Georgia
Maternal and Child Health Block Grant 2019

The Maternal and Child Health Services Block Grant, Title V of the Social Security Act, is the only federal program devoted to improving the health of all women, children and families. In FY2017, 86% of all pregnant women, 99% of infants, and 55% of children nationwide benefitted from a Title V-supported service. To learn more about Title V, visit www.amchp.org.

MCH Block Grant Funds to Georgia

<table>
<thead>
<tr>
<th></th>
<th>FY 2016</th>
<th>FY 2017</th>
<th>FY 2018</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>$16,870,802</td>
<td>$16,928,422</td>
<td>$17,153,951</td>
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Title V Administrative Agency:
Maternal and Child Health Section, Department of Public Health

*States must provide a three dollar match for every four Federal dollars allocated.

Protecting and Improving the Health of Georgia’s Families

Developmental Screening and Assessment — The MCH section coordinates the Children 1st system for early identification and referrals. Children 1st provides over 20,000 developmental screening and assessments annually. Through the Electronic Birth Certificate, hospital referrals, and physician referrals, all children born in Georgia are identified for conditions that would otherwise result in poor health and/or developmental delay. Children and families identified with risk factors are linked with intervention or support services.

Newborn Screening — In accordance with Georgia law, every infant is screened for 31 congenital and heritable conditions at birth including hearing impairment and critical congenital heart disease. The MCH section supports this coordinated, preventative, statewide system to ensure that newborns receive screening, follow up, diagnosis, and are entered into medical management. In fiscal year 2015, 100% of infants who screened positive through bloodspot screening received follow-up to definitive diagnosis and clinical management. Approximately, 99% of all newborns in Georgia were screened for hearing loss prior to one month of age.

Care Coordination — The Children’s Medical Services (CMS) Care Coordination team works closely with the child’s primary care providers and healthcare vendors to facilitate timely access to comprehensive services and community-based resources and service systems, as well as serves as payor of last resort for direct services. For adolescents ages 12 and older, the care coordinator guides and coordinates the transition process from pediatric to adult health care. Pediatric specialty care clinics, including telemedicine services, are offered where pediatric medical specialist’s services are limited.

Family Engagement - The MCH section set a goal to expand family consumer partnership across all MCH programs. At the state level, families and community partners are engaged in strategic planning, program development, quality improvement initiatives, block grant development and review, workforce development, training, and as members of advisory councils. MCH hosts multiple committees and councils for which families and community partners are encouraged to participate. MCH seeks to improve family engagement through advocacy and access to statewide resources increasing awareness of the benefits of family involvement on child and family well-being. MCH partners with medical societies, colleges and universities, other state agencies, and DPH’s eighteen (18) local health districts to support MCH families.

Oral Health — The MCH section prevents oral disease among Georgia’s children through education, promotion of healthy behaviors, preventive interventions and early treatment. The Oral Health program also provides training to organizational stakeholders on oral health, when to refer to preventive oral health services for children. Services include fluoride varnish, dental sealants, prevention education and comprehensive restorative treatment. School-based/linked prevention programs targeting high-risk school children are also provided.

Breastfeeding — The MCH section has several breastfeeding initiatives including the Georgia 5-STAR Hospital Initiative. Georgia 5-STAR is a program that educates, trains, and recognizes maternity care centers that work to improve their policies and service delivery to implement the Ten Steps to Successful Breastfeeding – guidelines developed by the World Health Organization (WHO) and Baby Friendly International. The MCH section partners with the American Academy of Pediatrics-Georgia Chapter to provide the Educating Physicians in Communities (EPIC) breastfeeding program, a physician peer-to-peer training program, and coordination of a project to increase breastfeeding through supportive hospital policies and practices, staff education and post-discharge community referrals.

Maternal Mortality Review and Safety Bundles — The Georgia Maternal Mortality Review Committee (MMRC) is administered by the Georgia Obstetrical and Gynecology Society with funding provided by MCH. The committee reviews cases to determine causes of death and provides recommendations for maternal mortality reduction. MCH Women’s Health and Epidemiology staff participate in case
review and provide data analysis for the MMRC. MCH develops annual reports of case findings and recommendations from the MMRC. MCH leads the implementation and follow-up of committee recommendations in collaboration with the Georgia Perinatal Quality Collaborative (GaPQC). The latest initiative stemming from the committee’s findings is the implementation of maternal safety bundles to prevent leading causes of maternal morbidity and mortality in birthing facilities. Georgia joined the National Alliance for Innovation and Maternal Health (AIM) initiative as an AIM state in 2017.

**Improving Birth Outcomes** — The MCH section is focused on improving access to contraception, specifically Long Acting Reversible Contraceptives (LARCs) with the aim of reducing unintended pregnancy and increasing inter pregnancy intervals as strategies to reduce pre-term births, overall health of women and their families, and reduce health disparities among maternal and child health populations.

**Injury Prevention** — The MCH section provides infrastructure support to the Office of Injury Prevention. This infrastructure allows for coordination of all safety issues such as Safe to Sleep within the Department of Public Health, the development of policies, and development of partnerships to address child fatality.

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**Percentage Served by the Georgia MCH Program***

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<tr>
<th>Percentage</th>
<th>Description</th>
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<tbody>
<tr>
<td>13.0%</td>
<td>Pregnant women</td>
</tr>
<tr>
<td>94.0%</td>
<td>Infants under one</td>
</tr>
<tr>
<td>61.0%</td>
<td>Children and adolescents</td>
</tr>
<tr>
<td>11.0%</td>
<td>Children with special health care needs</td>
</tr>
<tr>
<td>0.0%</td>
<td>Others</td>
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*2017 State/Jurisdiction Annual Reports Submitted to the Maternal and Child Health Bureau

**Georgia Health Priority Needs**
- Prevent maternal mortality
- Improve access to family planning services
- Prevent infant mortality
- Promote developmental screenings among children
- Promote physical activity among children.
- Reduce suicide among adolescents
- Improve transition to adult care for CYSHCN
- Promote oral health among all populations
- Maternal substance abuse
- Improve access to specialty care for CYSHCN

**Current Special Projects of Regional and National Significance (SPRANS)**

**Healthy Tomorrow Partnership for Children**
INNOVATIVE SOLUTIONS FOR DISADVANTAGE AND DISABILITY, INC.
Decatur, GA

**State Systems Development Initiative (SSDI)**
GEORGIA DEPARTMENT OF PUBLIC HEALTH
Atlanta, GA

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**Hemophilia Treatment Centers**
HEMOPHILIA OF GEORGIA, INC.
Atlanta, GA

**Epidemiological MCH/SPH Institute**
EMORY UNIVERSITY
Atlanta, GA

**Maternal and Child Health Public Health Training Program**
EMORY UNIVERSITY
Atlanta, GA

**State Selected National Performance Measures**
- Well Woman Visit
- Perinatal Regionalization
- Breastfeeding
- Developmental Screening
- Physical Activity
- Bullying
- Transition
- Preventive Dental Visit

**For more information, contact:**

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