



January 2024

DOH 141-129

2022-23 Local Health Jurisdiction Success Stories

Washington State Congressional District 4

The Maternal and Child Health Block Grant (MCHBG) is provided through Title V of the Social Security Act of 1935. [Washington State Department of Health](https://www.wa.gov/department-of-health) receives about \$8.8 million annually, and more than 60% goes to serve 39 counties through contracts with Local Health Jurisdictions (LHJ) and a hospital district.

Adams, Benton, Douglas, Franklin, Grant, Klickitat, Okanogan, and Yakima counties together receive approximately \$1,055,603 of MCHBG funding to improve maternal and child health outcomes in their communities. These funds help create and support initiatives for pregnant individuals, infants, children, adolescents, and children and youth with special health care needs (CYSHCN). The success stories below show the impact of these initiatives in the 2022-23 contract year.

Benton-Franklin Health District

We created a Perinatal Collaborative/Birth Outcomes Taskforce to improve perinatal and birth outcomes in our counties. Staff brought together participants from clinical and community sectors to coordinate efforts on issues like perinatal substance use disorder and congenital syphilis. Thirty-nine participants attended the first Perinatal Collaborative meeting. Our staff are committed to learning about reducing harm and stigmatizing language. We also published a Maternal Child Health Data Dashboard.

Chelan-Douglas Health District

We championed the Universal Developmental Screening (UDS) program in our community. Staff added developmental milestones and screening conversations into our Nurse-Family Partnership (NFP) work. We were 1 of the 2 LHJs in the state that received additional MCHBG funding for a pilot project. We used this funding to connect with child care providers and expand our UDS efforts. Staff screened the children of NFP clients and entered the data into Washington's Strong Start developmental screening data system.

Grant County Health District

We worked closely with Inspire Development Centers to promote Strong Start. Inspire Development Centers provide Head Start programs to migrant families. These families often experience greater challenges when navigating health and social systems. This makes Strong Start even more valuable for recording early developmental screenings. Staff attended parent nights at centers in Grant, Adams, and Franklin counties to support parents in enrolling and using Strong Start. We also presented the outcomes

and takeaways of this work at the Washington State Public Health Association conference.

Klickitat County Health Department

We advanced our perinatal mental health work by serving on different task forces and attending perinatal mood disorders training. With the Perinatal Mental Health Task Force, we helped create and facilitate several perinatal support groups throughout the Columbia River Gorge.

We supported CYSHCN families with access to transportation and resources. Examples include a car seat for a family who couldn't afford it and an air purifier for a child with asthma. Due to COVID-19-related changes, we had to rebuild our client load for the CYSHCN program. We made progress and increased referrals to the CYSHCN program by connecting with members and organizations in the community.

Okanogan County Public Health District

As a rural county in north central Washington, we value local-level data to improve community health. Staff and community partners analyzed our data and advocated for additional data. We reviewed the Community Health Assessment data with our Community Health Improvement team. We discussed how internet access, availability of specialty care, and travel times impact maternal, child, and adolescent health. When our community partners were hesitant about completing the Healthy Youth Survey, we explained the importance of local data and its effect on funding levels. We shared how survey data affects our community's ability to address health outcomes.

Multicare Yakima Memorial Hospital

We provided home visiting to families who could not access these services elsewhere. We helped a young mother find care and resources for her infant born with a cleft lip and palate. The infant's complex medical needs and rehospitalization caused anxiety and bonding issues between the mother and the infant. Our Registered Nurse provided medical support and guidance on mother-infant bonding and helped her access peer support. The mother is now very confident in using her infant's feeding tube, interactions between her and the infant have significantly improved, and she regularly connects with a support group.



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