

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					
Improve care for women's mental health	Increase the percent of women who were screened for depression or anxiety following a recent live birth by 5% by 2030	Collaborate with Maternal and Pediatric Care Providers to strengthen universal screening for perinatal mental health conditions. Work with Community-Based Service Providers	ESM MHS.1 - Number of pregnant and postpartum women who receive a mental health screening from home visiting services	NPM - Postpartum Mental Health Screening	<u>Linked NOMs:</u> Maternal Mortality Infant Mortality SUID Mortality Neonatal Abstinence Syndrome Child Injury Hospitalization Women's Health Status Postpartum Depression Postpartum Anxiety
Improve access to maternal and postpartum care	Increase the percent of women who receive a postpartum visit with recommended components by 10% by 2030	Improve Postpartum Contraception Counseling Identify postpartum women who are not attending postpartum visits and reasons why Promote community-based patient engagement through Community Health Workers and telehealth.	ESM PPV.1 - Percent of postpartum people enrolled in MaineCare who attended a postpartum visit	NPM - Postpartum Visit	<u>Linked NOMs:</u> Maternal Mortality Neonatal Abstinence Syndrome Women's Health Status Postpartum Depression Postpartum Anxiety
Perinatal/Infant Health					
Improve access to perinatal care.	Increase the percent of VLBW infants born in a hospital with a level III or higher NICU (i.e. risk appropriate care) to 90% by 2030	Provide training and technical assistance to support risk mitigation in obstetric contexts Implement updated neonatal and maternal levels of care designations	ESM RAC.1 - Number of professionals participating in Basic Life Support in Obstetrics (BLSO) training and transport conferences annually	NPM - Risk-Appropriate Perinatal Care	<u>Linked NOMs:</u> Stillbirth Perinatal Mortality Infant Mortality Neonatal Mortality Postneonatal Mortality Preterm-Related Mortality
Improve access to perinatal care.	Decrease the percent of women with a recent live birth who experienced ANY discrimination while getting healthcare during	Build Cross-Sector Collaboration to Address Unfair Treatment in Maternal Health Strengthen Provider and Organizational Accountability for Uneven Care	No ESMs were created by the State. ESMs are optional for this measure.	SPM 2: Percent of women with a recent live birth who experienced any discrimination while	

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	pregnancy, delivery, or at postpartum care by 5% by 2030	Expand Access to and Trust in Home Visiting Services Among All Communities in Maine		getting healthcare during pregnancy, delivery, or at postpartum care	
Child Health					
Increase children's physical activity.	Increase by 5% the proportion of children who are physically active at least 60 minutes per day.	<p>Increase opportunities for physical activity/active living</p> <p>Increase the number of policies that exist within communities and schools to support physical activity.</p>	<p><i>Inactive - ESM PA-Child.1 - Number of SAUs, ECEs and Afterschool/Out of School Programs that meet best practices and highest standards for physical activity.</i></p> <p>ESM PA-Child.2 - Percent of 5th and 6th graders who report they exercise, dance or play sports for at least an hour five days per week</p>	NPM - Physical Activity - Child	<p>Linked NOMs:</p> <p>Children's Health Status</p> <p>Child Obesity</p>
Improve children's oral health.	Increase by 3% the percent of children who had a preventive dental visit in the past year.	<p>Provide support to school staff, administrators and school nurses to understand the importance and implementation of school-based oral health programming</p> <p>Develop and disseminate oral health education for students through School Oral Health Program</p> <p>Support partners and organizations in expanding their services through collaboration with School Oral Health Program</p>	<p><i>Inactive - ESM PDV-Child.1 - Number of schools receiving oral health educational resources</i></p> <p>ESM PDV-Child.2 - Number of children receiving oral health services through the School Oral Health Program</p>	NPM - Preventive Dental Visit - Child	<p>Linked NOMs:</p> <p>Tooth decay or cavities</p> <p>Children's Health Status</p> <p>CSHCN Systems of Care</p>
Improve access to comprehensive healthcare for children.	Increase the percentage of all children who have a medical home by 10% by 2030.	Promote Understanding and Use of Medical Homes	No ESMs were created by the State.	NPM - Medical Home	<p>Linked NOMs:</p> <p>Children's Health Status</p> <p>CSHCN Systems of Care</p> <p>Flourishing - Young Child</p> <p>Flourishing - Child Adolescent - CSHCN</p> <p>Flourishing - Child Adolescent -</p>

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					All
Adolescent Health					
Support positive youth development.	Increase by 5% the proportion of High School students who report they always or often have support from an adult other than their parent.	<p>Conduct a landscape assessment of available mentor training curriculum.</p> <p>Determine which Askable Adult training curriculum will be used to train adults serving youth in Maine.</p>	No ESMs were created by the State. ESMs are optional for this measure.	SPM 1: Percent of Maine high school students who report they have support from adults other than their parents always or most of the time.	
Address adolescent mental health needs.	Increase by 3% the percent of adolescents, ages 12 through 17, who receive needed mental health treatment or counseling	<p>Maintain support for the School Based Health Center (SBHC) integrated medical and behavioral health care model.</p> <p>Increase evidence-based primary prevention strategies to increase resiliency, promote social and emotional learning skills, and reduce the risk of unmet mental health needs</p> <p>Increase the number of educators and youth-serving professionals who receive training in strategies to identify, intervene, and assist youth at increased risk of suicide.</p>	ESM MHT.1 - Percent of students identified as in need of behavioral health services who receive them through a school-based health center (SBHC)	NPM - Mental Health Treatment	<p>Linked NOMs:</p> <p>Adolescent Mortality</p> <p>Adolescent Suicide</p> <p>Adolescent Firearm Death</p> <p>Adolescent Injury Hospitalization</p> <p>Children's Health Status</p> <p>Adolescent Depression/Anxiety</p> <p>CSHCN Systems of Care</p> <p>Flourishing - Child Adolescent - CSHCN</p> <p>Flourishing - Child Adolescent - All</p>
Children with Special Health Care Needs					
Improve care coordination for children and families with special healthcare needs.	Increase the percentage of children with special health care needs who receive effective care coordination, among those who need it, by 10% by 2030.	<p>Build and Standardize Care Coordination Infrastructure</p> <p>Strengthen Identification and Referral Pathways</p> <p>Measure Satisfaction and Promote Responsiveness</p>	ESM MH_CC.1 - Percent of respondents to the satisfaction survey who reported they were satisfied with the care coordination services they received.	NPM - Medical Home; Medical Home_Care Coordination	<p>Linked NOMs:</p> <p>Children's Health Status</p> <p>CSHCN Systems of Care</p> <p>Flourishing - Young Child</p> <p>Flourishing - Child Adolescent - CSHCN</p> <p>Flourishing - Child Adolescent - All</p>