Maternal and Child Health Services

Rosalyn K. Bacon, M.P.H.
Joann E. Smith, PhD, RN, APHN-BC, CNE
Danica Carswell, MS, RD, LD, CLC

7.25.2018
Maternal and Child Health Programs

➤ Seek to ensure the health and well-being of women and children across their lives, when a woman is of childbearing age, when a woman is pregnant; when a child is born, if the child has special health care needs; and as a child grows (age 21)
Women, Infants, and Children (WIC):

USDA’s special supplemental nutrition program which aims to improve health outcomes of low income women, infants, and children.
Which populations does WIC serve?

- Pregnant mothers: 9 months (or length of pregnancy)
- Breastfeeding mothers: 1 year after delivery
- Non-Breastfeeding mothers: 6 months after delivery
- Infants/Children: until 5 years of age
What does WIC provide?

- Nutrition Assessment and Education
- Breastfeeding Support
- Referrals to other programs & services
- Vouchers for Healthy Foods
  • ($35-$45 value per participant, per month)
- Vouchers and onsite access to WIC Farmer’s Markets each summer at select Fulton locations
  • ($30 value per participant, up to $90 per family)
Where is WIC in Fulton County?

- North Fulton Regional
- North Annex/ North Fulton Service Center
- Center for Health and Rehabilitation
- Neighborhood Union
- Oak Hill
- Adamsville Regional
- College Park Regional
Program Accomplishments

- Services ~9500 participants each month
-Continues to meet federal appointment processing standards each quarter
-Farmer’s Market accomplishments:
  - FFY 2014 and 2015: 2nd place for Highest Redemption Rate
  - FFY 2016 and 2017: 1st place for Highest Redemption Rate
-Breastfeeding accomplishments:
  - FFY 2017: Gold Level Loving Support Award of Excellence
  - SFY 2018: District non-breastfeeding rate (87.01%) vs. Statewide average (87.33%)
  - SFY 2018: District mostly breastfeeding rate (7.97%) exceeded statewide average (6.96%)
MATERNAL AND CHILD HEALTH SERVICES

Joann E. Smith, PhD, RN, APHN, CNE
MCH Director
Children 1st /First Care

Children 1st is the single point of entry to child health services, providing a structure to identify children, birth – 5 years of age, who are at risk of poor health / and or developmental outcomes.

Purpose: To ensure that optimal health and developmental opportunities are provided through identified needs and implementation of interventions (services).

First Care offered as a service through Children 1st and is only available in a select number of districts.
Early Hearing Detection And Intervention (EHDI)

EHDI maintains and supports a comprehensive coordinated screening and referral system for newborns, infants, children, and youth.

Coming Fall 2018
Screening Booth
BABIES CAN’T WAIT (BCW) - The Babies Can’t Wait (BCW) Program is Georgia’s statewide early intervention system for infants and toddlers with special needs, aged birth to three, and their families. This program is required under the Individuals with Disabilities Education Act (IDEA).

Purpose: Provide services to meet the developmental needs of eligible children, identified through Children 1st program.
CMS provides community based, care coordinated family-focused, culturally appropriate, comprehensive specialty health care and transition services for children from birth to 21 years of age, with special health care needs.
BIRTH TO AGE 5 WORKFLOW

LITTLE JOHNNY’S STORY
Priority for 2019: Home Visiting Services for Families and Children Birth to Age 3

Parents As Teachers® (PAT) Goals
1. Increase parent knowledge of early child development and improve parent practices
2. Provide early detection of developmental delay and health issues
3. Prevent child abuse and neglect
4. Increase children’s school readiness and success

PAT® components
• Personal (home visits)
• Group connections
• Resource network
• Child screening

Target caseload
By the end of year 1: 80-100 families

Launch October 2018

Implement Parents as Teachers© as evidence-based curriculum

IMPACT

↑ Prenatal enrollment         ↑ Children with a medical home
↑ Depression screening       ↑ Parents receiving child safety info
↑ Post partum visits         ↑ Children receiving developmental screening
↑ Positive parent-child interaction ↑ Families with appropriate referrals
↑ Parenting knowledge        ↑ Communication between/among providers
↑ Knowledge child development ↑ Immunizations up-to-date
↑ Early language development/health literacy ↑ Increase Risk Screenings (Depression and psychosocial)
QUESTIONS AND ANSWERS