North Dakota
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 North Dakota

<table>
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<tr>
<th></th>
<th>FY 2016</th>
<th>FY 2017</th>
<th>FY 2018</th>
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<tbody>
<tr>
<td></td>
<td>$1,727,494</td>
<td>$1,725,639</td>
<td>$1,739,627</td>
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Title V Administrative Agency:
Division of Family Health
North Dakota Department of Health

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

Protecting and Improving the Health of North Dakota’s Families

Maternal/Infant Initiatives — Strategies targeted to the maternal and infant populations include increasing breastfeeding support and infant safe sleep. Breastfeeding strategies include training hospital staff and implementation of policies on evidence-based practices for supporting breastfeeding mother-baby dyads; providing technical assistance to businesses in developing polices to support breastfeeding moms in the workplace; and providing breastfeeding skills-trainings to professionals who work with tribal communities. Safe sleep mini-grants were awarded to entities to promote consistent and culturally sensitive messaging statewide. Grantees are required to utilize the state-developed educational campaign materials and incorporate the benefits of breastfeeding and tobacco cessation in their workplans. Cribs for Kids®, a safe sleep education and distribution program, provides services in 27 sites throughout the state.

Newborn Screening and Follow-up — This program identifies infants at risk and in need of more definitive testing to diagnose and treat affected newborns. Program objectives include assurance that all infants testing outside of normal limits receive timely and appropriate confirmatory testing, and the development and provision of education to health care providers, families, and communities. Regional collaboration is also provided for ND, SD and Iowa focusing on quality assurance and education. Long-term follow-up is supported through provision of metabolic food, multidisciplinary clinics, and care coordination services. Currently, over 50 disorders are included in the newborn screening panel.

Children with Special Health Care Needs — ND’s CSHCN program provides a variety of services to address unmet healthcare needs of the CSHCN population. Examples include coverage of medical services for eligible children, youth, and young adults, and resources that support coordinated care and management, such as a metabolic food program and a variety of multidisciplinary clinics. The program also improves health outcomes of the CSHCN population by advancing a quality, comprehensive system of care. Efforts focus on family/professional partnerships, medical home, adequate health insurance, early and continuous screening and surveillance, easy to use services and supports, and transition to adult health care.

Reduce Overweight and Obesity — Strategies implemented to address obesity in childhood include working in child care entities, schools, and community settings. Examples of activities include child care physical activity ordinances; school wellness committees/policies; comprehensive physical activity programs, healthy lunchroom and concession stand polices; and community cooking schools.
Percentage Served by the North Dakota MCH Program*

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Services</th>
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</thead>
<tbody>
<tr>
<td>100.0%</td>
<td>Pregnant women</td>
</tr>
<tr>
<td>100.0%</td>
<td>Infants under one</td>
</tr>
<tr>
<td>31.0%</td>
<td>Children and adolescents</td>
</tr>
<tr>
<td>27.0%</td>
<td>Children with special health care needs</td>
</tr>
<tr>
<td>14.0%</td>
<td>Others</td>
</tr>
</tbody>
</table>

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

Health Needs in North Dakota
- Reduce tobacco use in pregnant women
- Increase the rate of breastfeeding at 6 months
- Reduce disparities in infant mortality
- Reduce fatal motor vehicle crash deaths to adolescents
- Reduce overweight and obesity in children
- Increase the utilization of medical home
- Increase the number of children with special health care needs receiving transition support
- Increase preventive dental services to children
- Implement North Dakota state mandates delegated to North Dakota Department of Health Title V / Maternal and Child Health Program

State Selected National Performance Measures
- Well Woman Visit
- Breastfeeding
- Safe Sleep
- Physical Activity
- Injury Hospitalization
- Transition
- Medical Home
- Preventive Dental Visit

Current Special Projects of Regional and National Significance (SPRANS)

State Systems Development Initiative (SSDI)
NORTH DAKOTA DEPARTMENT OF HEALTH
Bismarck, ND

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North Dakota State Profile 2019