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					
All women experience the safe and stable supports they need to live and thrive from preconception through 12 months postpartum.	Increase women who have a postpartum visit within 12 weeks after giving birth and receive recommended care components.	Improve access to mental health resources for pregnant and postpartum women. Increase community access to holistic resources and support for pregnant women and support persons. Collaborate with Medicaid to advocate for expanded Medicaid coverage to 1 year.	ESM PPV.1 - Percent of birth workforce providers who report increased confidence in providing perinatal health education to their clients/patients following a workforce training.	NPM - Postpartum Visit	**Linked NOMs:** Maternal Mortality Neonatal Abstinence Syndrome Women's Health Status Postpartum Depression Postpartum Anxiety
All women of reproductive age have nearby and affordable contraceptive care options and have safe, positive sexual experiences.	Increase women who have a postpartum visit within 12 weeks after giving birth and receive recommended care components.	Support and collaborate with the Reproductive Health Family Planning program to support women's reproductive health needs.	ESM PPV.1 - Percent of birth workforce providers who report increased confidence in providing perinatal health education to their clients/patients following a workforce training.	NPM - Postpartum Visit	**Linked NOMs:** Maternal Mortality Neonatal Abstinence Syndrome Women's Health Status Postpartum Depression Postpartum Anxiety
Perinatal/Infant Health					
All infants experience the safe and stable supports they need to live and thrive starting from birth to	Decrease the number of women who experience racial/ethnic discrimination while getting healthcare during pregnancy, delivery, or postpartum.	Increase the accessibility of doula support for all who want one. Support agencies to reduce rates of preterm birth, SUID, stillbirth, and low birthweight.	ESM DSR.1 - Percent of participants who report increased confidence in applying knowledge or skills as a result of the doula education they	NPM - Perinatal Care Discrimination	**Linked NOMs:** Severe Maternal Morbidity Maternal Mortality Low Birth Weight Preterm Birth Stillbirth Perinatal Mortality Infant Mortality

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Priority Needs	Five-Year Objectives	Strategies	Evidence-Based or –Informed Strategy Measures	National and State Performance Measures	National and State Outcome Measures
celebrating their first birthday.			received.		Neonatal Mortality Preterm-Related Mortality Postpartum Depression Postpartum Anxiety

Child Health

Priority Needs	Five-Year Objectives	Strategies	Evidence-Based or –Informed Strategy Measures	National and State Performance Measures	National and State Outcome Measures
All children and their families experience timely, nearby, uncomplicated, coordinated care and supports to live and thrive.	Increase the number of children, including children and youth with special health care needs, that have a medical home.	Increase opportunities and support for families to establish, receive, and navigate care across systems.	*Inactive - ESM MH.1 - Percent of Regional Center information & referral staff who report competence in explaining medical home concepts* *Inactive - ESM MH.2 - Percent of family members, health care providers, and community professionals trained on Medical Home-related concepts who report a change in knowledge or skills or behavior following the training* *Inactive - ESM MH.3 - Percent of families who receive at least one Regional Center referral that results in needed services received* ESM MH.4 - Number of unduplicated organizations (hospitals, clinics, or health care systems) collaborating with	NPM - Medical Home	<u>Linked NOMs:</u> Children's Health Status CSHCN Systems of Care Flourishing - Young Child Flourishing - Child Adolescent - CSHCN Flourishing - Child Adolescent - All

Priority Needs	Five-Year Objectives	Strategies	Evidence-Based or –Informed Strategy Measures	National and State Performance Measures	National and State Outcome Measures
			Title V to implement medical home practices for all children, including children with special health care needs. ESM MH.5 - Percent of referrals that resulted in services received at the time of follow-up. ESM MH.6 - Percent of youth-serving providers who report a planned behavior change as a result of participating in training.		
All children and their families experience timely, nearby, uncomplicated, coordinated care and supports to live and thrive.	Increase the number of children who receive a developmental screening.	Enhance and expand universal developmental monitoring and developmental screening (using evidence-based screening tools) and strengthen referral processes.	*Inactive - ESM DS.1 - Percent of medical providers trained who report using an evidence-based screening tool* *Inactive - ESM DS.2 - Percent of medical providers trained who report a change in knowledge related to developmental screening age interval recommendations* *Inactive - ESM DS.3 - Percent of community developmental screening training participants who*	NPM - Developmental Screening	**Linked NOMs:** School Readiness Children's Health Status

Priority Needs	Five-Year Objectives	Strategies	Evidence-Based or –Informed Strategy Measures	National and State Performance Measures	National and State Outcome Measures
			report an increase in knowledge regarding developmental screening ESM DS.4 - Percentage of trainees who report they will begin implementing developmental monitoring and/or developmental screening practices.		

Adolescent Health

All adolescents have the reliable, timely, nearby mental health supports that they need, and are free from the harms of untreated mental health conditions.	Increase the number of adolescents receiving mental health treatment who need it.	Implement initiatives to improve youth mental health supports in collaboration with youth, local/Tribal health agencies, schools, and/or school based health centers.	ESM MHT.1 - Number of youth engaged in planning, creating, implementing, or evaluating Title V-funded adolescent mental health projects and initiatives.	NPM - Mental Health Treatment	**Linked NOMs:** Adolescent Mortality Adolescent Suicide Adolescent Firearm Death Adolescent Injury Hospitalization Children's Health Status Adolescent Depression/Anxiety CSHCN Systems of Care Flourishing - Child Adolescent - CSHCN Flourishing - Child Adolescent - All

Children with Special Health Care Needs

All children and youth with special health care needs and their families experience	Increase the number of children, including children and youth with special health care needs, that have a medical home.	Increase support for families of children and youth with special health care needs (CYSHCN). Support providers to implement medical home practices. Increase support for children and youth with special health care needs (CYSHCN) in school settings.	*Inactive - ESM MH.1 - Percent of Regional Center information & referral staff who report competence in explaining medical home concepts*	NPM - Medical Home	**Linked NOMs:** Children's Health Status CSHCN Systems of Care Flourishing - Young Child Flourishing - Child Adolescent - CSHCN Flourishing - Child Adolescent -

Priority Needs	Five-Year Objectives	Strategies	Evidence-Based or –Informed Strategy Measures	National and State Performance Measures	National and State Outcome Measures
timely, nearby, uncomplicated, coordinated supports to live and thrive.			*Inactive - ESM MH.2 - Percent of family members, health care providers, and community professionals trained on Medical Home-related concepts who report a change in knowledge or skills or behavior following the training* *Inactive - ESM MH.3 - Percent of families who receive at least one Regional Center referral that results in needed services received* ESM MH.4 - Number of unduplicated organizations (hospitals, clinics, or health care systems) collaborating with Title V to implement medical home practices for all children, including children with special health care needs. ESM MH.5 - Percent of referrals that resulted in services received at the time of follow-up. ESM MH.6 - Percent of youth-serving		All

Priority Needs	Five-Year Objectives	Strategies	Evidence-Based or –Informed Strategy Measures	National and State Performance Measures	National and State Outcome Measures
			providers who report a planned behavior change as a result of participating in training.		
Cross-Cutting/Systems Building					
All families experience emotional and physical safety in their communities, are free from discrimination, and have the social support they need.	Increase the percent of children living in supportive neighborhoods.	Support community events and community engagement opportunities. Promote community-level access and coordination of services and resources.	No ESMs were created by the State. ESMs are optional for this measure.	SPM 1: Percent of children living in supportive neighborhoods.	
All families have enough food and adequate nutrition to live and thrive.	Decrease rates of food insecurity in Wisconsin.	Support the Food is Medicine movement.	No ESMs were created by the State. ESMs are optional for this measure.	SPM 2: Percent of food insecurity in Wisconsin.	