South Carolina
Maternal and Child Health Block Grant 2020

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 FY2018, 91% of all pregnant women, 98.7% of infants, and 53.7% 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 South Carolina

<table>
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<tr>
<th>FY 2017</th>
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<th>FY 2019</th>
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<td>$11,408,634</td>
<td>$11,505,024</td>
<td>$11,496,042</td>
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Title V Administrative Agency:
Department of Health and Environmental Control

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

Protecting and Improving the Health of South Carolina’s Families

Home Visitation Programs — South Carolina continues to provide Postpartum Newborn Home Visits to high risk mothers and infants statewide regardless of insurance provider. Evidence-based home visitation programs such as Nurse-Family Partnership are also implemented throughout the state. Currently there are ten Nurse-Family Partnership sites, serving 34 counties.

Children and Youth with Special Healthcare Needs — Services for children and youth with special health care needs and their families are centered on information and referral; financial assistance for selected medical services, supplies, equipment, and prescription drugs; care coordination.; Parent services have been expanded through a contract with the state Family Voices and Family-to-Family Information Center grantee.

Immunizations — Through extensive outreach efforts and working in tandem with partners in the private sector, South Carolina maintains a high-level of childhood immunization. Additionally, MCH programs continue to partner on high priority issues such as influenza vaccines for pregnant women and pertussis vaccines for families and infants.

Birth Defects Surveillance — The South Carolina Birth Defects Program provides surveillance of over 50 defects recommended for surveillance by the National Birth Defects Prevention Network. South Carolina is also one of six sites across the country funded to do enhanced surveillance of congenital Heart Defects through the National Center for Birth Defects and Developmental Disabilities. From 2018-2019, the SCBPD began referrals of all infants identified with a birth defect to BabyNet, the state’s Early Intervention agency. Data from the program also drives primary prevention efforts across the state.

Childhood Lead Poisoning Prevention Program (CLPPP) — South Carolina’s Maternal and Child Health, Environmental Health, and Public Health Statistics and Information staff have a coordinated approach for tracking lead screenings and follow-up of elevated blood lead levels. The team received technical assistance from MCHB to develop a white paper, “Addressing Childhood Lead Exposure in South Carolina,” which was finalized in January 2017. The white paper served as the basis for expansion of and enhancements to CLPPP services using new state and CDC grant funding.

Newborn Screening — The South Carolina Newborn Screening Program screens for 53 disorders and notifies the primary care physician of infants who screen positive for one of the conditions on the test panel. Staff provide short- term follow-up services until a diagnosis is confirmed or ruled out. The program works with audiologists, medical specialists, and staff at the state lab to provide training and technical assistance to hospitals and physician offices. The Metabolic Formula Program, an extension of the Newborn Screening Program, provides metabolic formula to residents diagnosed with inborn errors of metabolism free of charge.

Perinatal Regionalization — South Carolina’s MCH program continues to maintain an efficient and effective Perinatal Regionalization System to ensure that highest risk deliveries occur in Level III facilities and that mothers and infants receive risk-appropriate care.

Key components of this system include: obstetric and neonatal outreach education, transport coordination, and physician consult and follow-up.
**Percentage Served by the South Carolina MCH Program**

*2018 State/Jurisdiction Annual Reports Submitted to the Maternal and Child Health Bureau

**Health Needs in South Carolina**

- Improve health promotion among the maternal and child health population, including preventive health visits and screenings
- Improve access to risk-appropriate care through evidence-based enhancements to the perinatal regionalization system
- Increase implementation of safe sleep environment practices
- Improve breastfeeding initiation, continuation, and support
- Reduce the prevalence of preterm birth through evidence-based programs and clinical interventions
- Increase appropriate preventive and health development screenings and referral to early intervention services
- Increase physical fitness among children and adolescents
- Improve care coordination for children and youth with special healthcare needs
- Reduce smoking and exposure to tobacco use among the maternal and child health population.
- Reduce racial/ethnic disparities in social determinants of health, including insurance coverage, other barriers to medical care, and employment

**State Selected National Performance Measures**

- Well Woman Visits
- Risk-Appropriate Perinatal Care
- Breastfeeding
- Safe Sleep
- Developmental Screening
- Physical Activity
- Medical Home
- Smoking

For more information, contact:

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

**Healthy Tomorrows Partnership for Children Program**
UPSTATE AFFILIATE ORGANIZATION
Greenville, SC

**State Systems Development Initiative (SSDI)**
SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL
Columbia, SC

**MCH Collaborative Office Rounds**
MEDICAL UNIVERSITY OF SOUTH CAROLINA
Charleston, SC