

State Action Plan Table (Delaware)

Women/Maternal Health

State Priority Needs	Objectives	Strategies	National Outcome Measures	National Performance Measures	ESMs	SPMs
To increase the number of women who have a preventive visit to optimize the health of women before, between and beyond pregnancies.	By July 2020, increase percentage of women with birth interval >18 months.	Educate and counsel women of reproductive age (ages 14-44) about all contraceptive methods that are safe and appropriate for them and describe the most effective methods first.  Provide training and technical assistance to health care providers about education and counseling methods, buy-in, and encounter time required for adequate counseling to increase women's access to the full range of contraceptive methods, including the long acting reversible methods, IUDs and implants.  Collaborate with community providers	Rate of severe maternal morbidity per 10,000 delivery hospitalizations	Percent of women with a past year preventive medical visit		
	By July 2020, reduce unintended pregnancy rate by 10%.		Maternal mortality rate per 100,000 live births			
			Percent of low birth weight deliveries (<2,500 grams)			
			Percent of very low birth weight deliveries (<1,500 grams)			
			Percent of moderately low birth weight deliveries (1,500-2,499 grams)			
			Percent of preterm births (<37 weeks)			
			Percent of early preterm births (<34 weeks)			
			Percent of late preterm births (34-36 weeks)			
			Percent of early term births (37, 38 weeks)			

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**Women/Maternal Health**

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		<p>and the Delaware Healthy Mother and Infant Consortium to increase the rate of postpartum visits.</p> <p>In partnership with Medicaid, train providers on data collection methods to measure the increased use of effective methods of contraception.</p> <p>Develop social marketing campaign and messaging to increase awareness of the importance of reproductive life planning.</p>	<p>Perinatal mortality rate per 1,000 live births plus fetal deaths</p> <p>Infant mortality rate per 1,000 live births</p> <p>Neonatal mortality rate per 1,000 live births</p> <p>Post neonatal mortality rate per 1,000 live births</p> <p>Preterm-related mortality rate per 100,000 live births</p>			

**State Action Plan Table (Delaware)**

**Perinatal/Infant Health**

			National Outcome	National Performance		
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State Priority Needs	Objectives	Strategies	Measures	Measures	ESMs	SPMs
Improve breastfeeding rates.	<p>By July 2020, increase breastfeeding initiation rates in Delaware from 74% to 81.9%.</p> <p>By July 2020, increase the percent of women who breastfeed exclusively through 6 months from 15.5% to 25.5%.</p>	<p>Enhance capacity of ob-gyns and pediatricians to support women in breastfeeding.</p> <p>Utilize social marketing techniques to influence women’s decisions around infant feeding.</p> <p>Collaborate with the Breastfeeding Coalition of Delaware to deliver education and develop incentives for employers in order to increase their support for breastfeeding/pumping workers.</p> <p>Partner with the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program to ensure that home visitors have the expertise and supplies to support breastfeeding among their clients.</p>	<p>Post neonatal mortality rate per 1,000 live births</p> <p>Sleep-related Sudden Unexpected Infant Death (SUID) rate per 100,000 live births</p>	<p>A) Percent of infants who are ever breastfed and B) Percent of infants breastfed exclusively through 6 months</p>		

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Child Health

State Priority Needs	Objectives	Strategies	National Outcome Measures	National Performance Measures	ESMs	SPMs
<p>Improve rates of developmental screening in the healthcare setting using a validated screening tool.</p>	<p>By July 2020, increase the percent of children, ages 9-71 months, receiving a developmental screening using a parent-completed screening tool.</p>	<p>Build on existing efforts to promote the adoption of PEDS (Parents' Evaluation of Development Status) screening tool by providing participating pediatric practices with technical assistance, practice-level data, and continuous quality improvement tools to optimize their screening rates.</p> <p>Recruit new practices to adopt PEDS by addressing known barriers → Partner with a common electronic health record company to develop interface with PEDS online. The lack of integration between PEDS online and electronic medical records is a barrier. • Provide technology</p>	<p>Percent of children meeting the criteria developed for school readiness (DEVELOPMENTAL)</p> <p>Percent of children in excellent or very good health</p>	<p>Percent of children, ages 10 through 71 months, receiving a developmental screening using a parent-completed screening tool</p>		

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Child Health

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		<p>(iPads) to facilitate parent completion of PEDS in the office.</p> <ul style="list-style-type: none"> <li>Continue to develop feedback loops between pediatricians and the services they refer children to, based on screening results.</li> </ul> <p>Educate parents about developmental milestones and the importance of developmental screening, empowering them to request that their pediatrician perform screening. Collaborate with partners/programs who have touch points with families (home visiting, hospitals, libraries, Text 4 Baby, etc).</p>				
<p>Increase healthy lifestyle behaviors (healthy eating and physical</p>	<p>By July 2020, increase the percent of children 6-11 years old who are</p>	<p>Review existing programs and services within the Maternal and</p>	<p>Percent of children in excellent or very good health</p>	<p>Percent of children ages 6 through 11 and adolescents 12 through</p>		

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Child Health

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activity).	physically active at least 60 min/day.	<p>Child Health Bureau of the Division of Public Health (DPH) and identify opportunities to infuse messaging and content related to healthy lifestyle behaviors.</p> <p>Collaborate with DPH's Health Promotion Bureau to take materials and initiatives created through their Preventive Health &amp; Health Services Block Grant and disseminate them through MCH programs, services, and partner networks. (ex: Motivate the First State campaign).</p> <p>Collaborate with DPH's Health Promotion Bureau to review mini-grant proposals from the community and provide supplemental</p>	Percent of children and adolescents who are overweight or obese (BMI at or above the 85th percentile)	17 who are physically active at least 60 minutes per day		

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**Child Health**

State Priority Needs	Objectives	Strategies	National Outcome Measures	National Performance Measures	ESMs	SPMs
		<p>funding to select a proposal(s) that address MCH populations, including CYSHCN.</p> <p>Participate in committees of the Governor’s Council on Promotion and Disease Prevention and the State Health Improvement Plan to align with and support their plans to promote active living and healthy eating.</p>				

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**Adolescent Health**

State Priority Needs	Objectives	Strategies	National Outcome Measures	National Performance Measures	ESMs	SPMs
Decrease rates of bullying by promoting	By July 2020, decrease the percent of Middle	Work with our partners to address bullying as a	Adolescent mortality rate ages 10 through 19	Percent of adolescents, ages 12 through 17,		

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Adolescent Health

State Priority Needs	Objectives	Strategies	National Outcome Measures	National Performance Measures	ESMs	SPMs
<p>development of social and emotional wellness.</p>	<p>School students reporting they are being bullied based on the YRBS survey from 18.5% to 17.9%.</p> <p>By July 2020, decrease the percent of children who report being bullied on school property at the high school level from 18.5% to 17.9%.</p>	<p>public health issue at the elementary and middle school levels by promoting development of social and emotional wellness.</p> <p>Partner with community-based organizations that focus on addressing self-esteem and character development early in a child’s education experience.</p> <p>Assist in developing consistent processes for reporting disparities in bullying between children with disabilities and those without.</p> <p>Partner with coalitions such as Safe Kids Delaware to provide information and training on bullying to teachers, para educators, and child care operators.</p>	<p>per 100,000</p> <p>Adolescent suicide rate, ages 15 through 19 per 100,000</p>	<p>who are bullied or who bully others</p>		



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Adolescent Health

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		<p>Partner with School Based Health Centers to address bullying as a health issue, with particular focus on the mental health impact, for not only students who are being bullied but also students who bully others.</p> <p>Collaborate with partners engaged in bullying prevention to develop and/or promote a social marketing campaign to increase awareness of social media and cyber-bullying.</p> <p>Strengthen DPH's internal capacity to address bullying as a public health issue by providing professional development on bullying and strategies to promote social and</p>				

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**Adolescent Health**

State Priority Needs	Objectives	Strategies	National Outcome Measures	National Performance Measures	ESMs	SPMs
		emotional wellness.				

**State Action Plan Table (Delaware)**

**Children with Special Health Care Needs**

State Priority Needs	Objectives	Strategies	National Outcome Measures	National Performance Measures	ESMs	SPMs
Increase the percent of children with and without special health care needs having a medical home.	By July 2020, increase the percentage of pediatric clinicians in Delaware who have effective policies and	Work with Family SHADE to continue to gather information from parents and network partners about needs	Percent of children with special health care needs (CSHCN) receiving care in a well-functioning system	Percent of children with and without special health care needs having a medical home		

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Children with Special Health Care Needs

State Priority Needs	Objectives	Strategies	National Outcome Measures	National Performance Measures	ESMs	SPMs
	<p>procedures in place for effective care integration and cross-provider communication.</p> <p>By July 2020, improve access to Care Coordination within a Medical Home for families with CYSHCN.</p> <p>By July 2020, Increase the percentage of primary pediatric practices reporting use of care plans for CYSHCN patients that have been developed and shared with families.</p>	<p>related to the availability of medical homes.</p> <p>Design and conduct a survey of pediatric clinicians in Delaware, at baseline and in 2020, to monitor the numbers who provide medical home services.</p> <p>Collaborate with partners to educate and support clinicians on effective care integration and cross-provider communication through training and access to tools and materials.</p> <p>Collaborate with the National Center for Medical Home Implementation to provide technical assistance to pediatric practices.</p> <p>Collaborate with the</p>	<p>Percent of children in excellent or very good health</p> <p>Percent of children ages 19 through 35 months, who have received the 4:3:1:3(4):3:1:4 series of routine vaccinations</p> <p>Percent of children 6 months through 17 years who are vaccinated annually against seasonal influenza</p> <p>Percent of adolescents, ages 13 through 17, who have received at least one dose of the HPV vaccine</p> <p>Percent of adolescents, ages 13 through 17, who have received at least one dose of the Tdap vaccine</p>			

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**Children with Special Health Care Needs**

State Priority Needs	Objectives	Strategies	National Outcome Measures	National Performance Measures	ESMs	SPMs
		<p>Delaware Center for Health Innovation (DCHI) to ensure that care coordination in pediatric settings is addressed in DCHI projects.</p> <p>Educate and support clinicians and families on the use of care plans.</p>	Percent of adolescents, ages 13 through 17, who have received at least one dose of the meningococcal conjugate vaccine			

**State Action Plan Table (Delaware)**

**Cross-Cutting/Life Course**

State Priority Needs	Objectives	Strategies	National Outcome Measures	National Performance Measures	ESMs	SPMs
Improve the rate of Oral Health preventive care in pregnant women and children.	By July 2020, increase the percentage of pregnant women who have a dental visit during pregnancy from	Collaborate with DPH's Bureau of Oral Health and Dental Services (BOHDS) to collect data through the	Percent of children ages 1 through 17 who have decayed teeth or cavities in the past 12 months	A) Percent of women who had a dental visit during pregnancy and B) Percent of children, ages 1 through 17 who		

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Cross-Cutting/Life Course

State Priority Needs	Objectives	Strategies	National Outcome Measures	National Performance Measures	ESMs	SPMs
	<p>39% to 41%.</p> <p>By July 2020, increase the percent of Delaware children, ages 1 through 17, who have an annual preventive dental visit from 77.2% to 81.2%.</p>	<p>Pregnancy Risk Assessment Monitoring System (PRAMS) relating to pregnant women who have a dental visit during pregnancy.</p> <p>Continue tracking oral health data from 2-1-1/Help Me Grow and share that information with BOHDS.</p> <p>Develop an understanding of the barriers that exist with regard to oral health in pregnant women and young children by collaborating with BOHDS and health professionals that promote preventive oral health services.</p> <p>Support the promotion of the practice of ob/gyn providers providing oral screenings, education,</p>	<p>Percent of children in excellent or very good health</p>	<p>had a preventive dental visit in the past year</p>		

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Cross-Cutting/Life Course

State Priority Needs	Objectives	Strategies	National Outcome Measures	National Performance Measures	ESMs	SPMs
		<p>and referrals for pregnant women for dental care.</p> <hr/> <p>Review existing programs and services within the Maternal and Child Health Bureau of the Division of Public Health (DPH) and identify opportunities to infuse messaging and content related to oral health.</p> <hr/> <p>Work with BOHDS to provide training and technical assistance to providers that offer oral health services for CYHSCN.</p>				
<p>Increase the percent of children 0-17 who are adequately insured.</p>	<p>By July 2020, increase the percent of families reporting that their CYSHCN's insurance is adequate and</p>	<p>Working in partnership with families, CYSHCN stakeholders, and payers, develop and begin implementation of</p>	<p>Percent of children with special health care needs (CSHCN) receiving care in a well-functioning system</p>	<p>Percent of children ages 0 through 17 who are adequately insured</p>		

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Cross-Cutting/Life Course

State Priority Needs	Objectives	Strategies	National Outcome Measures	National Performance Measures	ESMs	SPMs
	<p>affordable.</p> <p>By July 2020, increase the number of health plans whose member services staff are linked to relevant family organizations and programs to meet the needs of CYSHCNs.</p>	<p>a state plan to improve adequacy of coverage for CYSHCN by 2020. • Update the Title V memorandum of understanding (MOU) with Medicaid to reflect current needs. • Explore the possibility of a Medicaid buy-in program and/or other strategies to close benefit gaps for CYSHCN. • Strengthen partnerships between Title V and entities that have influence over financing.</p> <p>Collaborate with the Catalyst Center to provide technical assistance to state Title V program.</p> <p>Create a comprehensive member services program with specialized staff and</p>	<p>Percent of children without health insurance</p>			

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State Priority Needs	Objectives	Strategies	National Outcome Measures	National Performance Measures	ESMs	SPMs
		<p>linkages to relevant family organizations at state level in order to provide information and assistance to CYSHCN and their families regarding family resource needs, insurance coverage options, eligibility, and covered services. • Conduct a scan of existing health plans in the state to determine whether or not plans offer specialized staff and appropriate linkages to services. • Develop and facilitate trainings for health plan member services staff to orient them to relevant family organizations and resources.</p>				