New Jersey
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.

<table>
<thead>
<tr>
<th>MCH Block Grant Funds to New Jersey</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY 2016</td>
</tr>
<tr>
<td>$11,408,229</td>
</tr>
</tbody>
</table>

Title V Administrative Agency:
Title V Administrative Agency: Division of Family Health Services, Department of Health

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

Protecting and Improving the Health of New Jersey’s Families

Improving Pregnancy Outcomes – The goal of the Improving Pregnancy Outcomes Initiative (IPO) is to improve maternal and infant health outcomes for high-need women of childbearing age and their families, while reducing racial, ethnic and economic disparities in those outcomes through a collaborative, coordinated, and community-driven approach. Two models are used to accomplish this goal. The first is the Community Health Worker (CHW) model which performs outreach and client recruitment within the targeted community to identify and enroll women and their families in appropriate care. The second is Central Intake which is a single point of entry for screening and referral of women of reproductive age and their families to necessary medical and social service programs. Central Intake works closely with partners to eliminate duplication of effort and services. Standardized screening tools are used.

Patient Satisfaction – The Specialized Pediatric Services Program serving children with special needs age birth to 21, in the New Jersey Title V Children with Special Health Care Needs Program initiated a patient satisfaction survey among 18 community based health service grantees. The survey is designed to address the Core outcomes related to families partnering in decision making, satisfaction with services they receive and transition to adult life. Families are given a brief written survey to complete following their clinic visit. Results are compiled and provided to each grantee to facilitate planning to improve family satisfaction with services and to promote family centered care.

Children with Special Health Care Needs – The Special Child Health and Early Intervention Services (SCHIS) Program, with a combination of State and Federal funds, promotes early identification, evaluation, diagnosis and treatment of children with special health needs. SCHIS is focused on providing family-centered, community-based services that are individualized and accessible. Individuals from birth to 21 years of age who have any of a broad range of disabilities or chronic illnesses may benefit from the available child health services, which include newborn screening and genetics, specialized pediatrics, case management, early identification and monitoring, and early intervention services.

Childhood Lead Poisoning Prevention — The Childhood Lead Poisoning Prevention (CLPP) home visiting project is a nurse case management system for children younger than six years of age who have been identified as having elevated blood lead levels. Twelve sites throughout the State in high-risk areas receive funding to monitor blood lead levels, assess immunization and nutritional status, growth and developmental milestones, and parental-child interaction and then provide education and supportive guidance as required.

Postpartum Mood Disorders — A statewide campaign Recognizing Postpartum Depression: Speak Up When You’re Down increases public awareness of Postpartum Mood Disorders (PPMD). The campaign includes a web page, professional education seminars, consumer education materials (brochures and video) in English and Spanish, a warmline for community resources and referral, and outreach that is coordinated at the Maternal Child Health Consortium.
Health Needs in New Jersey
- Reduction of Adolescent Risk Taking Behaviors
- Improving Access to Quality Care for CSHCN
- Improving Birth Outcomes
- Reducing Teen Pregnancy
- Improving and Integrating Information Systems
- Reducing Black Infant Mortality
- Promoting Youth Development
- Improving Nutrition and Physical Activity

State Selected National Performance Measures
- Well Woman Visit
- Breastfeeding
- Safe Sleep
- Developmental Screening
- Adolescent Well-Visit
- Medical Home
- Transition
- Preventive Dental Visit

For more information, contact:

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Percentage Served by the New Jersey MCH Program*

<table>
<thead>
<tr>
<th>Group</th>
<th>Served Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>pregnant women</td>
<td>100.0%</td>
</tr>
<tr>
<td>infants under one</td>
<td>100.0%</td>
</tr>
<tr>
<td>children and adolescents</td>
<td>9.0%</td>
</tr>
<tr>
<td>children with special health care needs</td>
<td>18.0%</td>
</tr>
<tr>
<td>others</td>
<td>100.0%</td>
</tr>
</tbody>
</table>

*2017 State/Jurisdiction Annual Reports Submitted to the Maternal and Child Health Bureau

Current Special Projects of Regional and National Significance (SPRANS)

State Systems Development Initiative (SSDI)
NEW JERSEY DEPARTMENT OF HEALTH
Trenton, NJ

Healthy Tomorrows Partnership for Children Program
HENRY J. AUSTIN HEALTH CENTER
Trenton, NJ

Maternal and Child Health Public Health Training Program
THE STATE UNIVERSITY OF NEW JERSEY, RUTGERS
New Brunswick, NJ

New Jersey State Profile 2019