



PRIORITY 4

Adolescents and young adults have access to and utilize integrated, holistic, patient-centered care to support physical, social, and emotional health.



ADOLESCENT

OBJECTIVE 4.1

Increase the proportion MCH program participants, 12 through 17 years, receiving quality, comprehensive annual preventive services by 5% annually through 2025.

OBJECTIVE 4.2

Increase the proportion of adolescents and young adults that have knowledge of and access to quality health and positive lifestyle information, prevention resources, intervention services, and supports from peers and caring adults by 10% by 2025.

OBJECTIVE 4.3

Increase the number of local health agencies and providers serving adolescents and young adults that screen, provide brief intervention and refer to treatment for those at risk for behavioral health conditions by 5% by 2025.

NPM 10: Adolescent well-visit (Percent of adolescents, 12 through 17, with a preventive medical visit in the past year)



PRIORITY 5

Communities, families, and providers have the knowledge, skills, and comfort to support transitions and empowerment opportunities.



CHILDREN WITH SPECIAL HEALTH CARE NEEDS

OBJECTIVE 5.1

Increase the proportion of adolescents and young adults who actively participate with their medical home provider to assess needs and develop a plan to transition into the adult health care system by 5% by 2025.

OBJECTIVE 5.2

Increase the proportion of families of children with special health care needs who report their child received care in a well-functioning system by 5% by 2025.

OBJECTIVE 5.3

Increase the proportion of families who receive care coordination supports through cross-system collaboration by 25% by 2025.

NPM 12: *Transition: Percent of adolescents with and without special health care needs, ages 12-17, who received services necessary to make transition to adult health care*



PRIORITY 6

Professionals have the knowledge, skills, and comfort to address the needs of maternal and child health populations.



CROSS-CUTTING AND SYSTEMS BUILDING

OBJECTIVE 6.1

Increase the proportion of providers with increased comfort to address the behavioral health needs of MCH populations by 5% by 2025.

OBJECTIVE 6.2

Increase the proportion of MCH local agencies implementing trauma-informed approaches that support increased staff satisfaction and healthier work environments by 5% annually through 2025.

OBJECTIVE 6.3

Increase the proportion of MCH-led activities that address social determinants of health (SDOH) to reduce disparities and improve health outcomes for MCH populations by 15% annually through 2025.

SPM 3: *Percent of participants reporting increased self-efficacy in translating knowledge into practice after attending a state sponsored work-force development event.*



PRIORITY 7

Strengths-based supports and services are available to promote healthy families and relationships.



CROSS-CUTTING AND SYSTEMS BUILDING

OBJECTIVE 7.1

Increase the proportion of MCH-led activities with a defined program plan for family and consumer partnership (FCP) to 75% by 2025.

OBJECTIVE 7.2

Increase the number of individuals receiving peer supports through Title V-sponsored programs by 5% annually through 2025.

OBJECTIVE 7.3

Increase the number of families and consumers engaging as leadership partners with the MCH workforce through the FCP Program by 5% annually through 2025.

OBJECTIVE 7.4

Increase the number of MCH-affiliated programs providing holistic care coordination through cross-system collaboration by three through 2025.

SPM 4: *Percent of children whose family members know all/most of the time they have strengths to draw on when the family faces problems*