list-style-type: none"> State (56.2%) Tero (51.0%) (MCIR, December 2019) 	<p>Evidence-based/informed or promising Strategies</p> <p>Strategies with moderate, scientifically rigorous or emerging evidence based on expert opinion.</p> <p>Administer vaccine according to ACIP guidelines for infants and children</p> <p>"Recall and reminder letters have been shown to increase vaccination rates"</p> <p>"Enhance knowledge of vaccines among parents"</p> <p>Increase community awareness of childhood vaccines</p>	<p>Action Steps</p> <p>Describe the specific steps you will use to achieve your goals and objectives. Include as many action steps as necessary to achieve the objectives. Only include activities for which you will use MCH funds.</p> <ol style="list-style-type: none"> Provide age appropriate vaccinations to 19-35-month-old children (gap filling) Vaccinate children in at risk families in their home, as needed (gap filling) Send county-wide immunization recalls to children age 19-35 months who are not up to date on the 43133142-immunization schedule as identified by MCIR Provide waiver education to families. Provide education opportunities regarding vaccines & immunization schedules during clinic visits for vaccines & waivers, and during WIC visits Set up vaccine messaging with phone holds within health department clinics Analyze MCIR data for accurate and current number of children in jurisdiction Create and implement a social media campaign focusing on childhood immunizations (one social media post per month) 	<p>Deliverables</p> <p>Estimated number of individuals to reach, number of outputs, or an anticipated product</p> <p>800 children 19-35 months will be vaccinated</p> <p>10 children vaccinated at in-home visits</p> <p>4313314 coverage rates increase to 56.1%</p> <p>3200 reminder letters sent to children 19 – 35-months</p> <p>36% children receiving recall return for vaccinations (36-80 + 10-200 = 4010)</p> <p>300 of families (other individual) who receive waiver education</p> <p>Vaccine messages in clinic completed (n=1)</p> <p>MCIR data analyzed (N=) 12 social media posts (one monthly)</p>	<p>Year End Final Reporting</p> <ol style="list-style-type: none"> Did you meet, partially (meet or miss your targeted objective? Provide the objective metric attained. Briefly describe the progress in achieving each action step. State the number of deliverables achieved, which should match the numbers in the Year End Outcome & Expenditure Table. Briefly describe any challenges/successes that were experienced.
--	--	--	--	---	---	--

Name of Local Health Department: Tero County Public Health Department 4 | Page

18

Customized Work Plan Template

Local Health Department Name: Tero County Public Health Department (TCPHD)

NPM or SPM 2: Immunizations - Children

Goal: Herd immunity for children in Tero County

Objective: By 09/30/2021, TCPHD will increase the percentage of 19-35-month-old children fully immunized (4:3:1:3:3:1:4:2 series) by 10% from 51% to **56.1%**

1. Did you meet, partially meet or miss your targeted objective? Provide the objective metric attained.

Relevant Data	Evidence-based/informed or promising Strategies	Action Steps	Deliverables	Year End Final Reporting
Baseline data for any objective data include the year and source of data. In 2018, 44% of beneficiaries in Tero County had 1+ preventive dental visit in 1 year. (National Survey of Children's Health, 2018) Local dental screening exams conducted in Tero County as part of the Dental Sealant Program have identified 30% of the 2nd grade students in Tero County have dental decay, and 7% are found to have urgent dental needs that have gone untreated (2019)	Follow EPSDT periodically schedule for oral health from AAPD, specifically topical fluoride Assuring children get access to dental services as needed, with a focus on establishing a dental home by age 1	1. Provide age appropriate vaccinations to 19-35-month-old children (gap filling) 2. Vaccinate children in at risk families in their home, as needed (gap filling) 3. Send county-wide immunization recalls to children age 19-35 months who are not up to date on the 43133142 immunization schedule as identified by MCIR 4. Provide waiver education to families. Provide education opportunities regarding vaccines & immunization schedules during clinic visits for vaccines & waivers, and during WIC visits 5. Set up vaccine messaging with phone holds within health department clinics 6. Analyze MCIR data for accurate and current number of children in jurisdiction 7. Create and implement a social media campaign focusing on childhood immunizations (one social media post per month)	800 children 19-35 months will be vaccinated 10 children vaccinated at in-home visits 4313314 coverage rates increase to 56.1% 3200 reminder letters sent to children 19-35-months 36% children receiving recall return for vaccinations (N=800 + 10+ 3200 = 4010) 300 of families (other individual) who receive waiver education Vaccine messages in clinic completed (n=1) MCIR data analyzed (N=1) 12 social media posts (one monthly)	1. Did you meet, partially meet or miss your targeted objective? Provide the objective metric attained. 2. Briefly describe the progress in achieving each action step. 3. State the number of deliverables achieved, which should match the numbers in the Year End Outcome & Expenditure Table. 4. Briefly describe any challenges/successes that were experienced.

Name of Local Health Department: Tero County Public Health Department

4 | Page

19

Customized Work Plan Template

Local Health Department Name: Tero County Public Health Department (TCPHD)

NPM 13: Oral Health

Goal: Enhance the oral health of the children seen in Tero WIC clinic

Objective: 1) By September 30, 2021, 100 children in Tero County will receive dental services related to decay or urgent needs. 2) By September 30, 2021, 400 eligible Tero County WIC children will receive fluoride varnish 3) By September 30, 2021 Tero County will increase the percentage of beneficiaries (children) age 1-18 who had 1+ preventive dental visit in 1 year by 10% from 44% to 48.4%

Relevant Data	Evidence-based/informed or promising Strategies	Action Steps	Deliverables	Year End Final Reporting
In 2018, 44% of beneficiaries in Tero County had 1+ preventive dental visit in 1 year. (National Survey of Children's Health, 2018) Local dental screening exams conducted in Tero County as part of the Dental Sealant Program have identified 30% of the 2nd grade students in Tero County have dental decay, and 7% are found to have urgent dental needs that have gone untreated (2019)	Follow EPSDT periodically schedule for oral health from AAPD, specifically topical fluoride Assuring children get access to dental services as needed, with a focus on establishing a dental home by age 1	1. Apply fluoride varnish to eligible children in WIC 2. Provide oral health screenings to children (WIC, Head Start, schools). 3. Children without a dental home will be referred. Referrals will be tracked through the EMR	400 children will have fluoride varnish applied as evidenced by EMR. 200 children will be screened by the Dental Hygienist as evidenced by EMR. 300 children (subgroup of 600) will be referred to a dental home. be referred to dental services as evidenced by EMR (N= 400 + 600 = 1000)	1. Did you meet, partially meet or miss your targeted objective? Provide the objective metric attained. 2. Briefly describe the progress in achieving each action step. 3. State the number of deliverables achieved, which should match the numbers in the Year End Outcome & Expenditure Table. 4. Briefly describe any challenges/successes that were experienced.

2. Briefly describe the progress in achieving each action step.

Name of Local Health Department: Tero County Public Health Department

3 | Page

20

Customized Work Plan Template

Local Health Department Name: Tero County Public Health Department (TCPHD)

NPM #5: Safe Sleep

Goal: Ensure all Tero County infants have safe sleep environments

Objectives:
 1) By 09/30/2021, TCPHD will provide safe sleep education to 40 prenatal mothers.
 2) By September 30, 2021, TCPHD will train 30 first responders, FQHC staff, childcare providers, human service providers and other community-based providers.

Relevant Data	Evidence-based/informed or promising Strategies	Action Steps	Deliverables	Year End Final Reporting
<p>List baseline data and any trends noticed in the data. Please include the year and source of data.</p> <p>From 2015-2018, the rate of post-neonatal deaths related to unsafe sleep in Tero County was 1.4 per 10,000 (positional asphyxia) vs the Michigan rate of 1.3 per 10,000.</p> <p>In Tero County 3 in 5 infants that continue to be found unresponsive are not on their backs for sleep. 4 in 5 sleep-related deaths occur in an unsafe sleep location and 2 in 3 sleep-related deaths involve an infant sharing a sleep surface.</p>	<p>Promote infant safe sleep environmental interventions as recommended by AAP</p> <p>Provide consistent safe sleep messaging as recommended by AAP</p>	<p>1. Provide Safe Sleep education to women during the prenatal care class (prnc) series.</p> <p>2. Provide pack and play cribs, along with safe sleep education to parents/grandparents, when criteria establishing need are met by home visiting staff</p> <p>3. Consistent Safe Sleep messaging will be provided to the community as an outreach effort, with emphasis on women of color in the following forms:</p> <ul style="list-style-type: none"> Facebook posts Presentations throughout the year Health Department Newsletter article 	<p>40 pregnant women will complete the safe sleep education component of the prnc series.</p> <p>25 parents / grandparents reached with evidence-based safe sleep education/pack-in-plays.</p> <p>4 FB posts 4 presentations 1 newsletter article 2 print ads</p>	<p>1. Did you meet, partially meet or miss your targeted objective? Provide the objective metric attained.</p> <p>2. Briefly describe the progress in achieving each action step.</p> <p>3. State the number of deliverables achieved, which should match the numbers in the Year End Outcome & Expenditure Table.</p> <p>4. Briefly describe any challenges/successes that were experienced.</p>

Work Plan Incentives for NPM #5 Safe Sleep

Item	No	Unit Cost	Total
Pack-n-Plays	25	\$50.00	\$1,250
Filled Sheets	25	\$7.00	\$175
Total			\$1,425

3. State the number of deliverables achieved. Did it match, exceed or was less than estimated in the deliverable column? The number should match the numbers in the Year End Outcome & Expenditure Table.

Name of Local Health Department: Tero County Public Health Department (TCPHD)

2 | Page

21

Customized Work Plan Template

Local Health Department Name: Tero County Public Health Department (TCPHD)

NPM or SPM 2: Immunizations - Children

Goal: Herd immunity for children in Tero County

Objective: By 09/30/2021, TCPHD will increase the percentage of 19-35-month-old children fully immunized (4:3:1:3:3:1:4:2 series) by 10% from 51% to **56.1%**

Relevant Data	Evidence-based/informed or promising Strategies	Action Steps	Deliverables	Year End Final Reporting
<p>Percent 19-35 month olds with full schedule of age appropriate immunizations including: 4 doses of DTaP, 3 doses Polio, 1 dose MMR, 3 doses Hib, 3 doses Hep B, 1 dose Varicella, 4 doses PCV, and 2 Hep A (4:3:1:3:3:1:4:2 series)</p> <ul style="list-style-type: none"> State (56.2%) Tero (51.0%) (MCIR, December 2019) 	<p>Administer vaccine according to ACIP guidelines for infants and children</p> <p>"Recall and reminder letters have been shown to increase vaccination rates"</p> <p>"Enhance knowledge of vaccines among parents"</p> <p>Increase community awareness of childhood vaccines</p>	<p>1. Provide age appropriate vaccinations to 19-35-month-old children (gap filling)</p> <p>2. Vaccinate children in at risk families in their home, as needed (gap filling)</p> <p>3. Send county-wide immunization recalls to children age 19-35 months who are not up to date on the 43133142-immunization schedule as identified by MCIR</p> <p>4. Provide waiver education to families. Provide education opportunities regarding vaccines & immunization schedules during clinic visits for vaccines & waivers, and during WIC visits</p> <p>5. Set up vaccine messaging with phone holds within health department clinics</p> <p>6. Analyze MCIR data for accurate and current number of children in jurisdiction</p> <p>7. Create and implement a social media campaign focusing on childhood immunizations (one social media post per month)</p>	<p>800 children 19-35 months will be vaccinated</p> <p>10 children vaccinated at in-home visits</p> <p>4313314 coverage rates increase to 56.1%</p> <p>3200 reminder letters sent to children 19 - 35-months</p> <p>36% children receiving recall return for vaccinations (n=800 + 19- 3500 - 4010)</p> <p>300 of families (other individual) who receive waiver education</p> <p>Vaccine messages in clinic completed (n=1)</p> <p>MCIR data analyzed (N=12 social media posts (one monthly)</p>	<p>1. Did you meet, partially meet or miss your targeted objective? Provide the objective metric attained.</p> <p>2. Briefly describe the progress in achieving each action step.</p> <p>3. State the number of deliverables achieved, which should match the numbers in the Year End Outcome & Expenditure Table.</p> <p>4. Briefly describe any challenges/successes that were experienced.</p>

4. Briefly describe any challenges/successes that were experienced.

Name of Local Health Department: Tero County Public Health Department

4 | Page

22

Year End Number and Expenditure Reporting FY 2021

Complete the Table below identifying how your FY 2021 Local MCH funds were expended and the actual numbers served. *The actual number served should be an unduplicated count.* Please round expenditures to the nearest whole dollar. The last column is for your allocation from your LMCH Plan. **Legislation mandates the reporting of the actual number of women, children and adolescents served and amounts expended for each group with LMCH grant funds for the fiscal year.** Use the hatch sign/F9 key to update the totals in Table.

Local Health Department Name:

Population Classifications	Numbers Served & MCH Funds Expended UNDULICATED COUNTS	National/State/Local Performance Measure (specify)						TOTAL Numbers Served MCH	TOTAL MCH Expended \$	MCH Allocation \$
		Performance Measure	Performance Measure	Performance Measure	Performance Measure	Performance Measure	COVID 19 Activities			
Children age 1 – 9 years	Number served							0		
	MCH Amount Expended \$	\$	\$	\$	\$	\$	\$	\$ 0	\$ 0	\$40,270
Adolescents age 10 – 21 years	Number served							0		
	MCH Amount Expended \$	\$	\$	\$	\$	\$	\$	\$ 0	\$ 0	\$ 0
		\$	\$	\$	\$	\$	\$	0	\$ 0	\$ 0
		\$	\$	\$	\$	\$	\$	0	\$ 0	\$ 0
		\$	\$	\$	\$	\$	\$	0	\$ 0	\$ 0
		\$	\$	\$	\$	\$	\$	0	\$ 0	\$ 0
	Subtotal Children	\$	\$	\$	\$	\$	\$	0	\$ 0	\$40,270
Pregnant A person from conception to 60 days after birth, delivery, or expulsion of fetus	Number served							0		
	MCH Amount Expended \$	\$	\$	\$	\$	\$	\$	\$ 0	\$ 0	\$11,190
Infants age 0 – 364 days	Number served							0		
	MCH Amount Expended \$	\$	\$	\$	\$	\$	\$	\$ 0	\$ 0	\$ 0
Other Individual Men > 21, fathers, non-binary individuals, grandparents, guardians	Number served							0		
	MCH Amount Expended \$	\$	\$	\$	\$	\$	\$	\$ 0	\$ 0	\$33,600
		\$	\$	\$	\$	\$	\$	0	\$ 0	\$ 0
		\$	\$	\$	\$	\$	\$	0	\$ 0	\$ 0
		\$	\$	\$	\$	\$	\$	0	\$ 0	\$ 0
	Subtotal All Others	\$	\$	\$	\$	\$	\$	0	\$ 0	\$80,190
	TOTAL	\$	\$	\$	\$	\$	\$	0	\$ 0	\$120,460

MCH-Children project Final FSR MCH Source of Funds must match this amount

SUBTOTAL CHILDREN

MCH-All Other project Final FSR MCH Source of Funds must match this amount

SUBTOTAL ALL OTHERS

Name of Local Health Department: Tero County Public Health Department

5 | Page

LOCAL MATERNAL CHILD HEALTH PROGRAM

Types of Services Provided by LMCH Expended FY 2021

Local Health Department Name:

Instructions: Complete the "Budget" column with your LMCH annual plan. Complete the "Expended" column with your LMCH year-end report.

Type of Service	Budgeted (Plan)	Expended (Report)
1. Direct Services (sum of a, b, & c)	\$30,270	\$ 0
a. Preventive and primary care services for pregnant women, mothers, and infants up to age one	\$	
b. Preventive and primary care services for children 1-21	\$30,270	\$
c. Services for CSHCN	\$	\$
2. Enabling Services	\$31,190	\$
3. Public Health Services and Systems (i.e., Infrastructure)	\$59,000	\$
TOTAL (sum of lines 1, 2, & 3)	\$120,460	\$ 0

Explanation of numbers in table for illustrative purposes:

PERFORMANCE MEASURE	Direct	Direct	Enabling	Enabling	PHI	PHI
		\$		\$		\$
		\$		\$		\$
		\$		\$		\$
		\$		\$		\$
		\$		\$		\$
TOTAL		\$ 0		\$ 0		\$ 0

Name of Local Health Department: Tero County Public Health Department

6 | Page

LOCAL MATERNAL CHILD HEALTH PROGRAM

Legislation mandates reporting a breakdown of the expenditure of funds between urban and rural communities. Please complete Urban/Rural Table. For the purposes of this report, rural means a county with a population of 30,000 or less. [Geographic Areas of Census 2010 are provided below].

TABLE: MDHHS WILL COMPLETE THIS, IF DESIRED.

URBAN/RURAL DESIGNATION & EXPENDITURE AMOUNTS
Please round expenditures to nearest whole number.

Urban Counties	Expenditures
Rural Counties*	Expenditures

Geographic Areas of Census 2010

URBAN POPULATION (> 30,000)				RURAL POPULATION (≤ 30,000)	
Alcona	111,408	Kent	602,622	Alcona	10,942
Barry	59,173	Lapeer	88,319	Alster	9,601
Bay	107,771	LeNawee	99,892	Alpena	29,598
Berrien	156,813	Livinston	180,967	Antrim	23,580
Branch	45,248	Macomb	840,978	Arenac	15,899
Calhoun	136,146	Marquette	67,077	Baraga	8,880
Cass	52,293	Mecosta	42,736	Benzie	17,523
Chippewa	38,520	Midland	83,629	Charlevoix	25,949
Clare	30,926	Monroe	152,021	Cheboygan	26,152
Clinton	75,382	Montcalm	63,342	Crawford	14,074
Delta	37,069	Muskegon	172,188	Dickinson	26,168
Detroit city	713,777	Newaygo	48,460	Gladwin	25,692
Fallon	107,759	Oakland	1,202,352	Gogebic	16,427
Emmet	32,694	Ottawa	263,801	Iosco	25,987
Genesee	425,790	Saginaw	200,169	Iron	11,817
Grand Traverse	86,986	Saint Clair	163,040	Kalkaska	17,153
Grafton	42,476	Saint Joseph	91,295	Keweenaw	2,156
Hillsdale	46,688	Sanilac	43,114	Lake	11,539
Houghton	36,628	Shiawassee	70,648	Leelanau	21,708
Huron	33,118	Tuscola	55,729	Lucas	6,631
Ingham	280,895	Van Buren	78,258	Mackinac	11,113
Ionia	63,905	Washtenaw	344,791	Manistee	24,733
Ishpeming	70,311	Wayne	1,820,584	Manitou	28,705
Jackson	160,248	Westford	39,735	Menominee	24,029
Kalamazoo	250,331			Missaukee	14,849
				Montmorency	9,765
				Oceana	26,370
				Ogemaw	21,699
				Ontonagon	6,780
				Oscoda	23,528
				Oscoda	8,640
				Otsego	24,164
				Presque Isle	13,376
				Roscommon	24,449
				Schoolcraft	8,485

Name of Local Health Department: Tero County Public Health Department

7 | Page

25



Unmute yourself to ask a question

OR

Type a question in the chat box.

What questions do you have regarding LMCH Year End Report Template?

26

COVID-19 reporting in the LMCH Year End Report

FY 2021

27

LMCH and COVID-19 Reporting

LHDs were able to redirect LMCH funds to support COVID-19 activities. Expenditure of LMCH funds had to be in accordance with state/local fiscal policies and regulations and **could not deviate from serving children**, as per your FY 2021 LMCH Plan. No amendment was necessary for the redirection of these funds.

COVID-19 activities and the amount of MCH funds expended for COVID-19 must be recorded in the year-end (green) reporting columns in the Work Plan; and in the Numbers and Expenditures Table in the COVID-19 Column.

The COVID-19 ELPHS EGrAMS project does not apply to LMCH

28

Year End Number and Expenditure Reporting

FY 2021

Complete the Table below identifying how your FY 2021 Local MCH funds were expended and the actual numbers served. *The actual number served should be an unduplicated count.* Please round expenditures to the nearest whole dollar. The last column is for your allocation from your LMCH Plan. **Legislation mandates the reporting of the actual number of women, children and adolescents served and amounts expended for each group with LMCH grant funds for the fiscal year. Use the hatch sign/F9 key to update the totals in Table.**

Local Health Department Name:

Population Classifications	Numbers Served & MCH Funds Expended UNDULICATED COUNTS	National/State/Local Performance Measure (specify)					COVID 19 Activities	TOTAL Numbers Served MCH	TOTAL MCH Expended \$	MCH Allocation \$
		Performance Measure	Performance Measure	Performance Measure	Performance Measure	Performance Measure				
Children age 1 – 9 years	Number served									
	MCH Amount Expended \$	\$	\$	\$	\$	\$		\$ 0	\$40,270	
Adolescents age 10 – 21 years (excludes teen parents)	Number served						0			
	MCH Amount Expended \$	\$	\$	\$	\$	\$		\$ 0	\$ 0	
CYSHCN ages 0 – 21 years	Number served						0			
	MCH Amount Expended \$	\$	\$	\$	\$	\$		\$ 0	\$ 0	
SUBTOTAL CHILDREN							0	\$ 0	\$40,270	
Women age 22 – 44 years (includes mothers beyond postpartum)	Number served						0			
	MCH Amount Expended \$	\$	\$	\$	\$	\$		\$ 0	\$ 0	
Pregnant A person from conception to 60 days after birth, delivery, or expulsion of fetus	Number served						0			
	MCH Amount Expended \$	\$	\$	\$	\$	\$		\$ 0	\$11,190	
Infants age 0 – 364 days	Number served						0			
	MCH Amount Expended \$	\$	\$	\$	\$	\$		\$ 0	\$ 0	
Other Individual Men > 21, fathers, non-binary individuals, grandparents, guardians, etc.	Number served						0			
	MCH Amount Expended \$	\$	\$	\$	\$	\$		\$ 0	\$33,600	
Population community members, providers, staff, media analysts, etc.	Number served						0			
	MCH Amount Expended \$	\$	\$	\$	\$	\$		\$ 0	\$35,400	
SUBTOTAL ALL OTHERS							0	\$ 0	\$80,190	
TOTAL Numbers Served		0	0	0	0	0	0			
TOTAL MCH Amount Expended		\$ 0	\$ 0	\$ 0	\$ 0	\$ 0		\$ 0	\$120,460	

Name of Local Health Department: Tero County Public Health Department

5 | Page

29

COVID-19 Reporting examples

COVID-19 Reporting in Year End Number and Expenditure Reporting

Local Health Department Name	Performance Measure	Performance Measure	Performance Measure	COVID 19 Activities	TOTAL Numbers Served MCH	TOTAL MCH Expended \$	MCH Allocation \$
	SPRM2				3,338		
		\$	\$	\$		\$22,270	\$40,270
		\$	\$	\$	278	\$18,000	
		\$	\$	\$	0	\$ 0	
		\$	\$	\$	0	\$ 0	
SUBTOTAL CHILDREN					3,616	\$40,270	\$40,270
		\$	\$	\$	42	\$ 0	
		\$	\$	\$	25	\$11,190	\$11,190
		\$	\$	\$	25	\$1,475	
		\$	\$	\$	298	\$ 0	
		\$	\$	\$	323	\$ 0	
		\$	\$	\$	1	\$32,125	\$33,600
		\$	\$	\$	13	\$7,400	
SUBTOTAL ALL OTHERS					4,054	\$80,190	\$80,190
TOTAL Numbers Served		3,742	105	3,517	0	0	
TOTAL MCH Amount Expended		\$44,790	\$1,000	\$29,600	\$ 0	\$ 0	\$45,070

COVID-19 Reporting in Year End Report Activity | Expenditure

TCPHD October Newsletter featured Safe Sleep information to promote awareness. (1)
 Staff distributed one-press release in October for Safe Sleep Awareness month and one in May prior to summer holiday/vacations (2)
 LMCH funds were diverted for radio spots on local station for vaccine distribution and covid-19 testing sites reaching 103,000 users (N=1) -- \$18,000

30

COVID-19 Reporting examples

COVID-19 Reporting in Year End Number and Expenditure Reporting

Local Performance Measure (specify)									
Performance Measure	SPM2	Performance Measure	Performance Measure	COVID 19 Activities	TOTAL Numbers Served MCH	TOTAL MCH Expended \$	MCH Allocation \$		
	3,206			27	3,338				
	\$12,200	\$	\$	\$9,070	278	\$22,270	\$40,270		
	\$	\$	\$	\$18,000	0	\$18,000			
	\$	\$	\$	\$	0	\$0			
SUBTOTAL CHILDREN					3,616	\$40,270	\$40,270		
					0	\$0			
					42	\$0			
					25	\$1,475	\$11,190	\$11,190	
					25	\$	\$		
					298	\$	\$		
					323	\$32,125	\$33,600		
					1	\$3,664	\$80,190	\$80,190	
					1	\$18,000	\$35,400	\$35,400	
SUBTOTAL ALL OTHERS					4,054	\$80,190	\$80,190		
					306	\$7,670	\$120,460	\$120,460	
TOTAL Numbers Served					3,742	105	3,517	0	0
TOTAL MCH Amount Expended					\$44,790	\$1,000	\$29,600	\$0	\$0
					\$45,070				

September 30, 2021, 400 eligible Tero County WIC had 1+ preventive dental visit in 1 year

Final Reporting
 meet, partially meet or miss your targeted objective? the objective metric attained.
 describe the progress in achieving each action step, number of deliverables achieved, which should match the in the Year End Outcome & Expenditure Table.
 describe any challenges/successes that were experienced.

#2 was not achieved with fluoride varnish
105 children ranging in age from 1 to 5 years

D-19 Reporting in Year End Report by Expenditure

Challenges: Due to COVID-19, clinical services such as WIC were remote; all school districts in Tero County were remote for the school year.

LMCH funds were diverted to provide contact tracing at two childcare centers for 27 children (\$9,070)

and 7% are found to have urgent dental needs that have gone untreated (2019)

The percentage of children age 1-18 who had 1+ preventive dental visit in 1 year will increase to 48.4%

LOCAL MATERNAL CHILD HEALTH PROGRAM

31

COVID-19 Reporting examples

COVID-19 Reporting in Year End Number and Expenditure Reporting

Local Performance Measure (specify)									
Performance Measure	SPM2	Performance Measure	Performance Measure	COVID 19 Activities	TOTAL Numbers Served MCH	TOTAL MCH Expended \$	MCH Allocation \$		
	3,206			27	3,338				
	\$12,200	\$	\$	\$18,000	278	\$22,270	\$40,270		
	\$	\$	\$	\$	0	\$18,000			
	\$	\$	\$	\$	0	\$0			
SUBTOTAL CHILDREN					3,616	\$40,270	\$40,270		
					0	\$0			
					42	\$0			
					25	\$1,475	\$11,190	\$11,190	
					25	\$	\$		
					298	\$	\$		
					323	\$32,125	\$33,600		
					1	\$3,664	\$80,190	\$80,190	
					1	\$18,000	\$35,400	\$35,400	
SUBTOTAL ALL OTHERS					4,054	\$80,190	\$80,190		
					306	\$7,670	\$120,460	\$120,460	
TOTAL Numbers Served					3,742	105	3,517	0	0
TOTAL MCH Amount Expended					\$44,790	\$1,000	\$29,600	\$0	\$0
					\$45,070				

herd immunity for children in Tero County
 ve: By September 30, 2021, T.CPHD will increase the percentage

in vaccinated at home visits coverage rates to 58.15%

Challenge: 43133142 coverage rates decreased at 44.7% (9/30/2020 quarterly immunization report card). The immunization rates declined during COVID-19 pandemic.
 Success: T.CPHD worked hard to ensure that WIC clients were offered and received immunizations needed to keep them up to date once clinics reopened.
 Challenge: Clinic service was halted during the pandemic. LMCH funds were diverted for vaccination distribution for 278 children (\$18,000).
 During the reporting period, T.CPHD mailed 1200 reminder letters sent

COVID-19 Reporting in Year End Report by Expenditure

LOCAL MATERNAL CHILD HEALTH PROGRAM

32

16



Unmute yourself to ask a question

OR

Type a question in the chat box.

What questions do you have regarding LMCH and COVID-19 reporting?

Sample Year End Report FY 2021

TERO COUNTY PUBLIC HEALTH DEPARTMENT

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES
 LOCAL MATERNAL CHILD HEALTH (MCH)
 SAMPLE YEAR END REPORT
 FY 2021 (10/1/2020 – 9/30/2021)
 (Please attach to Electronic Grants Administration and Management System (EGRAMS) on Final FSR – MCH Source of Funds Line)

Local MCH funds were made available to local health departments to address locally identified health needs of women and children in their jurisdictions. The Local Maternal Child Health (MCH) Grant Program Year End Report requires completion of the work plan submitted with the FY 19 budget application or amendment, numbers of individuals served and actual expended funds in your Fiscal Year 2018-2019 MCH programming. *Please note: this report should only include those activities and expenditures for which Local MCH funds were expended.*

Your Local Maternal Child Health Grant Program Year End Report is due November 15, 2021. The Local MCH Year End Report, approved by the department, is to be uploaded with the Final FSR into the Electronic Grants Administration and Management System (EGRAMS/MI E-Grants)

Contact information for further information
 Name of Local Health Department:
 Local MCH Contact Information
 Name: [Rilee Tesch](#)
 Email: TeschR@ilsafake.org
 Telephone: 989-555-1234
 Local MCH Allocation for FY 2021: \$120,460

Instructions

- I. The department moved toward utilizing work plans in the LMCH Plan to describe the data, activities and outcomes. The work plan also contains a green colored column on the far right which should be utilized for final LMCH reporting. Please utilize your FY 21 approved work plans and add information in the final reporting columns.
 1. Did you meet, partially meet or miss your targeted objective? Provide the objective metric attained.
 2. Briefly describe the progress in achieving each action step.
 3. State the number of deliverables achieved. This number should match the numbers in the Year End Number and Expenditure Table.
 4. Briefly describe any challenges and successes that were experienced.
- II. Complete the last column in the Types of Services Provided by reporting expended funds by direct service, enabling service and public health systems.
- III. Complete the Numbers and Expenditure Table.
- IV. As in previous years, the Urban/Rural Designation and Expenditure Table needs to be completed. MDHHS will complete this section, if desired.

If you have any questions regarding preparing the report, contact Trudy Esch at 517-241-3593 or email at MDHHS-Maternal-Child-Health@michigan.gov.

Name of Local Health Department: Tero County Public Health Department (TCPHD) 1 | Page

LOCAL MATERNAL CHILD HEALTH PROGRAM 35

35

SAMPLE – LMCH Work Plan – YEAR END REPORT FY 2021

Local Health Department Name: Tero County Public Health Department (TCPHD)

NPM #5: Safe Sleep

Goal: Ensure all Tero County infants have safe sleep environments

Objectives:
 1.) By 09/30/2021, TCPHD will provide safe sleep education to 40 prenatal mothers.
 2.) By September 30, 2021, TCPHD will train 30 first responders, FQHC staff, childcare providers, human service providers and faith-based communities in safe sleep practices.

Relevant Data	Evidence-based/informed or promising Strategies	Action Steps	Deliverables	Year End Final Reporting																				
Last baseline data and any trends noticed in the data. Please include the year and source of data. From 2015-2018, the rate of post-neonatal deaths related to unsafe sleep in Tero County was 1.4 per 10,000 (positional asphyxia) vs the Michigan rate of 1.3 per 10,000. In Tero County 3 in 5 infants that continue to be found unresponsive are not on their backs for sleep. 4 in 5 sleep-related deaths occur in an unsafe sleep location and 2 in 3 sleep-related deaths involve an infant sharing a sleep surface.	Promote infant safe sleep environmental interventions as recommended by AAP Provide consistent safe sleep messaging as recommended by AAP	Describe the specific steps you will use to achieve your goals and objectives. Include as many action steps as necessary to achieve the objectives. Only include activities for which you will use MCH funds. 1. Provide Safe Sleep education to women during the prenatal care class (prnc) series. 2. Provide pack and play cribs, along with safe sleep education to parents/grandparents, when criteria establishing need are met by home visiting staff 3. Consistent Safe Sleep messaging will be provided to the community as an outreach effort, with emphasis on women of color in the following forms: <ul style="list-style-type: none"> • Facebook posts • Presentations throughout the year • Health Department Newsletter article 	Estimated number of individuals to reach, number of outputs, or an anticipated product. 40 pregnant women will complete the safe sleep education component of the prnc series 25 parents / grandparents reached with evidence-based safe sleep education/pack-n-plays. 4 FB posts 4 presentations 1 newsletter article 2 print ads	1. Did you meet, partially meet or miss your targeted objective? Provide the objective metric attained. 2. Briefly describe the progress in achieving each action step. 3. State the number of deliverables achieved, which should match the numbers in the Year End Outcome & Expenditure Table. 4. Briefly describe any challenges/successes that were experienced. Objective #1 Met. During the prenatal class series 42 pregnant women completed the safe sleep education component, exceeding our objective. Due to the COVID-19 pandemic, staff were innovative and redesigned Safe Sleep classes to be conducted virtually over Zoom platform. Staff reported increased participation over Zoom than in previous face-to-face encounters. 25 caregivers (other individual) completed safe sleep education, met criteria for and received a pack-n-play/fitted sheet for infants needing a safe sleep environment. Staff continue to assess the sleeping environment for all families they visit. Success – exceeded objective of pregnant women completing safe sleep education. The agency re-established protocols for contact free pack-n-plays distribution. Challenges – The pandemic required innovative strategies to provide services. Learning new technology rapidly. Staff were pulled to work with the pandemic response leaving programming short staffed. Safe Sleep messaging campaign was successful. Quarterly Facebook posts on safe sleep total reach was 3,629. No community presentations on Safe Sleep were given because of the pandemic.																				
		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="4">Work Plan Incentives for NPM #5 Safe Sleep</th> </tr> <tr> <th>Item</th> <th>No</th> <th>Unit Cost</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Pack-n-Plays</td> <td>25</td> <td>\$50.00</td> <td>\$1,250</td> </tr> <tr> <td>Fitted Sheets</td> <td>25</td> <td>\$7.00</td> <td>\$175</td> </tr> <tr> <td></td> <td></td> <td>Total</td> <td>\$1,425</td> </tr> </tbody> </table>	Work Plan Incentives for NPM #5 Safe Sleep				Item	No	Unit Cost	Total	Pack-n-Plays	25	\$50.00	\$1,250	Fitted Sheets	25	\$7.00	\$175			Total	\$1,425		
Work Plan Incentives for NPM #5 Safe Sleep																								
Item	No	Unit Cost	Total																					
Pack-n-Plays	25	\$50.00	\$1,250																					
Fitted Sheets	25	\$7.00	\$175																					
		Total	\$1,425																					

Name of Local Health Department: Tero County Public Health Department (TCPHD) 2 | Page

LOCAL MATERNAL CHILD HEALTH PROGRAM 36

36

SAMPLE - LMCH Work Plan - YEAR END REPORT				FY 2021
NPM #5: Safe Sleep				
Goal: Ensure all Tero County infants have safe sleep environments				
Objectives: 1.) By 09/30/2021, TCPHD will provide safe sleep education to 40 prenatal mothers. 2.) By September 30, 2021, TCPHD will train 30 first responders, FQHC staff, childcare providers, human service providers and faith-based communities in safe sleep practices.				
Relevant Data	Evidence-based/informed or promising Strategies	Action Steps	Deliverables	Year End Final Reporting
List baseline data and any trends noticed in the data. Please include the year and source of data.	Strategies with moderate, scientifically rigorous or emerging evidence based on expert opinion.	Describe the specific steps you will use to achieve your goals and objectives. Include as many action steps as necessary to achieve the objectives. Only include activities for which you will use MCH funds.	Estimated number of individuals to reach, number of outputs, or an anticipated product.	1. Did you meet, partially meet or miss your targeted objective? Provide the objective metric attained. 2. Briefly describe the progress in achieving each action step. 3. State the number of deliverables achieved, which should match the numbers in the Year End Outcome & Expenditure Table. 4. Briefly describe any challenges/successes that were experienced.
		<ul style="list-style-type: none"> Print ads 		<p>TCPHD October Newsletter featured Safe Sleep information to promote awareness. (1) Staff distributed one press release in October for Safe Sleep Awareness month and one in May prior to summer holiday/vacations (2) LMCH funds were diverted for radio spots on local station for vaccine distribution and covid-19 testing sites reaching 103,000 users (N=1) - \$16,000</p> <p>The objective of providing Safe Sleep education to 10 First Responders was exceeded. Providing safe sleep education to childcare/faith community was not achieved.</p> <p>Staff worked with the Tero County Police and Fire Training Center to exceed projection of 10 reaching 18 police officers, fire fighters and EMS who were virtually trained on safe sleep practices. This training was well received, and we continue to work with this department to plan regular trainings for existing and new officers. Due to COVID-19, NO childcare centers, human service agencies or 4 faith-based communities were provided with safe sleep education. We provided education to 18, falling short of our projection of 20. (Population N = 3,629 + 1 + 2 + 18 = 3,650)</p> <p>Success: We were successful in reaching community first responders to educate on the ABCs of Safe Sleep. Challenge: Health Educator resigned. Still need greater outreach to women of color.</p>
Name of Local Health Department: Tero County Public Health Department (TCPHD)				
				3 Page
LOCAL MATERNAL CHILD HEALTH PROGRAM				

37

37

SAMPLE - LMCH Work Plan - YEAR END REPORT				FY 2021
Local Health Department Name: Tero County Public Health Department (TCPHD)				
NPM 13: Oral Health				
Goal: Enhance the oral health of the children seen in Tero WIC clinic				
Objective: 1) By September 30, 2021, 100 children in Tero County will receive dental services related to decay or urgent needs. 2) By September 30, 2021, 400 eligible Tero County WIC children will receive fluoride varnish 3) By September 30, 2021 Tero County will increase the percentage of beneficiaries (children) age 1-18 who had 1+ preventive dental visit in 1 year by 10% from 44% to 48.4%				
Relevant Data	Evidence-based/informed or promising Strategies	Action Steps	Deliverables	Year End Final Reporting
List baseline data and any trends noticed in the data. Please include the year and source of data.	Strategies with moderate, scientifically rigorous or emerging evidence based on expert opinion.	Describe the specific steps you will use to achieve your goals and objectives. Include as many action steps as necessary to achieve the objectives. Only include activities for which you will use MCH funds.	Estimated number of individuals to reach, number of outputs, or an anticipated product.	1. Did you meet, partially meet or miss your targeted objective? Provide the objective metric attained. 2. Briefly describe the progress in achieving each action step. 3. State the number of deliverables achieved, which should match the numbers in the Year End Outcome & Expenditure Table. 4. Briefly describe any challenges/successes that were experienced.
<p>In 2018, 44% of beneficiaries in Tero County had 1+ preventive dental visit in 1 year. (National Survey of Children's Health, 2018)</p> <p>Local dental screening exams conducted in Tero County as part of the Dental Sealant Program have identified 30% of the 2nd grade students in Tero County have dental decay, and 7% are found to have urgent dental needs that have gone untreated (2019)</p>	<p>Follow EPSDT periodicity schedule for oral health from AAPD, specifically topical fluoride application</p> <p>Assuring children get access to dental services as needed, with a focus on establishing a dental home by age 1</p>	<ol style="list-style-type: none"> Apply fluoride varnish to eligible children in WIC Provide oral health screenings to children (WIC, Head Start, schools). Children without a dental home will be referred. Referrals will be tracked through the EMR 	<p>400 children will have fluoride varnish applied as evidenced by EMR.</p> <p>600 children will be screened by the Dental Hygienist as evidenced by EMR.</p> <p>300 children (subgroup of 600) will be referred to a dental home (N= 400 + 600 = 1000)</p> <p>The percentage of children age 1-18 who had 1+ preventive dental visit in 1 year will increase to 48.4%</p>	<p>Objective #2 was not achieved with fluoride varnish applied to 105 children ranging in age from 1 to 5 years old in WIC clinic.</p> <p>Challenge: Services in WIC were remote through June 30, 2021</p> <p>Objective 1 was not met; The dental hygienist was unable to provide oral health screenings because children remained in remote settings.</p> <p>Objective 3 was achieved. The January 2021 report of 2019 data indicated the percentage of children age 1-18 who had 1+ preventive dental visit in 1 year increased to 48.4% in Tero County.</p> <p>Challenges: Due to COVID-19, clinical services such as WIC were remote; all school districts in Tero County were remote for the school year.</p> <p>LMCH funds were diverted to provide contact tracing at two childcare centers for 27 children (\$9,070)</p>
Name of Local Health Department: Tero County Public Health Department (TCPHD)				
				4 Page
LOCAL MATERNAL CHILD HEALTH PROGRAM				

38

38

SAMPLE - LMCH Work Plan - YEAR END REPORT				FY 2021
NPM or SPM 2: Immunizations - Children Goal: Herd immunity for children in Tero County Objective: By September 30, 2021, TCPHD will increase the percentage of 19-35-month-old children fully immunized (4:3:1:3:3:1:4:2 series) by 10% from 51% to 56.1%				
Relevant Data	Evidence-based/informed or promising Strategies	Action Steps	Deliverables	Year End Final Reporting
List baseline data and any trends noticed in the data. Please include the year and source of data. Percent 19-35 month olds with full schedule of age appropriate immunizations including: 4 doses of DTaP, 3 doses Polio, 1 dose MMR, 3 doses Hib, 3 doses Hep B, 1 dose Varicella, 4 doses PCV, and 2 Hep A (4:3:1:3:3:1:4:2 series) • State (56.2%) • Tero (51.0%) (MCR, December 2019)	Administer vaccine according to ACIP guidelines for infants and children *Recall and reminder letters have been shown to increase vaccination rates*	Describe the specific steps you will use to achieve your goals and objectives. Include as many action steps as necessary to achieve the objectives. Only include activities for which you will use MCH funds . 1. Provide age appropriate vaccinations to 19-35-month-old children (gap filling) 2. Vaccinate children in at risk families in their home, as needed (gap filling) 3. Send county-wide immunization recalls to children age 19-35 months who are not up to date on the 43133142-immunization schedule as identified by MCR	Estimated number of individuals to reach, number of outputs, or an anticipated product. 800 children 19-35 months will be vaccinated 10 children vaccinated at in-home visits 43133142 coverage rates increase to 56.1% 3200 reminder letters sent to children 19 - 35-month olds 36% children receiving recall return for vaccinations (N=800 +10* 3200 = 4010)	1. Did you meet, partially meet or miss your targeted objective? Provide the objective metric attained. 2. Briefly describe the progress in achieving each action step. 3. State the number of deliverables achieved, which should match the numbers in the Year End Outcome & Expenditure Table. 4. Briefly describe any challenges/successes that were experienced. TCPHD vaccinated 200 children aged 19-35 months that MCH funds were used to fill the funding gap during 4 th quarter 2021. 2 in-home visits were made where 3 children were vaccinated at each home for a total of 6 children in hard to reach at risk uninsured families during July 2021. Challenge: 43133142 coverage rates decreased at 44.7% (9/30/3030 quarterly immunization report card). The immunization rates declined during COVID-19 pandemic. Success: TCPHD worked hard to ensure that WIC clients were offered and received immunizations needed to keep them up to date once clinics reopened Challenge: Clinic service was halted during the pandemic. L MCH funds were diverted for vaccination distribution for 275 adolescents (\$19,000) During the reporting period, TCPHD mailed 1200 recalls to children 19-35 months of age who were overdue for vaccinations, and an additional 1,800 recall letters were sent to children specifically enrolled in WIC (Total 3000 recall reminder letters). 26.4% of children aged 19-35 months of age who received a recall reminder returned for vaccinations
Name of Local Health Department: Tero County Public Health Department (TCPHD)				5 Page
LOCAL MATERNAL CHILD HEALTH PROGRAM				39

39

SAMPLE - LMCH Work Plan - YEAR END REPORT				FY 2021
NPM or SPM 2: Immunizations - Children Goal: Herd immunity for children in Tero County Objective: By September 30, 2021, TCPHD will increase the percentage of 19-35-month-old children fully immunized (4:3:1:3:3:1:4:2 series) by 10% from 51% to 56.1%				
Relevant Data	Evidence-based/informed or promising Strategies	Action Steps	Deliverables	Year End Final Reporting
List baseline data and any trends noticed in the data. Please include the year and source of data.	Strategies with moderate, scientifically rigorous or emerging evidence based on expert opinion.	Describe the specific steps you will use to achieve your goals and objectives. Include as many action steps as necessary to achieve the objectives. Only include activities for which you will use MCH funds .	Estimated number of individuals to reach, number of outputs, or an anticipated product.	1. Did you meet, partially meet or miss your targeted objective? Provide the objective metric attained. 2. Briefly describe the progress in achieving each action step. 3. State the number of deliverables achieved, which should match the numbers in the Year End Outcome & Expenditure Table. 4. Briefly describe any challenges/successes that were experienced.
	'Enhance knowledge of vaccines among parents' Increase community awareness of childhood vaccines	4. Provide waiver education to families. Provide education opportunities regarding vaccines & immunization schedules during clinic visits for vaccines & waivers, and during WIC visits 5. Set up vaccine messaging with phone holds within health department clinics 6. Analyze MCR data for accurate and current number of children in jurisdiction 7. Create and implement a social media campaign focusing on childhood immunizations (one social media post per month)	300 of families (other individual) who receive waiver education Vaccine messages in clinic completed (n=1) MCR data analyzed (N=1) 12 social media posts (one monthly)	falling short of anticipated deliverable. The pandemic impacted this rate. (Children N = 200 + 6 + 3000 = 3200) T C PHD provided 298 waiver appointments to parents and families. Waiver appointments include the most up to date information, recommended schedules and education from trustworthy sources. T C PHD waiver rate is 4.8% which is above the Michigan waiver rate of 4.4%. [September 2020 quarterly immunization report card] Challenges include increased number of parents requesting waivers. Unable to set up vaccine messaging for phone holds in the system due to IT restrictions and buy in from other county departments. Will continue to work on this in the future. MCR data analyzed and updated. This is an ongoing effort. T C PHD was able to post immunization information on monthly social media platforms (Face Book, Instagram, and Twitter). (Population N = 0 + 1 + 12 = 13)
Name of Local Health Department: Tero County Public Health Department (TCPHD)				6 Page
LOCAL MATERNAL CHILD HEALTH PROGRAM				40

40

SAMPLE - Year End Number and Expenditure Reporting FY 2021

Complete the Table below identifying how your FY 2021 Local MCH funds were expended and the actual numbers served. *The actual number served should be an unduplicated count.* Please round expenditures to the nearest whole dollar. The last column is for your allocation from your LMCH Plan. Legislation mandates the reporting of the actual number of women, children and adolescents served and amounts expended for each group with LMCH grant funds for the fiscal year. For the purposes of reporting in this plan, infants 0 – 12 months, children are 1-9 years of age, adolescents are 10-21 years of age and women are 22 years and older. **Use the hatch sign/F9 key to update the totals in Table.**

Local Health Department Name: Tero County Public Health Department (TCPHD)

Population Classifications	Numbers Served & MCH Funds Expended UNDUPLICATED COUNTS	National/State/Local Performance Measure (specify)					COVID 19 Activities	TOTAL Numbers Served MCH	TOTAL MCH Expended \$	MCH Allocation \$
		Performance Measure NPM5	Performance Measure NPM13	Performance Measure SPM2	Performance Measure	Performance Measure				
Children age 1 – 9 years	Number served		105	3,206			27	3,338		
	MCH Amount Expended \$	\$	\$1,000	\$12,200	\$	\$	\$9,070		\$22,270	\$40,270
Adolescents age 10 – 21 years (includes teen parents)	Number served						278	278		
	MCH Amount Expended \$	\$	\$	\$	\$	\$	\$18,000		\$18,000	
CYSHCN ages 0 – 21 years	Number served						0	0		
	MCH Amount Expended \$	\$	\$	\$	\$	\$	\$	\$	\$ 0	
SUBTOTAL CHILDREN								3,616	\$40,270	\$40,270
Women age 22 – 44 years, (includes mothers beyond postpartum)	Number served							0		
	MCH Amount Expended \$	\$	\$	\$	\$	\$	\$	\$	\$ 0	
Pregnant A person from conception to 60 days after birth, delivery, or expulsion of fetus	Number served		42					42		
	MCH Amount Expended \$	\$11,190	\$	\$	\$	\$	\$	\$	\$11,190	\$11,190
Infants age 0 – 364 days	Number served		25					25		
	MCH Amount Expended \$	\$1,475	\$	\$	\$	\$	\$	\$	\$1,475	
Other Individual Men > 21, fathers, non-binary individuals, grandparents, guardians, etc.	Number served		25	298				323		
	MCH Amount Expended \$	\$22,125	\$	\$10,000	\$	\$	\$	\$	\$32,125	\$33,600
Population community members, providers, staff, media analytics, etc.	Number served		3650	13			1	3,664		
	MCH Amount Expended \$	\$10,000	\$	\$7,400	\$	\$	\$18,000	\$	\$35,400	\$35,400
SUBTOTAL ALL OTHERS								4,054	\$80,190	\$80,190
TOTAL Numbers Served		3,742	105	3,517	0	0	0	306	7,670	
TOTAL MCH Amount Expended		\$44,790	\$1,000	\$29,600	\$ 0	\$ 0	\$45,070		\$120,460	\$120,460

Name of Local Health Department: Tero County Public Health Department (TCPHD)

7 | Page

41

SAMPLE - Year End Number and Expenditure Reporting FY 2021

Complete the Table below identifying how your FY 2021 Local MCH funds were expended and the actual numbers served. *The actual number served should be an unduplicated count.* Please round expenditures to the nearest whole dollar. The last column is for your allocation from your LMCH Plan. Legislation mandates the reporting of the actual number of women, children and adolescents served and amounts expended for each group with LMCH grant funds for the fiscal year. For the purposes of reporting in this plan, infants 0 – 12 months, children are 1-9 years of age, adolescents are 10-21 years of age and women are 22 years and older. **Use the hatch sign/F9 key to update the totals in Table.**

Local Health Department Name: Tero County Public Health Department (TCPHD)

Population Classifications	Numbers Served & MCH Funds Expended UNDUPLICATED COUNTS	National/State/Local Performance Measure (specify)					COVID 19 Activities	TOTAL Numbers Served MCH	TOTAL MCH Expended \$	MCH Allocation \$
		Performance Measure NPM5	Performance Measure NPM13	Performance Measure SPM2	Performance Measure	Performance Measure				
Children age 1 – 9 years	Number served		105				27	3,338		
	MCH Amount Expended \$	\$	\$1,000	\$12,200	\$	\$	\$9,070		\$22,270	\$40,270
Adolescents age 10 – 21 years (includes teen parents)	Number served						278	278		
	MCH Amount Expended \$	\$	\$	\$	\$	\$	\$18,000		\$18,000	
CYSHCN ages 0 – 21 years	Number served						0	0		
	MCH Amount Expended \$	\$	\$	\$	\$	\$	\$	\$	\$ 0	
SUBTOTAL CHILDREN								3,616	\$40,270	\$40,270
Women age 22 – 44 years, (includes mothers beyond postpartum)	Number served							0		
	MCH Amount Expended \$	\$	\$	\$	\$	\$	\$	\$	\$ 0	
Pregnant A person from conception to 60 days after birth, delivery, or expulsion of fetus	Number served		42					42		
	MCH Amount Expended \$	\$11,190	\$	\$	\$	\$	\$	\$	\$11,190	\$11,190
Infants age 0 – 364 days	Number served		25					25		
	MCH Amount Expended \$	\$1,475	\$	\$	\$	\$	\$	\$	\$1,475	
Other Individual Men > 21, fathers, non-binary individuals, grandparents, guardians, etc.	Number served		25	298				323		
	MCH Amount Expended \$	\$22,125	\$	\$10,000	\$	\$	\$	\$	\$32,125	\$33,600
Population community members, providers, staff, media analytics, etc.	Number served		3650	13			1	3,664		
	MCH Amount Expended \$	\$10,000	\$	\$7,400	\$	\$	\$18,000	\$	\$35,400	\$35,400
SUBTOTAL ALL OTHERS								4,054	\$80,190	\$80,190
TOTAL Numbers Served		3,742	105	3,517	0	0	0	306	7,670	
TOTAL MCH Amount Expended		\$44,790	\$1,000	\$29,600	\$ 0	\$ 0	\$45,070		\$120,460	\$120,460

105 Children

Name of Local Health Department: Tero County Public Health Department (TCPHD)

7 | Page

42

SAMPLE - Year End Number and Expenditure Reporting							FY 2021			
<p>Complete the Table below identifying how your FY 2021 Local MCH funds were expended and the actual numbers served. <i>The actual number served should be an unduplicated count.</i> Please round expenditures to the nearest whole dollar. The last column is for your allocation from your LMCH Plan. Legislation mandates the reporting of the actual number of women, children and adolescents served and amounts expended for each group with LMCH grant funds for the fiscal year. For the purposes of reporting in this plan, infants 0 – 12 months, children are 1-9 years of age, adolescents are 10-21 years of age and women are 22 years and older. Use the hatch sign/F9 key to update the totals in Table.</p>										
Local Health Department Name: Tero County Public Health Department (TCPHD)										
Population Classifications	Numbers Served & MCH Funds Expended UNDULICATED COUNTS	National/State/Local Performance Measure (specify)					COVID 19 Activities	TOTAL Numbers Served MCH	TOTAL MCH Expended \$	MCH Allocation \$
		Performance Measure NPM5	Performance Measure NPM13	Performance Measure SPM2	Performance Measure	Performance Measure				
Children age 1 – 9 years	Number served		105	3,206			27	3,338		
	MCH Amount Expended \$	\$	\$1,000	\$12,200	\$	\$	\$9,070		\$22,270	\$40,270
Adolescents age 10 – 21 years (includes teen parents)	Number served						278	278		
	MCH Amount Expended \$	\$	\$	\$	\$	\$	\$18,000		\$18,000	
CYSHCN ages 0 – 21 years	Number served						0	0		
	MCH Amount Expended \$	\$	\$	\$	\$	\$	\$	\$0	\$0	
SUBTOTAL CHILDREN								3,616	\$40,270	\$40,270
Women age 22 – 44 years, (includes mothers beyond postpartum)	Number served						0	0		
	MCH Amount Expended \$	\$	\$	\$	\$	\$	\$	\$0	\$0	
Pregnant A person from conception to 80 days after birth, delivery, or expulsion of fetus	Number served		42					42		
	MCH Amount Expended \$	\$11,190	\$	\$	\$	\$	\$	\$	\$11,190	\$11,190
Infants age 0 – 364 days	Number served		25					25		
	MCH Amount Expended \$	\$1,475	\$	\$	\$	\$	\$	\$	\$1,475	
Other Individual Men > 21, fathers, non-binary individuals, grandparents, guardians, etc.	Number served		25	298				323		
	MCH Amount Expended \$	\$22,125	\$	\$10,000	\$	\$	\$	\$	\$32,125	\$33,600
Population community members, providers, staff, media analytics, etc.	Number served		3650	13			1	3,664		
	MCH Amount Expended \$	\$10,000	\$	\$7,400	\$	\$	\$18,000	\$	\$35,400	\$35,400
SUBTOTAL ALL OTHERS								4,054	\$80,190	\$80,190
TOTAL Numbers Served		3,742	105	3,517	0	0	306	7,670		
TOTAL MCH Amount Expended		\$44,790	\$1,000	\$29,600	\$0	\$0	\$45,070		\$120,460	\$120,460

200
+ 6
+ 3000
= 3206
Children

43

SAMPLE - Year End Number and Expenditure Reporting							FY 2021			
<p>Complete the Table below identifying how your FY 2021 Local MCH funds were expended and the actual numbers served. <i>The actual number served should be an unduplicated count.</i> Please round expenditures to the nearest whole dollar. The last column is for your allocation from your LMCH Plan. Legislation mandates the reporting of the actual number of women, children and adolescents served and amounts expended for each group with LMCH grant funds for the fiscal year. For the purposes of reporting in this plan, infants 0 – 12 months, children are 1-9 years of age, adolescents are 10-21 years of age and women are 22 years and older. Use the hatch sign/F9 key to update the totals in Table.</p>										
Local Health Department Name: Tero County Public Health Department (TCPHD)										
Population Classifications	Numbers Served & MCH Funds Expended UNDULICATED COUNTS	National/State/Local Performance Measure (specify)					COVID 19 Activities	TOTAL Numbers Served MCH	TOTAL MCH Expended \$	MCH Allocation \$
		Performance Measure NPM5	Performance Measure NPM13	Performance Measure SPM2	Performance Measure	Performance Measure				
Children age 1 – 9 years	Number served		105	3,206			27	3,338		
	MCH Amount Expended \$	\$	\$1,000	\$12,200	\$	\$	\$9,070		\$22,270	\$40,270
Adolescents age 10 – 21 years (includes teen parents)	Number served						278	278		
	MCH Amount Expended \$	\$	\$	\$	\$	\$	\$18,000		\$18,000	
CYSHCN ages 0 – 21 years	Number served						0	0		
	MCH Amount Expended \$	\$	\$	\$	\$	\$	\$	\$0	\$0	
SUBTOTAL CHILDREN								3,616	\$40,270	\$40,270
Women age 22 – 44 years, (includes mothers beyond postpartum)	Number served						0	0		
	MCH Amount Expended \$	\$	\$	\$	\$	\$	\$	\$0	\$0	
Pregnant A person from conception to 80 days after birth, delivery, or expulsion of fetus	Number served		42					42		
	MCH Amount Expended \$	\$11,190	\$	\$	\$	\$	\$	\$	\$11,190	\$11,190
Infants age 0 – 364 days	Number served		25					25		
	MCH Amount Expended \$	\$1,475	\$	\$	\$	\$	\$	\$	\$1,475	
Other Individual Men > 21, fathers, non-binary individuals, grandparents, guardians, etc.	Number served		25	298				323		
	MCH Amount Expended \$	\$22,125	\$	\$10,000	\$	\$	\$	\$	\$32,125	\$33,600
Population community members, providers, staff, media analytics, etc.	Number served		3650	13			1	3,664		
	MCH Amount Expended \$	\$10,000	\$	\$7,400	\$	\$	\$18,000	\$	\$35,400	\$35,400
SUBTOTAL ALL OTHERS								4,054	\$80,190	\$80,190
TOTAL Numbers Served		3,742	105	3,517	0	0	306	7,670		
TOTAL MCH Amount Expended		\$44,790	\$1,000	\$29,600	\$0	\$0	\$45,070		\$120,460	\$120,460

42
Pregnant

25
Other Individual

25
Infant

44

SAMPLE - Year End Number and Expenditure Reporting FY 2021

Complete the Table below identifying how your FY 2021 Local MCH funds were expended and the actual numbers served. *The actual number served should be an unduplicated count.* Please round expenditures to the nearest whole dollar. The last column is for your allocation from your LMCH Plan. Legislation mandates the reporting of the actual number of women, children and adolescents served and amounts expended for each group with LMCH grant funds for the fiscal year. For the purposes of reporting in this plan, infants 0 – 12 months, children are 1-9 years of age, adolescents are 10-21 years of age and women are 22 years and older. **Use the hatch sign/F9 key to update the totals in Table.**

Local Health Department Name: Tero County Public Health Department (TCPHD)

Population Classifications	Numbers Served & MCH Funds Expended UNDUPLICATED COUNTS	National/State/Local Performance Measure (specify)						TOTAL Numbers Served MCH	TOTAL MCH Expended \$	MCH Allocation \$
		Performance Measure NPM5	Performance Measure NPM13	Performance Measure SPM2	Performance Measure	Performance Measure	COVID 19 Activities			
Children age 1 – 9 years	Number served		105	3,206			27	3,338		
	MCH Amount Expended \$	\$	\$1,000	\$12,200	\$	\$	\$9,070		\$22,270	\$40,270
Adolescents age 10 – 21 years (includes teen parents)	Number served						278	278		
	MCH Amount Expended \$	\$	\$	\$	\$	\$	\$18,000		\$18,000	
CYSHCN ages 0 – 21 years	Number served						0	0		
	MCH Amount Expended \$	\$	\$	\$	\$	\$	\$	\$	\$0	\$0
SUBTOTAL CHILDREN								3,616	\$40,270	\$40,270
Women age 22 – 44 years, (includes mothers beyond postpartum)	Number served							0		
	MCH Amount Expended \$	\$	\$	\$	\$	\$	\$	\$	\$0	\$0
Pregnant A person from conception to 60 days after birth, delivery, or expulsion of fetus	Number served	42						42		
	MCH Amount Expended \$	\$11,190	\$	\$	\$	\$	\$	\$	\$11,190	\$11,190
Infants age 0 – 364 days	Number served	25						25		
	MCH Amount Expended \$	\$1,475	\$	\$	\$	\$	\$	\$	\$1,475	\$1,475
Other Individual Men > 21, fathers, non-binary individuals, grandparents, guardians, etc.	Number served	25		298				323		
	MCH Amount Expended \$	\$22,125	\$	\$10,000	\$	\$	\$	\$	\$32,125	\$32,125
Population community members, providers, staff, media analysts, etc.	Number served	3650					1	3,664		
	MCH Amount Expended \$	\$10,000	\$	\$7,400	\$	\$	\$18,000	\$	\$35,400	\$35,400
SUBTOTAL ALL OTHERS								4,054	\$80,190	\$80,190
TOTAL Numbers Served		3,742	105	3,517	0	0	306	7,670		
TOTAL MCH Amount Expended		\$44,790	\$1,000	\$29,600	\$0	\$0	\$45,070		\$120,460	\$120,460

3650 Population

Name of Local Health Department: Tero County Public Health Department (TCPHD)

7 | Page

45

SAMPLE - Types of Services Provided by LMCH Expended FY 2021

Local Health Department Name: Tero County Public Health Department (TCPHD)

Instructions: Complete the "Budget" column with your LMCH annual plan.

Complete the "Expended" column with your LMCH year-end report.

Type of Service	Budgeted (Plan)	Expended (Report)
1. Direct Services (sum of a, b, & c)	\$30,270	\$24,200
a. Preventive and primary care services for pregnant women, mothers, and infants up to age one	\$	\$
b. Preventive and primary care services for children 1-21	\$30,270	\$24,200
c. Services for CSHCN	\$	\$
2. Enabling Services	\$31,190	\$38,735
3. Public Health Services and Systems (i.e., Infrastructure)	\$59,000	\$57,525
TOTAL (sum of lines 1, 2, & 3)	\$120,460	\$120,460

Explanation of numbers in table for illustrative purposes - EXPENDED:

	Direct	Direct	Enabling	Enabling	PHI	PHI
NPM 5 (Safe Sleep)			Safe sleep education to prenatal women Pack and plays COVID-19 contact tracing	\$11,190 \$1,475 \$9,070	Training 25 grandparents and 10 first responders, 20 childcare and 11 media posts COVID-10 media	\$22,125 \$10,000 \$18,000
NPM 13 (Oral Health)	Fluoride Varnish – 105 children NO Oral Health screening	\$1,000				
SPM 2 (Imms-child)	Vaccinations for 19-35 mo, 200 children 6 children vaccinated in-home COVID-19 vaccination to adolescents	\$5,200 \$18,000	County wide recall to 3200 children Waiver education to 300 families	\$7,000 \$10,000	Vaccine messaging, social media and MCIR data analysis (n=14)	\$7,400
TOTAL		\$24,200		\$38,735		\$57,525

Name of Local Health Department: Tero County Public Health Department (TCPHD)

8 | Page

46

SAMPLE - LMCH Urban | Rural Designation & Expenditure
FY 2021

Legislation mandates reporting a breakdown For the purposes of this report, rural means a

SAMPLE - Year End Number and Expenditure Reporting
FY 2021

TABLE: MDHHS WILL COMPLETE THIS, IF IT

Complete the Table below identifying how your FY 2021 Local MCH funds were expended and the actual numbers served. *The actual number served should be an unduplicated count.* Please round expenditures to the nearest whole dollar. The last column is for your allocation from your LMCH Plan. Legislation mandates the reporting of the actual number of women, children and adolescents served and amounts expended for each group with LMCH grant funds for the fiscal year. For the purposes of reporting in this plan, infants 0 – 12 months, children are 1-9 years of age, adolescents are 10-21 years of age and women are 22 years and older. Use the hatch sign/F9 key to update the totals in Table.

URBAN/RURAL DESIGNATION & EXPENDITURE
Please round expenditures to nearest whole

Urban Counties	Expenditures
Tero	\$120,460
Rural Counties*	Expenditures

Local Health Department Name: Tero County Public Health Department (TCPHD)

Population Classifications	Numbers Served & MCH Funds Expended <small>UNDUPLICATED COUNTS</small>	National/State/Local Performance Measure (specify)					COVID-19 Activities	TOTAL Numbers Served MCH	TOTAL MCH Expended \$	MCH Allocation \$
		Performance Measure NPM6	Performance Measure NPM13	Performance Measure SPM2	Performance Measure	Performance Measure				
Children age 1 – 9 years	Number served MCH Amount Expended \$		105	3,298			27	3,338	\$22,270	\$40,270
Adolescents age 10 – 21 years <small>(includes teen parents)</small>	Number served MCH Amount Expended \$						278	278		\$18,000
CYSHCN ages 0 – 21 years	Number served MCH Amount Expended \$						0	0		
SUBTOTAL CHILDREN								3,616	\$40,270	\$40,270
Women age 22 – 44 years, (includes mothers beyond postpartum)	Number served MCH Amount Expended \$							0		
Pregnant <small>A person from conception to 60 days after birth, delivery, or expiration of fetus</small>	Number served MCH Amount Expended \$		42					42		\$11,190
Infants age 0 – 364 days	Number served MCH Amount Expended \$		25					25		\$1,475
Other Individual Men > 21, fathers, non-stay individuals, grandparents, guardians, etc.	Number served MCH Amount Expended \$		25	258				323		\$32,125
Population community members, providers, staff, media analysts, etc.	Number served MCH Amount Expended \$		3650	\$10,000	\$13			3,664		\$35,400
SUBTOTAL ALL OTHERS								4,056	\$88,120	\$80,190
TOTAL Numbers Served			3,742	105	3,517		0	306		
TOTAL MCH Amount Expended			\$44,790	\$1,000	\$29,600		\$0	\$45,070	\$120,460	\$120,460

Name of Local Health Department: Tero County Public Health Department (TCPHD)

Page 9 | Page

47

DUE DATE

Final FSR
FY 2021

Grants Division Timeline –
**Final FSRs for FY 2021 due
November 30, 2021**

REMINDER: The FSR MCH
Source of funds line must
match The Numbers and
Expenditure Table.

LOCAL MATERNAL CHILD HEALTH PROGRAM

FY 2021 LMCH Year End Report
due Date is November 15, 2021

Exceptions/extensions considered on an
individual agency basis – email:

MDHHS-Maternal-Child-Health@michigan.gov

48

48



Unmute yourself to ask a question

OR

Type a question in the chat box.

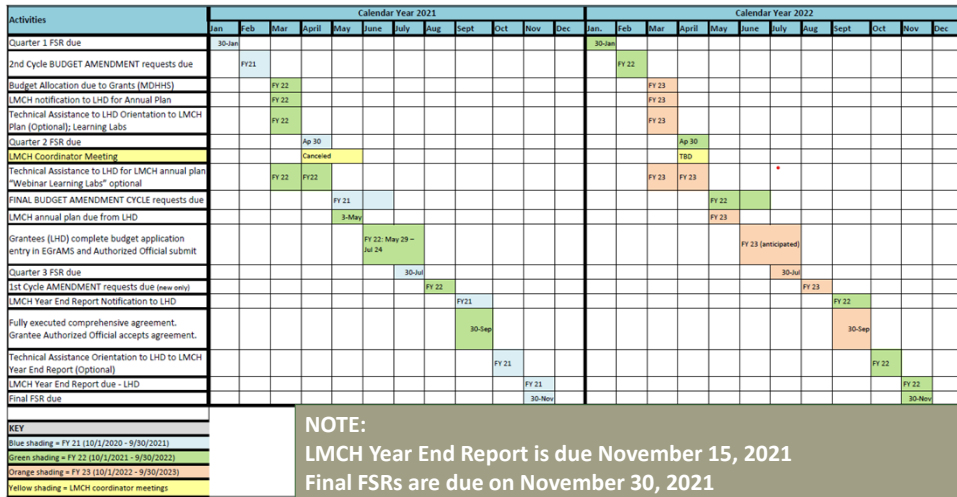
What questions do you have regarding the SAMPLE LMCH Year End Report?

LMCH Amendment Schedule FY 2022

NUMBER OF AMENDMENTS CHANGING

LMCH Timeline – Amended 7/14/2021

Local MCH Working Timeline Subject to change



Amended 7/14/2021

51

Amendment Schedule FY 2022 Local Health Departments

FY 2022 LMCH Amendment Request Schedule Timeline

FY 2022	LMCH (amended) Plans and Amendment requests due	Amendments Request due to DCAH budget liaison	Amendment Request Due Grants	Effective Date
Original Agreement	May 3, 2021 FY 22 LMCH Plan due		March 4, 2021	October 1, 2021
Amendment #1 (new projects only)	NA	NA	August 19, 2021	November 1, 2021
Amendment #2	January 27, 2022	February 3, 2022	February 24, 2022	May 1, 2022
Amendment #3 (Final)	May 10, 2022	May 17, 2022	June 7, 2022	August 1, 2022

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES
BUREAU OF GRANTS AND PURCHASING
GRANTS DIVISION
Fiscal Year 2022 Amendment Schedule

Compiled August 12, 2021

Document	Amendment Request Due Date	AdBoard Due to Tech**	AdBoard Approval	Anticipated Consolidation Date	New Project Start Date/Effective Date
Original Agreement	March 4, 2021	July 9, 2021	August 10, 2021	August 31, 2021	October 1, 2021
Amendment #1 (new projects only)	August 19, 2021	August 26, 2021	September 28, 2021	October 19, 2021	November 1, 2021
Amendment #2	February 24, 2022	March 11, 2022	April 12, 2022	April 21, 2022	May 1, 2022
Amendment #3 (Final)	June 7, 2022	June 5, 2022	July 12, 2022	July 15, 2022	August 1, 2022

52



What other questions do you have regarding LMCH?

LOCAL MATERNAL CHILD HEALTH PROGRAM

REMEMBER
You can ask questions
any time
related to LMCH

- Email
- Phone call
- Conference call
- 1: 1 Teams meetings

53

53



Trudy Esch, MS, BSN, RN

Pronouns: she/her/ella

MCH Nurse Consultant

Michigan Department of Health and Human Services

Division of Child and Adolescent Health

Washington Square Building

109 W Michigan Ave, 1st Floor,

Lansing, MI 48913



517-243-3087 [NEW PHONE NUMBER]



517-335-8697



escht@michigan.gov



www.michigan.gov/mdhhs



LOCAL MATERNAL CHILD HEALTH PROGRAM

54

54