Colorado State Action Plan Table 2027 Application/2025 Annual Report

Priority Needs	Five-Year Objectives	Strategies	Evidence-Based or –Informed Strategy Measures	National and State Performance Measures	National and State Outcome Measures
Women/Maternal Health					
Perinatal Wellbeing	By Sept 30, 2030, maintain the percent of women who attended a postpartum checkup within 12 weeks after giving birth at 92.0% (NPM 1A). By Sept 30, 2030, increase the percent of women who attended a postpartum checkup and received recommended care components (talked about birth control, asked about depression) from 78.9% to 82.8% (NPM 1B).	Support quality and systems improvement initiatives Enhance community initiatives for better health outcomes Strengthen the maternal health workforce Data monitoring, enhancement and distribution	ESM PPV.1 - Percent of postpartum women who felt uncomfortable talking to any healthcare worker about their emotions during pregnancy or since their new baby was born	NPM - Postpartum Visit	**Linked NOMs:** Maternal Mortality Neonatal Abstinence Syndrome Women's Health Status Postpartum Depression Postpartum Anxiety
Perinatal/Infant Health					
Housing	By Sept 30, 2030, decrease the percent of women with a recent live birth who experienced housing instability in the 12 months before a recent live birth from 5.7% to 3.6% (NPM 8.1).	Increase access to safe, quality, and affordable housing	ESM HI-Pregnancy.1 - Number of multi-sector partners engaged in developing and advancing housing stability policies	NPM - Housing Instability - Pregnancy	**Linked NOMs:** Severe Maternal Morbidity Maternal Mortality Low Birth Weight Preterm Birth Stillbirth Perinatal Mortality Infant Mortality SUID Mortality Neonatal Abstinence Syndrome Postpartum Depression Postpartum Anxiety
Child Health					
Nutrition	By Sept 30, 2030, increase the	Increase access to lactation education and support	ESM FS.1 - Percent	NPM - Food Sufficiency	**Linked NOMs:**

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Security	percent of children, ages 0-11, whose households were food sufficient in the past year at no less than 66.0% (NPM 12).	Increase access to resources and environments that support nutritious choices	of early childhood education professionals who integrate gardening, nutrition education, or local food procurement into their programming ESM FS.2 - Percent of children, ages 6 months through 5 years, who are reported by a parent to have been breastfed or fed breast milk exclusively for 6 months		School Readiness Children's Health Status Behavioral/Conduct Disorders Flourishing - Young Child Flourishing - Child Adolescent - CSHCN Flourishing - Child Adolescent - All Adverse Childhood Experiences
Coordinated Intake and Referral Systems (CIRS)	By Sept 30, 2030, maintain the percent of children overall, ages 0-17, who have a medical home at no less than 48.4% (NPM 17).	Increase early prevention, detection, and intervention for children and youth	***Inactive -*** *ESM MH.1 - Percent of children with special health care needs ages 0-17 years who receive family-centered care*	NPM - Medical Home	**Linked NOMs:** Children's Health Status CSHCN Systems of Care Flourishing - Young Child Flourishing - Child Adolescent - CSHCN Flourishing - Child Adolescent - All
Adolescent Health					
Social Connectedness	By Sept 30, 2030, increase the percent of adolescents, ages 12 through 17, who have a trusted adult they could go to for help with a serious problem from 74.5% to 79.7% (NPM 16).	Create safe and connected environments for youth Address intergenerational healing and connection Increase access and connection to behavioral health care for youth	ESM ADM.1 - Number of policy, practice, systems, or environmental changes implemented to support youth mental health in schools	NPM - Adult Mentor	**Linked NOMs:** Adolescent Depression/Anxiety Flourishing - Child Adolescent - CSHCN Flourishing - Child Adolescent - All
Children with Special Health Care Needs					

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Coordinated Intake and Referral Systems (CIRS)	By Sept 30, 2030, maintain the percent of children with special health care needs, ages 0-17, who have a medical home at no less than 39.6% (NPM 17). By Sept 30, 2030, maintain the percent of children with special health care needs, ages 0-17, who receive needed referrals at no less than 65.0% (NPM 17.4).	Equip families, children/youth with complex needs to plan for the future Strengthen health, education, and human services systems that support integrated care for all children including CYSHCN	***Inactive -*** *ESM MH.1 - Percent of children with special health care needs ages 0-17 years who receive family-centered care* ESM MH_REF.1 - Percent of children referred to early intervention who completed an evaluation	NPM - Medical Home; Medical Home_Referrals	**Linked NOMs:** Children's Health Status CSHCN Systems of Care Flourishing - Young Child Flourishing - Child Adolescent - CSHCN Flourishing - Child Adolescent - All
Cross-Cutting/Systems Building					
Economic Mobility	By Sept 30, 2030, maintain the child poverty rate at no more than 10.1%, as measured by the supplemental child poverty measure (SPM 2).	Connect more Coloradans to supportive tax credits Expand enrollment in additional services that support economic mobility Increase uptake of Family and Medical Leave Insurance (FAMLI)	No ESMs were created by the State. ESMs are optional for this measure.	SPM 2: Percent of children in poverty according to the supplemental poverty measure	
Built Environment	By Sept 30, 2030, increase the percent of children 6-17 years old who get 60 minutes of physical activity per day from 17.9% to 21.1% (SPM 1).	Influence state or local policy to increase safe and connected communities Provide technical assistance to support local public health agencies to increase activity friendly routes Explore partnerships and strategies to address extreme heat-related health impacts	No ESMs were created by the State. ESMs are optional for this measure.	SPM 1: Percent of children ages 6 to 17 who are physically active at least 60 minutes per day	