

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 mental health and decrease substance use among pregnant and postpartum Vermonters	To increase the percentage of women who report having had a comprehensive postpartum visit to up to 95% by 2030.	Increase the number of healthcare and social services providers who are trained and equipped to provide postpartum care education, screening, referral, and follow-up, with a focus on perinatal mental health and contraceptive counseling.	ESM PPV.1 - # of home visiting staff, community health team partners (PII), health care providers trained and equipped to provide postpartum care education, screening, referrals, and follow-up, with a focus on perinatal mental health and contraceptive use.	NPM - Postpartum Visit	Linked NOMs: Maternal Mortality Neonatal Abstinence Syndrome Women’s Health Status Postpartum Depression Postpartum Anxiety
Improve mental health and decrease substance use among pregnant and postpartum Vermonters	Increase the percentage of women who have disclosed alcohol use in pregnancy who are connected to community supports by their obstetrician to 90% by 2030.	Continue outreach to obstetrical and pediatric clinical providers regarding the risks of alcohol use during pregnancy and the full postpartum period.	No ESMs were created by the State. ESMs are optional for this measure.	SPM 5: % of pregnant Vermonters screened and connected to community-based resources for perinatal substance use	
Build safe and supported communities	To increase the percentage of intimate partner survivors who are identified and connected to services by 10% in 2030	Implement an evidence-based universal screening curriculum to increase provider knowledge and response.	No ESMs were created by the State. ESMs are optional for this measure.	SPM 4: Number of healthcare and social service providers who received training on intimate partner violence universal education and response in the past year.	

Perinatal/Infant Health

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Advance a comprehensive, coordinated, and integrated state and community system of services for all children	To increase the rates of children who are exclusively breastfed up to age 6 months to 40% by 2030.	Implement 100% of the strategic priorities identified in the breastfeeding strategic plan, including training across sectors.	ESM BF.1 - Number of interprofessional training series conducted on integrating breastfeeding promotion into various healthcare settings. <i>Inactive - ESM BF.2 - % of 10 Step compliant or designated Baby-friendly hospitals</i>	NPM - Breastfeeding	Linked NOMs: Infant Mortality Postneonatal Mortality SUID Mortality
Build safe and supported communities	To increase the percentage of infants placed to sleep on their backs, without soft objects or loose bedding, and in a separate, safe sleep space by 5% across all components by 2030.	To increase safe sleep rates by implementing comprehensive and robust safe sleep strategies with community and healthcare partners to support families throughout pregnancy and the first year after giving birth.	ESM SS.1 - # of community outreach events conducted in partnership with WIC, Home Visiting, and other programs to promote safe sleep.	NPM - Safe Sleep	Linked NOMs: Infant Mortality Postneonatal Mortality SUID Mortality

Child Health

Advance a comprehensive, coordinated, and integrated state and community system of services for all children	To increase the percentage of children who received a developmental screening to 55% by 2030.	Increase the number of providers trained in valid developmental and social-emotional screening tools and increase the number of providers who are using the centralized Help Me Grow Ages and Stages Online reporting system.	ESM DS.1 - Number of providers trained in developmental surveillance and screening	NPM - Developmental Screening	Linked NOMs: School Readiness Children's Health Status
Increase the number of families who have their basic needs met	To increase the percentage of children whose households are reported to have been able to access good, nutritious food in the past year to 77% by 2030.	Expand the reach of nutrition programs (SNAP and WIC primarily) through an increased number of cross-sector partnerships and referral pathways.	ESM FS.1 - # of cross-sector partnerships and referral pathways to connect children and families who are income eligible or	NPM - Food Sufficiency	Linked NOMs: School Readiness Children's Health Status Behavioral/Conduct Disorders Flourishing - Young Child Flourishing - Child Adolescent - CSHCN

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			who have been identified through an evidence-based screening tool to nutrition assistance programs and services.		Flourishing - Child Adolescent - All Adverse Childhood Experiences
Improve access to oral healthcare for children and adolescents	To increase the percentage of children who have had a preventive dental visit in the last year up to 87% by 2030.	Increase the percentage of children who are served and can access preventive oral healthcare through their school dental program, 802 Smiles Network.	ESM PDV-Child.1 - # of students participating in Vermont's 802Smiles Network of School Dental Health Programs receiving oral health services	NPM - Preventive Dental Visit - Child	Linked NOMs: Tooth decay or cavities Children's Health Status CSHCN Systems of Care
Advance a comprehensive, coordinated, and integrated state and community system of services for all children	To increase the percentage of children with a medical home to 62% by 2030.	To work with our partners at the Vermont Child Health Improvement Program to continue fostering clinical and school links to care and continue to promote Building Bright Futures 4th edition through the Division of Local Health with healthcare and community providers, including annual well-care visits for all school-age and adolescent children.	ESM MH.1 - % of families in CSHN's Medicaid Programs supported to access a Medical Home and/or Care Coordination when indicated through programmatic outreach.	NPM - Medical Home	Linked NOMs: Children's Health Status CSHCN Systems of Care Flourishing - Young Child Flourishing - Child Adolescent - CSHCN Flourishing - Child Adolescent - All
Advance a comprehensive, coordinated, and integrated state and community system of services for all children	To increase the percentage of children who are ages 6months to 5years, who are flourishing, to 87% by 2030.	To promote healthcare providers referring to Vermont's Help Me Grow centralized information and referral system to increase the number of families and children served by the Help Me Grow referral system.	No ESMs were created by the State. ESMs are optional for this measure.	SPM 1: % of children 6 month to 5 years who meet all 4 flourishing items	

Adolescent Health					
Improve health	To decrease the percentage of kids	Implement evidence-based school-based anti-violence and bullying	ESM BLY.1 - The	NPM - Bullying	Linked NOMs:

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outcomes by strengthening health and school connections	who are bullying others to 12% by 2030.	programming.	number of trainings to be offered to school health staff in identifying and addressing bullying-related health issues		Adolescent Mortality Adolescent Suicide Adolescent Firearm Death Adolescent Injury Hospitalization Adolescent Depression/Anxiety Adverse Childhood Experiences
Improve health outcomes by strengthening health and school connections	To reduce the chronic absenteeism in Vermont by 3% by 2030.	Establish and foster cross-sector partnerships to further understand the relationships between health and chronic absenteeism and develop a data-sharing platform.	No ESMs were created by the State. ESMs are optional for this measure.	SPM 6: % of students who are chronically absent from school	
Promote social connection for youth and their caregivers	To increase the percentage of youth who feel that they matter to people in their community to 63% by 2030	To continue engaging youth in youth empowerment programs, such as Getting to Y, and the Youth Systems Advisory Council.	No ESMs were created by the State. ESMs are optional for this measure.	SPM 2: % of adolescents that feel they matter to people in their community	

Children with Special Health Care Needs

Advance a comprehensive, coordinated, and integrated state and community system of services for all children	To increase the percentage of children with special healthcare needs who have a medical home to 60% by 2030	To increase the number of families in CSHN's medicaid programs who are supported to access a medical home and support care coordination across the healthcare system, early childhood providers, home health agencies, and specialty care clinics.	ESM MH.1 - % of families in CSHN's Medicaid Programs supported to access a Medical Home and/or Care Coordination when indicated through programmatic outreach.	NPM - Medical Home	Linked NOMs: Children's Health Status CSHCN Systems of Care Flourishing - Young Child Flourishing - Child Adolescent - CSHCN Flourishing - Child Adolescent - All
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Cross-Cutting/Systems Building

Advance a comprehensive, coordinated, and integrated state and community system of	To increase the percentage of MCH programs that partner with family members, youth, and/or community members to 95% by 2030.	Work with programs to engage with families, youth, and communities along the continuum of family and community partnerships, through continued professional development and technical assistance with program staff.	No ESMs were created by the State. ESMs are optional for this measure.	SPM 3: Percent of MCH programs that partner with family members, youth, and/or community members	
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services for all children					