

Maternal and Child Health Advisory Board (MCHAB)
November 6, 2020 Update

- **Domain: Women/Maternal Health**
 - Increase the percent of women ages 15-44 receiving routine check-ups in the previous year
 - Increase the percent of women receiving prenatal care in first trimester

- **Title V MCH Program and Partners –**
 - Community Health Services (CHS) provided 2,451 preventive education services, 282 well-care screenings, 482 contraceptives, 228 Sexually Transmitted Infection (STI) screens, 47 immunizations, and 443 clients received nutrition, weight, and exercise information. All women presenting for reproductive health visits were screened for domestic violence and behavioral health, as well as depression. One woman was referred to a mental health provider.
 - Carson City Health and Human Services (CCHHS) conducted 573 well visits for women. Referrals were made for 12 women afflicted by domestic violence, 86 for mood disorders, 128 for substance use, and 312 reporting alcohol use were educated about risks of alcohol use with pregnancy. Sobermomshealthybabies.com was promoted during clinic visits.
 - DP Video conducted a month-long social media campaign displaying videos and messages reminding pregnant women to keep their scheduled prenatal visits, learn if their provider needs to see them in-person or if their visit can be done by phone or video. Pregnant women were provided a link directly to the COVID-19 and pregnancy information from CDC on the DPBH website. <http://dpbh.nv.gov/Programs/MIP/dta/Links/links/>. Four video ads (2 English/2 Spanish) were displayed on Facebook/Instagram. The messages reached 50,067 people in the specified demographics, with 25,274 video views, 285,994 media impressions and 1,064 clicks on the links for additional resources. Four video ads (2 English/2 Spanish) were displayed on Twitter resulting in 194,693 media impressions.

- **Rape Prevention & Education (RPE) Program –**
 - The Nevada Rape Prevention and Education (RPE) Program is part of a national effort launched by the Centers for Disease Control and Prevention (CDC) in response to the Violence Against Women Act of 1994. It continues through reauthorization and expansion of the original legislation. The RPE Program focuses on preventing first-time perpetration and victimization by reducing modifiable risk factors while increasing protective health and environmental factors to prevent sexual violence. CDC funds the RPE Program, sexual violence funds set-aside through Preventive Health the Health Services (PHHS), and the Title V Maternal and Child Health (MCH) Program Block Grant.
 - Over the last few months, RPE partners have continued to adapt prevention efforts from in-person training to virtual platforms with much success.
 - UNLV continued the CARE Peer Program (CPP), an individual/relationship level strategy, and the CARE Campus initiative, a strategy focused at the community level. CPP is an empowerment-based 45-hour training curriculum with interactive modules focused on promoting social norms that protect against violence, such as bystander approaches and healthy relationship/communication components. It is offered to all UNLV students with an outreach emphasis on priority populations of women, female-identified, and LGBTQI students. Graduates of the CPP can become CPP Leaders and graduate students eligible for scholarships, thereby improving both leadership skills and economic stability as they are supported in completing their education.
 - CARE Campus focuses on revising existing protocols and procedures to identify and respond to intimate partner violence (IPV) for students, faculty, and staff. This work will

- result in tools for tracking and monitoring policy findings over time. Due to COVID-19, UNLV has moved to virtual education, outreach, and training.
- Nevada Coalition to End Domestic and Sexual Violence (NCEDSV) is working to identify policies and legislative recommendations for increasing gender equity in Nevada to empower and support women and girls. They have connected with various organizations in Nevada working on economic justice issues, which may or may not have connected economic justice and sexual violence. NCEDSV has met with or intends to meet with: Opportunity Alliance, PLAN, Nevada Women's Lobby, Nevada Women's Equity Coalition, Nevadans for the Common Good, Nevada Minority Health and Equity Coalition, Make it Work Nevada, and Make the Road Nevada.
 - NCEDSV researches statewide economic policies impacting women and girls, such as pay equity, childcare, education, and housing. Also, NCEDSV explores policy initiatives to help identify strategies to operationalize initiatives through changes to existing regulations, codes, and legislation. NCEDSV plans to identify given issues to focus on going forward and intends to hold virtual meetings with key players and interested parties in December 2020 and January 2021.
 - Safe Embrace is currently working to assist entertainment and hospitality organizations in Northern Nevada to establish and strengthen zero tolerance and sexual harassment policies in the workplace.
 - In their work to create protective environments, Safe Embrace conducted outreach to new partners in the business community, highlighting how they could increase safety for staff and patrons. Since the program's start in late 2019, 12 establishments have MOUs in place and receive information, training, and policy guidance, while 25 other establishments expressed interest in the program.
 - The Rape Crisis Center of Las Vegas (RCCLV) continues to implement the Stay Safe / SAINT program, which is targeted to the hospitality industry. While the program was initially put on hold in March due to Nevada's shelter in place order, as businesses reopened, RCCLV held socially distanced and masked training promoting safety and security. Through the Stay Safe / SAINT program, RCCLV has worked to institutionalize relationships with MGM and Wynn and seek new partnerships to expand the safety practices. In the coming year, RCCLV plans to reach out to casinos, bars, and clubs to establish and formalize programming support relationships.
 - Additionally, Nevada RPE was awarded CDC COVID-19 Supplemental funding as Nevada's current shelter-in-place restrictions from the COVID-19 pandemic continue, reports of violence in the home increase in some areas. The Domestic Violence Resource Center in Washoe County, Nevada, has observed a 64% increase in calls to its 24-hour hotline over the past months, a trend consistent with national spikes in domestic violence during COVID-19. Contributing factors for this increase include, but are not limited to, job loss, financial instability, being restricted to home environments, and close proximity to partners and children, which may amplify not only family violence but also diminish the family's ability to engage in constructive communication or coping strategies. The supplemental COVID-19 funding will support crisis response via 24-hour hotlines to increase protective factors during the COVID-19 pandemic and increase protective factors during future state-wide disasters and emergencies by improving public health emergency preparedness (PHEP) capabilities through community preparedness and information sharing.

- **MCH Coalition (north, south and statewide) –**
 - The NV Statewide MCH Coalition continues to distribute materials promoting the Go Before You Show campaign, the Medical Home Portal (MHP), Perinatal Mood and Anxiety Disorders (PMAD), Nevada 211, Sober Moms Healthy Babies and the Nevada Tobacco Quitline. In addition, monthly e-newsletters, educational opportunities, and Program updates are provided to Coalition members. Social media campaigns promoting maternal, child, and adolescent health continue on Facebook and Instagram.
 - Southern Nevada MCH Coalition meetings were held:
 - July 2020: No meeting
 - August 2020: No meeting
 - September 2020: No meeting
 - Northern Nevada MCH Coalition meeting were held:
 - July 2020: No meeting
 - August 13, 2020
 - September: No meeting
 - Held quarterly steering committee meeting on August 20, 2020
 - Disseminated information to the MCH Coalition listserv regarding COVID-19, rental assistance, and ACA Open Enrollment.
 - Six Perinatal Mood and Anxiety Disorder (PMAD) support group meetings were conducted, two per month. Online training attendance for August was 36, and 27 in September.
 - Facebook followers increased by 9 in July, by 11 in August, and by 10 in September for a total of 30 from July to September.
 - Instagram followers increased by 16 in July, by 14 in August, and by 20 in September for a total of 50 from July to September.
- **Nevada Pregnancy Risk Assessment Monitoring System (PRAMS) Program**
 - The Pregnancy Risk Assessment Monitoring System (PRAMS) is a joint research project between the Nevada Division of Public and Behavioral Health and the Centers for Disease Control and Prevention (CDC). The purpose is to determine protective factors for healthy, full-term births; risk factors for short-term births, babies born with disabilities; and maternal health. To do this, our questionnaire asks new mothers questions about their behaviors and experiences before, during, and after their pregnancy. Each year in Nevada hundreds of babies are born with serious health concerns or disabilities. Many factors in a mother's life may affect her pregnancy and the health of her child, this survey is designed to capture these variables. The overall goal of PRAMS is to reduce infant morbidity and mortality and to promote maternal health by influencing maternal and child health programs, policies, and maternal behaviors during pregnancy and early infancy.
 - PRAMS received \$14,999 in supplemental funds in year 5 of the grant that runs from May 1, 2020 to April 30, 2021. These supplemental funds allow for the continuation of the additional disability questions through March of 2020. NV PRAMS continued the opioid supplemental questions with MCH Title V Program and state general funds. A total of 18 supplemental questions will continue on the survey relating to pregnancy and disability, as well as opioid use in pregnancy. Data from the survey will inform future data driven MCH efforts.
 - Nevada PRAMS will be applying for supplemental funding from the Council of State and Territorial Epidemiologists (CSTE) to add eleven questions on how the COVID-19 pandemic and response impacted women's pregnancy and birth experiences. These

questions began in October 2020, and will run through April 2020, representing six months of data collection.

- 2017 Nevada PRAMS data had a response rate of 41% and 2018 data had a response rate of 39%, which is under the Centers for Disease Control and Prevention (CDC) required response rate threshold of 55% to publish data. This data should be interpreted with caution due to the response rate. Nevada PRAMS has submitted the 2019 birth file to the CDC and should be receiving weighted data soon.
- Data can be requested via the Office of Analytics at data@dhhs.nv.gov. The primary goal for Nevada PRAMS is to increase response rates moving forward.

- **Domain: Perinatal/Infant Health**

- Increase the percent of children who are ever breastfed
- Increase the percent of children who are exclusively breastfed at 6 months
- Increase the percent of baby-friendly hospitals in Nevada

- **Title V MCH Program and Partners –**

- CCHHS reached out to 31 businesses to educate about breastfeeding laws, encourage participation in the Breastfeeding Welcome Here (BFWH) Campaign, and check interest in needing a space established for staff to feed their infants. One business committed to being provided with Title V funded supplies for a designated employee/patron breastfeeding area. A Facebook campaign promoting infant immunizations reached 4,478 people, with 709 engaged users, 147 'likes' and 5 shared with their networks. Vaccination reminder cards were sent for 20 infants/toddlers four through 35-months old in need of 1st MMR and 4th Dtap shots. During clinic visits, staff educated 19 women receiving positive pregnancy test results about breastfeeding. All were referred to WIC for support, informed about the value of participating in the Pregnancy Risk Assessment Monitoring System (PRAMS) survey and given information about Sobermomshealthybabies.org. The English and Spanish Facebook campaign promoting the PRAMS survey reached 4,689 people, with 91 clicking on the link for more resources. Three 'liked' the post and two shared with their networks.

- **Safe Sleep Media Campaign**

May, June, July 2020: 413 Total TV Spots Aired, 3,782 Radio Spots Aired

- TV
 - North: 75 English, 47 Spanish
 - South: 211 English, 80 Spanish
- Radio
 - North: 2,160 English, 113 Spanish
 - South: 1,335 English, 174 Spanish

- **SoberMomsHealthyBabies.org Media Campaign**

May, June, July 2020: 441 Total TV Spots Aired, 2,559 Radio Spots Aired

- TV
 - North: 99 English, 48 Spanish
 - South: 196 English, 98 Spanish
- Radio
 - North: 1357 English, 92 Spanish
 - South: 1025 English, 85 Spanish

- **PRAMS Media Campaign**

May, June, July 2020: 148 Total TV Spots Aired, 1,036 Radio Spots Aired

- TV
 - North: 24 English, 22 Spanish
 - South: 78 English, 24 Spanish

- Radio
 - North: 640 English, 45 Spanish
 - South: 325 English, 26 Spanish

- **Washoe County Health District (WCHD) continues to review records for the Fetal Infant Mortality Review (FIMR)**
 - Twenty one new FIMR cases were received between July 1, 2020 and September 30, 2020 from local hospitals, Washoe County Medical Examiner's Office and Washoe County Health District Vital Statistics. Three of the cases were out of jurisdiction, (not from Washoe County) but received some care within Washoe County. The number of cases received and out of jurisdiction cases are preliminary
 - There were three Case Review Team (CRT) meetings during this reporting period. Sixteen cases were presented and discussed. Meetings have been held virtually since COVID-19. The team did meet in person on September 16, 2020. The team typically meets monthly, except in June and December.
 - Staff reviewed the "Count the Kicks" presentation with the FIMR Team and the FIMR Team made the recommendation to move forward with the project, "Count the Kicks" which is an App for expectant parents to monitor fetal movement during the third trimester.
 - Staff continue to attend and provide updates at the Northern Nevada Maternal Child Health meetings, Pregnancy & Infant Loss Support Organization of the Sierras (PILSOS) and Washoe County Child Death Review meetings.
 - The Northern Nevada Maternal and Child Health (NNMCH) Coalition continues to function as the FIMR Community Action Team (CAT). One NNMCH Coalition meeting was held during this quarter. In a recent meeting was held on August 13, 2020 and a presentation on "Count the Kicks" was given by the Executive Director of "Count the Kicks". The NNMCH Coalition voted to move forward with a statewide campaign if possible next grant cycle. The NNMCH Coalition announced the redirection of funds to get billboards for the "Go Before You Show Campaign" and is in the process of developing Public Service Announcements for future radio spots. The Northern Nevada Breastfeeding Coalition has established a Black Mamas, Black Parents Support Group. The next NNMCH Coalition will be held on October 8, 2020.
 - PILSOS 10th Annual "A Time for Remembrance" event was held October 11, 2020, at Idlewild Park. All funds for this event are raised by PILSOS members. Washoe County FIMR Staff participate in this event, meetings and work leading up to this event.
 - Staff continue to make information available on the Nevada Tobacco Quitline, Nevada Children's Medical Home Portal and Nevada PRAMS in the public areas of the WCHD, as well as in all clinics.
 - The Case Review Team remains dynamic with a diverse multidisciplinary membership and consistent core group of participants. The team continues to recruit members to gain an ongoing diverse group representing multiple disciplines. Staff are actively recruiting for representation from Tribal entities.
 - Staff members continue to explore potential grant opportunities for sustainability planning.
 - Nevada via the Washoe County FIMR Program was one of five states selected by The National Center for Fatality Review and Prevention for participation in the 2020 National Storytelling Collaborative. Other states participating include Missouri, Florida, Kansas, Michigan and Maryland. This program is designed to strengthen capacity for teams to obtain and use parental/family interviews and stories for social change.

- **Safe Sleep/Cribs for Kids-**
 - Provides safe sleep media outreach and conducts activities with safe sleep partners, including community event participation statewide.
 - Maintain consistent partner communication and continue with the train-the-trainer model.
 - Work with hospital partners to implement Infant Safe Sleep practices and increase awareness by presenting at a minimum of four hospitals per year.
 - Includes Infant Safe Sleep brochures in the PINK packets
 - Delivered program supplies and equipment.
 - Purchased more safe sleep kits to distribute to partners
 - Continued to promote 211, Nevada Tobacco Quitline and Nevada Children’s Medical Home Portal
 - DHHS conducted a social media campaign in October about Safe Sleep Awareness Month and shared the information on Facebook and Instagram

- **REMSA Cribs for Kids, July 1 to September 30, 2020:**
 - Attended virtual meetings with Northern Nevada MCH Coalition, Safe Kids Coalition, Immunize Nevada, Foundation for Recovery, Liberty’s Community Smiles,
 - Taught a Safe sleep awareness class at the Life Change Center
 - Connected with the New Ron Wood Family Resource Center Cribs for Kids main contact
 - Distributed car sets to Tribal partners:
 - Owyhee- 5 car seats
 - Washoe- 0 seats due to event cancellation
 - Southern Bands- 0 car seats
 - Walker River Paiute Tribe- 5 car seats
 - Survival kit distribution: 184
 - Binder distribution: 12
 - Poster distribution: 585
 - Charlie’s Kids Foundations Safe and Snug Books distribution: 35
 - Brochure distribution: 310
 - Flip Chart Distribution: 2
 - Sudden unexpected infant death (SUID) intake questionnaire: 138
 - 3-month follow-up: 59
 - 12-month follow up: 4

- **Maternal-Infant Program –**
 - Critical Congenital Heart Disease (CCHD) data collection continues.
 - Congenital syphilis reduction efforts are a focus of MCAH staff efforts in partnership with DHHS and DPBH programs
 - Participation was completed in the AMCHP-led Infant Mortality ColIN focused on the Social Determinants of Health. The IM ColIN ended 9/2020, a final budget update was submitted 9/2020 and a final virtual meeting was attended on August 24, 26 and 28, 2020. A final interview was completed on October 23, 2020
 - Breastfeeding Welcome Here Campaign
 - A new National Breastfeeding Month banner was purchased. The banner was displayed over Carson Street in August to promote National Breastfeeding Month and the nevadabreastfeeds.org website.
 - New campaign materials are also in process.
 - KPS3 is continuing to host the website address for nevadabreastfeeds.org. The website is going through an update and should be completed in October
 - MCAH staff continue to participate in the Nevada ASHTO OMNI and CARA substance use in pregnancy core team.

- Updated Infant Plan of Care and CARA provider and family resources were posted on sobermomshealthybabies.org
 - FIMR participation and addition of COVID-19 resources on the DPBH MCAH website
 - Information dissemination on maternal and infant COVID-19, anti-racism and health equity resources
 - AIM contract and workplan drafts were completed by MCAH staff; AIM annual meeting was attended by MCAH staff and AIM data system is under construction
 - Maternal Mortality Review Committee case abstraction and case record documentation requests continue; CDC MMRIA training was completed by 3 MCAH staff members
 - Newborn Advisory Committee participation by MCAH staff
 - Regulatory development in relation to newborn screening fees and diapering resources are ongoing.
 - Reproductive health promotion and working with MCAH staff to administer the Account for Family Planning continues
- **Domain: Child Health**
 - Increase the percent of children (10-71 months) who receive a developmental screening using a parent-completed screening tool
 - Increase the percent of children (6-11) who are physically active at least 60 minutes a day
- **Title V MCH Program and Partners –**
 - CHS administered 257 infant and child immunizations in the clinic setting, as well as four back to school immunization clinics and one community flu vaccination event.
 - CCHHS works collaboratively with the in-house WIC office whose staff virtually met with clients and discussed the value for a medical home with 289 individuals. Additionally, Nevada 211 and medical home portal promotional materials were discussed with CCHHS clients and made available in the clinic area. A Facebook campaign promoting the Medical Home Portal reached 4,188 people, with 124 engaged users, 9 ‘likes’ and 2 shared with their networks.
 - Nevada Institute for Children’s Research and Policy (NICRP) completed the first draft of the *Health Status of Children Entering Kindergarten in Nevada* annual report (2019-2020 results). Title V MCH staff suggested changes for consideration and upon final approval by the Title V MCH Program, the report will be posted on NICRP’s website and Title V MCH staff will ensure dissemination to stakeholders. Results from these annual surveys provide estimates for monitoring MCH indicators and for reporting to local, state, and federal entities. Despite COVID-19, all 17 school districts will participate in the 2020-2021 report by disseminating electronic or hard copy surveys to parents of kindergartners.
 - The Adolescent Health and Wellness Program (AHWP) Coordinator attended the Nevada Children’s Behavioral Health Consortium meetings and shared resources pertinent to MCH work activities with co-workers. Topics of interest included: Medicaid billing updates and changes, activities conducted through the Systems of Care Grant, Division of Child and Family Services (DCFS), as well as School-Based Health Centers. COVID-19 has necessitated policy shifts towards enhanced telehealth services, including billing for virtual care.
 - The AHWP Coordinator serves as a member
- As part of a multi-agency effort, Title V MCH purchased Milestone Moments booklets to ensure the University Center of Autism and Neurodevelopment (UCAN) can continue

statewide screening and distribution of the *Learn the Signs. Act Early* parental screening tool.

- **Child and Adolescent ColINs**

- The AHWP Coordinator continued participation in the Collaborative Innovation and Improvement Network (ColIN) facilitated through the Association of State Public Health Nutritionists. MCH collaborated with the Nevada Office of Food Security and Obesity Prevention and Control programs on a social media campaign promoting a series of fact sheets to assist Early Care and Education centers in implementing the Child and Adult Care Food Program (CACFP). This program is recommended to help childcare settings improve childhood nutrition, prevent obesity, and address food insecurity. CACFP provides reimbursement for healthier meals and snacks served in licensed childcare settings. Despite these benefits, Nevada ranks among the lowest enrollment rates in the country.
- The AHWP Coordinator serves as the Title V MCH mandated member on the National Center for School Mental Health ColIN. The National Launch meeting provided an overview of activities led in Nevada by the Department of Education. Goals include (a) providing supports and services promoting positive school climate, social emotional learning, mental health and well-being, (b) building a foundation of school staff in strategic partnership with students, families and community partners, and (c) assessment and addressing the social and environmental factors impacting physical and emotional health. Five school districts will test outcomes through Plan-Do-Study Act (PDSA) cycles.

- **Domain: Adolescent Health**

- Increase the percent of adolescents aged 12-17 with a preventive medical visit in the past year
- Increase the percent of middle school and high school students who are physically active at least 60 minutes a day
- Reduce pregnancies among adolescent females aged 15 to 17 years and 18 to 19 years

- **Title V MCH Program and Partners –**

- Community Health Services (CHS) provided 515 preventive education services, 56 well-care screenings, 110 contraceptives, 54 STI screens, 276 immunizations, and provided 90 adolescents with nutrition, weight, and exercise information. Youth presenting for reproductive health visits were screened for domestic violence and emotional/mental health issues, as well as depression.
- Carson City Health and Human Services (CCHHS) conducted 53 well visits for adolescents. Referrals were made for youth afflicted by domestic violence, 5 for mood disorders, 13 for substance use, and 9 reporting alcohol use. A Facebook campaign to enhance adolescent well-visits reached 5,120 people, with 30 clicking on the link for more resources. Ten 'liked' the post and one shared with their networks.
- Urban Lotus Project (ULP) Trauma-Informed Yoga for Youth no-cost courses started up again at six agencies serving Northern Nevada adolescents at public community hubs, drop-in centers, treatment facilities, and human service entities. COVID-19 resulted in 12 routine locations not offering in-person classes. Only a few residential facilities have authorized youth to attend virtual courses, significantly reducing exposure to the benefits of yoga movement, breathing, and mindful meditation. Yoga teachers taught 89 classes to 251 adolescents reaching 95 new students. [ULP was unable to obtain a count of students served through virtual classes, so these numbers are underrepresented].
 - Course promotion, expansion, and growth:
 - New courses were added in an outside park, and through the Ron Wood Family Resource Center, serving foster youth.

- Virtual public classes were promoted via fliers disseminated through the Washoe County School District (WCSD), MCH Coalition, Boys & Girls Club, mailings to 1,250 new businesses, and sponsored Facebook social media posts.
- Meetings occurred with the WCSD Physical Education (PE) teachers to discuss in-person and virtual classes at specific schools for PE credits, as well as integrating classes into the Boys & Girls Club before and after school programs and distance learning support services.
- ULP became a Champion of the National Youth Sports Strategy (NYSS) promoting youth sports participation. NYSS is organized by US Department of Health & Human Services through the Office of Disease Prevention and Health Promotion's Physical Activity Program.
- ULP received two microgrants: United Way of Northern Nevada to help with COVID impact, and Renown's Health Diversity, Equity, and Inclusion Grant.
- DP Video conducted a month-long social media campaign displaying videos and messages promoting the value of yearly well-visits to adolescents and families with teens. Six video ads (3 English/3 Spanish) were displayed on Facebook/Instagram. The messages reached 61,955 people in the specified demographics, with 30,217 video views, 540,946 media impressions and 1,414 clicks on the links for additional resources. Six video ads (3 English/3 Spanish) were displayed on Twitter resulting in 493,656 media impressions.

- **Adolescent Health and Wellness Program (AHWP)–**

- The AHWP Coordinator worked with Division of Welfare and Supportive Services (DWSS) and Nevada Health Links (NHL) to update the brochure *Does Your Teen Need Health Coverage?* Insurance open enrollment begins in November, thus over 15,000 of the newly revised brochures were disseminated to key stakeholders (DWSS, NHL, DCFS) and community partners. Typically, 30,000 are disseminated this time of year; however, COVID-19 involves more online insurance assistance. Electronic links to the brochures were shared with all partners and the updated content placed on the DPBH website.
- The AHWP Coordinator and MCH Unit Team attended the virtual annual Association of Maternal and Child Health Programs conference: *The Power of Connections – Building Equity for Healthy Generations*. Key concepts learned were (a) youth engagement focus is shifting towards the creation of strong youth-adult partnerships to enhance young person's successes; (b) Getting to 'Y' program bringing meaning to each state Youth Risk Behavior Survey (YRBS) data using youth as leaders to help bring awareness and change to their communities to improve their specific emerging health and wellness issues; (c) efforts by countless organizations to improve health outcomes and access to communities experiencing disproportionate disparities, especially during COVID-19 and (d); several resources to support system development and services to engage and support youth and young adults. Resources were shared with youth serving partners, organizations and youth advisory councils across the state.
- The AHWP Coordinator disseminated youth mental health care best practice resources to be displayed on the MCH Coalition and Office of Primary Care e-newsletters. Additionally, the Facebook video posts created by DP Video were shared with funded partners and outside agencies for placing on their Facebook pages. Topic content included: PRAMS, health care transition, prenatal care and adolescent well-visits during COVID-19, as well as youth mental health.

- **Domain: Children and Youth with Special Health Care Needs (CYSHCN)**

- Increase the percent of children with special health care needs with a medical home
- Increase the percent of children without special health care needs with a medical home
- Increase the number of WIC, Home Visiting, Healthy Start, and other program participants that received information on the benefits of a medical home

- Increase the number of referrals to Nevada's medical home portal

- **Title V MCH Program and Partners –**

- Family TIES of Nevada (FTON) continues to maintain the children and youth with special health care needs (CYSHCN) helpline, provide translation services for families with CYSHCN, conduct Parent to Parent (P2P) program trainings assisting families with CYSHCN and educate families on how to navigate the Medical Home Portal. Over 150 families were assisted with translation services (primarily by phone), 130 with insurance eligibility assistance, 55 with education on the Medical Home Portal and P2P, and 150 received a variety of informational brochures and referrals.
- Nevada Center for Excellence in Disabilities (NCED) continued to train and distribute valuable resources for CYSHCN professionals and parents on transition health care, the medical home model, and the Medical Home Portal. NCED staff gave two virtual presentations to UNR CYSHCN students and staff, as well as Nevada Department of Education professionals and rural educators for a total of 32 virtual training attendees. NCED staff also attended a third Healthcare Transition Learning Group workshop to receive further resources to share with professionals and families.
- The Northern Nevada Cleft Palate Clinic (NNCPC) saw twelve patients this quarter, consisting of seven male and five female individuals ranging in age from 1-19 years old.. Seven patients were covered by Medicaid and the remaining five had private insurance.
- The Children's Cabinet (TCC) and the Technical Assistance on Social Emotional Intervention (TACSEI) continued to engage families through use of social emotional Pyramid Model trainings serving CSHCN 0-5 years of age. TCC enhanced parent involvement through newsletters and virtual meetings, and enhanced health literacy to parents/caregivers through distribution of Milestone Moments books in English/Spanish, Making Life Easier materials, Backpack Series materials, Help Us to Have a Good Day materials, National Center for Pyramid Model Innovations (NCPMI) COVID-19 Family materials, and developmental screenings using the Ages and Stages Questionnaire (ASQ). TCC-TACSEI developmentally screened 170 children from nine implementation sites and nine demonstration sites. TCC also distributed 38 TACSEI kits to regional organizations after virtual trainings.

- **Children and Youth with Special Health Care Needs (CYSHCN) Program**

- Title V MCH staff finished participation in the AMCHP Emergency Preparedness and Response Action Learning Collaborative (EPR ALC) in collaboration with the Nevada DPBH Public Health Emergency Preparedness (PHEP) Program. Through this opportunity, AMCHP and CDC provided technical assistance to Nevada and other participating states to aid in developing or enhancing the integration of MCH populations in their emergency preparedness and response plans. This final quarter Title V MCH staff reviewed hospital protocols for discharging newborns and postpartum women after an emergency, including those who are displaced from disaster-affected homes.
- Title V MCH staff continued participation in the Pediatric Mental Health Care Access Program (PMHCAP) with the Nevada Division of Child and Family Services (DCFS). PMHCAP uses telehealth strategies like Mobile Crisis Response teams to expand mental health services for children in Nevada. Title V MCH staff recently peer reviewed the Early Childhood Mental Health Brief development process and protocols initiated by PMHCAP and the Nevada Institute for Children's Research and Policy (NICRP).
- Title V MCH staff shared general vaccination resources from the Centers for Disease Control and Prevention (CDC) and Sick Cell Disease (SCD)-specific immunization schedules, CDC SCD infection prevention flyers, and two flu awareness events to the Nevada MCH Coalition, as well as Family TIES of Nevada.

- Title V MCH staff provided federally available data (FAD) on flu immunizations for children to Dr. Nik Rashid and Linetta Barnes, BSN, RN from Sickled Not Broken Foundation of Nevada.
- **Domain: Cross-Cutting/Lifecourse (activities within this domain are included within each subpopulation above), which include the following objectives:**
 - Reduce the percent of women who smoke during pregnancy
 - Increase the percent of women who call the Nevada Tobacco Quitline for assistance
 - Reduce the percent of women using substances during pregnancy
 - Reduce the percent of children who are exposed to secondhand smoke
 - Increase the percent of adequately insured children
 - Increase the percent of callers to Nevada 2-1-1 inquiring/requesting health insurance benefits information
- **Tobacco Cessation:**
 - All subgrantees continue to promote the Nevada Tobacco Quitline (NTQ). CCHHS and CHS referred tobacco users to the NTQ. CCHHS counseled self-identified nicotine users with a Brief Tobacco Intervention resulting in 138 referrals to the NTQ due to desire to change smoking/vaping habits. CHS referred 1 woman of childbearing age (15-44 years old) to the NTQ
- **Substance Use During Pregnancy:**
 - All Title V MCH subrecipients promote the SoberMomsHealthyBabies.org website
 - Title V MCH staff participate in Substance Use workgroups and collaborate with the Substance Abuse Prevention and Treatment Agency (SAPTA) on the Comprehensive Addiction Recovery Act (CARA) initiatives, including Infant Plan of Care, and the Association of State and Territorial Health Officials (ASTHO) Opioid Use Disorder, Maternal Outcomes, and Neonatal Abstinence Syndrome Initiative (OMNI)
 - CARA final materials were posted to the SoberMomsHealthyBabies.org website
- **Nevada Public Health Conference**
 - The Nevada Public Health Conference was tentatively scheduled for fall 2020 but has been postponed until March 8-9, 2021.
- **Adequately Insured Children:**
 - CCHHS partners with the Division of Welfare and Supportive Services (DWSS) by placing insurance enrollment staff on-site. Due to COVID-19, onsite efforts were replaced with virtual/online assistance, thus reporting ceased for this activity. In-reach was provided to uninsured clients seeking services through CCHHS.
- **Nevada 211:**
 - Nevada 211 received 156 calls/texts from within the MCH population with 96% being pregnant. PRAMS program information was provided to 6 women, 8 referrals were made to the Medical Home Portal, 15 recommendations were given for Text 4 Baby, 3 for sobermomshealthybabies.org, and 2 for resources to deal with perinatal mood and anxiety disorder. Caller/text demographics reported revealed 65% were on Medicaid, 91% resided in Clark County. The highest caller needs were for rent (36%), utilities (15%), and health insurance (8%).
 - All subgrantees continue to promote Nevada 211.
 - CCHHS conducted a Facebook campaign promoting Nevada 211 reaching 4,188 people, with 124 engaged users. Nine 'liked' the post and two shared with their networks.

- **Nevada Home Visiting:**
 - All Nevada Home Visiting sites successfully navigated transition to virtual services. The NHV Program shared COVID-19 resources with Local Implementing Agencies and submitted the grant application and data reporting to HRSA.
 - More than 1000 virtual home visits have been provided to families
 - Families have received help connecting to the internet through free services from Spectrum
 - Families have received help accessing telehealth services for well child, well adult, and mental health services
 - Some agencies have supported families with food from local food pantries and have delivered to keep families safe.
 - Children have received curriculum handouts either delivered or in the mail, as well as books
 - Home Visitors have adjusted activities to use what families have on hand to support their child's development

- **Teen Pregnancy Prevention Programs:**
 - All Teen Pregnancy Prevention Program sites successfully navigated transition to virtual services and curricula implementation. The Program shared COVID-19 resources with agencies.
 - A Teen Mental Health social media campaign was completed, linking youth to Resilience Ambassador (<https://www.nevada211.org/nevada-resilience-project/>) information at dpbhnrp@health.nv.gov.

- **Nevada Early Hearing Detection and Intervention**
 - Nevada Early Hearing Detection and Intervention (EHDI) successfully works with its hospital, audiologist, early intervention provider and family-based organization partners to ensure all children in Nevada are screened for hearing loss at birth and those identified with hearing loss receive timely and appropriate audiological, educational and medical intervention. EHDI promotes the national EHDI goals and timelines developed by the Joint Committee on Infant Hearing. Information and resources are available here: <http://dpbh.nv.gov/Programs/EHDI/EHDI-Home/>
 - Cytomegalovirus (CMV) public awareness information and resources are available here: <https://nevadacmv.org/>