

# Maternal, Child and Adolescent Health (MCAH) Program

## ANNUAL REPORT DIRECTIONS

TOPIC	Page
Introduction	2
Annual Report Requirements	2
Time Frame	2
Failure to Comply	2
Submission	2
General Directions	3
Cover Sheet	4
MCAH Annual Report Form	5
Black Infant Health (BIH) Annual Report Form	9
Adolescent Family Life Program (AFLP) Annual Report Form	12
Fetal and Infant Mortality Review (FIMR) Annual Report Form	12
MCAH Data Table	13
MCAH/AFLP/BIH Collaborative Form	
MCAH/AFLP/BIH Annotation of Products Developed Form	
BIH/FIMR Committee Membership Form	14
FIMR Issues Checklist Form	15
FIMR Case Tracking Log	15
	15

# Maternal, Child and Adolescent Health (MCAH) Program

## ANNUAL REPORT DIRECTIONS

### Introduction

Information and data are reported in the Annual Report for a number of purposes as follows:

- To monitor implementation of the Scope of Work (SOW) and the Local Health Jurisdiction's (LHJ) performance in meeting the Title V Block Grant and the State MCAH Program priorities, goals, and objectives
- To provide data for legislative drills and the Title V Grant application which supports MCAH Program funding
- To demonstrate LHJ accountability and responsibility for completing activities described in their individualized SOW and monitor progress towards state and local objectives
- To monitor health outcomes for the MCAH population
- To document the changing face/environment /challenges of local MCAH Programs

These are some of the questions that the Annual Report will answer:

- Has the SOW been met?
- What and how are services provided?
- What are the barriers?
- What is unique about the LHJ that impacts the MCAH Programs and what is the impact?
- What strategies and activities were effective in meeting the goals and objectives?
- How is the LHJ addressing priority health issues?
- Has progress been made on addressing LHJ local priorities?

### Annual Report Requirements

All LHJs and Community Based Organizations (CBOs) receiving State MCAH Division allocations are required to complete and submit an Annual Report.

### Time Frame

**The Annual Report is due August 15<sup>th</sup> each year.**

### Failure to Comply

State MCAH Division has the option to withhold payment on current invoices for failure to submit a complete and timely report.

### Submission

Submit the Annual Report(s) following these directions:

- Mail two (2) copies of the Annual Report(s) and one copy on a CD. Include all documents in the packet. **Do not send by email.**
- Label the CD with:
  - The agency's name
  - The name of the programs included in the Annual Report, (e.g., MCAH Program, Black Infant Health (BIH) Program, Adolescent Family Life Program (AFLP), Fetal Infant Mortality



# Maternal, Child and Adolescent Health (MCAH) Program

## ANNUAL REPORT DIRECTIONS

Review (FIMR), Sudden Infant Death (SIDS), etc.

- The fiscal year (FY) of the Annual Report
- Use this address to mail **all** Annual Reports:  
**California Department of Public Health**  
**MCAH Division**  
**Annual Report (Date of fiscal year)**  
**P.O. Box 997420, MS 8305**  
**Sacramento, CA 95899-7420**

### General Directions

- All Annual Report Forms are available on the State MCAH Division Web site at: [cdph.ca.gov/MCAH](http://cdph.ca.gov/MCAH). Click on the following links:
  - MCAH Program and Fiscal Administration
  - Program and Fiscal Policy and Procedures Manual
    - Choose **FY 2011 - 2012**
- Download the Annual Report Forms and keep a master copy
- The file is designed for you to delete unwanted copies and to add additional copies
  - To delete unwanted forms: select the page that is not wanted and delete it
  - To create additional forms: insert a page break at the very bottom of the form page (a new blank page is inserted); select the full text of the form needed, copy and paste it to the new page. Do this as many times as needed
- Periodically save the Annual Report file as it is being completed
- When describing activities, accomplishments, barriers and solutions. use lists, bullets and short narratives. The intent is for concise reporting, not long narratives.

# Maternal, Child and Adolescent Health (MCAH) Program

## ANNUAL REPORT DIRECTIONS

### Cover Sheet

The cover sheet contains basic information for the Annual Report and is required for all program reports. The following points provide general information for filling out the Cover Sheet:

- Complete according to the instructions on the Form

The local MCAH Director or the AFLP Director (for AFLP CBOs outside of the local MCAH Program umbrella) must submit the Annual Report via CD. Receipt of the CD containing the Annual Report signifies approval by the MCAH Director or AFLP Director, certifies the report, and serves as a proxy for signature rendered on the coversheets.

### MCAH

- MCAH  
Annual  
Report  
Form
- Data  
Table
-

**Maternal, Child and Adolescent Health (MCAH) Program**  
**ANNUAL REPORT DIRECTIONS**

# Maternal, Child and Adolescent Health (MCAH) Program

## ANNUAL REPORT DIRECTIONS

### **Form 3B: BIH Annual Report**

(Note:  
The formatting,  
i.e., numbering,  
lettering, etc. in  
the BIH SOW  
matches the  
formatting in the  
BIH Annual  
Report Form 3B.)

The following points provide general information for filling out Form 3B:

- The first column contains the objectives and requirements from the BIH SOW
- The second column identifies what information, data, etc., is required. These are the deliverables
- The intent is for concise reporting, not long narratives; therefore the third column is for recording the information, answering the questions, and providing the data requested in column two.
- The table format allows for rolling over to the next page if there is insufficient room for responding to the questions

### **Objective 1.0**

In Objective 1.0, the BIH program will employ various outreach activities to recruit clients into the program.

#### 1.1.1

Submit objectives and activities of the recruitment plan.

#### 1.1.2

Describe barriers and challenges in implementing the recruitment plan.

#### 1.2.1-1.2.3

Document the number of women outreached using the various methods of outreach.

#### 1.2.4

Submit 3 examples of outreach activities using Form 3C.

### **Objective 2.0**

Based on the existing model of BIH program, conduct perinatal outreach and tracking of BIH clients.

#### 2.1.1

Describe the standardized intake process used by the BIH program.

#### 2.1.2

Identify the zip codes or census tracks where the BIH program outreaches to clients.

#### 2.2.1

Identify the number of women screened for eligibility using the screening tool.

#### 2.3.1

Enter the number of women enrolled in the BIH program for this FY

# Maternal, Child and Adolescent Health (MCAH) Program

## ANNUAL REPORT DIRECTIONS

**Form 3B:**  
**BIH**  
**Annual Report**  
*(Continued)*

### 2.3.3

In bullet format, identify barriers pertaining to access to health and medical care for BIH clients.

### 2.4.1

Using bullet format, identify opportunities for health education and distribution of materials related to prevention of poor health outcomes. Complete Form 3E Annotation of Product Development for any materials developed by the BIH program this fiscal year.

### **Objective 3.0**

Complete this objective if you conduct the BIH Social Support & Empowerment (SSE) model.

### 3.1.1

Document the number of clients who completed the SSE group.

### 3.1.2

Describe accomplishments and barriers for client retention and achievements.

### **Objective 4.0**

Complete this objective if you conduct the BIH nurse case management model.

### 4.1.1

Provide the number of women who have received case management services.

### 4.2.1

Provide the number of women who followed through with their care plan. List examples of client goals achieved.

### 4.4.1

Using bullet format, identify opportunities for health education and distribution of materials related to prevention of poor health outcomes. Complete Form 3E Annotation of Product Development for any materials developed by the BIH program this fiscal year.

# Maternal, Child and Adolescent Health (MCAH) Program

## ANNUAL REPORT DIRECTIONS

**Form 3B:**  
**BIH**  
**Annual Report**  
*(Continued)*

### **Objective 5.0**

In Objective 5.0, the BIH program will submit data using the BIH MIS as directed by MCAH.

#### **5.1.1**

Submit to MCAH Division or designee via the BIH MIS as required.

### **Objective 6.0**

In Objective 6.0, the BIH program will develop and maintain community partnerships that support the goals of BIH.

#### **6.1.1**

Identify Memorandum of Understanding (MOUs) and interagency agreements and the purpose of the relationship.

#### **6.2.1**

Complete the BIH Formal Collaborative Form 3D for each collaborative BIH staff participates in.

### **Objective 7.0**

The BIH program will implement a continuous quality improvement (CQI) plan.

#### **7.1.1**

Provide an outline of the CQI plan.

#### **7.2.1**

Provide a list of data requests from MCAH.

#### **7.3.1**

Identify the name of the staff who attended and date of the statewide annual BIH meeting.

### **Objective 8.0**

Objective 8.0 concerns the development and continuation of the community council.

#### **8.2.1**

Submit a list of the community council using BIH Form 3F

# Maternal, Child and Adolescent Health (MCAH) Program

## ANNUAL REPORT DIRECTIONS

### Form 2A: AFLP Annual Report

Using bullet format as much as possible answer each question with sufficient detail to inform the Program Consultant while being succinct.

### Form 6: AFLP/CalLearn Personnel Lost

Complete according to instructions on the Form.

### Form 3G: FIMR Annual Report

(Note:  
The formatting,  
i.e., numbering,  
lettering, etc. in  
this part of the  
directions  
matches the  
formatting in the  
FIMR Annual  
Report Form 3G  
and FIMR SOW )

The following points provide general information for filling out Form 3G:

- The first column contains the objectives based on the FIMR SOW.
- The second column identifies required information and data.
- The third column is for recording the information and providing the data requested; the intent is for concise reporting, not long narratives.
- If other specific forms are required, they will be listed and available online.

#### **Objective 1.0**

- a) Complete the table.
- b) The Local Health Officer letter that provides approval for FIMR review should have been submitted with the AFA; when the Health Officer changes, another letter is required. Enter the date of the approval letter and the name of the Local Health Officer.
- c) A master copy of local FIMR Policies and Procedures (P&P) should have been submitted with the AFA in the first year of the budget cycle; changes only should have been submitted with the AFA during the alternate years of the budget cycle. Enter the dates these P&Ps were submitted.
- d) Write a concise description of efforts to improve maternal interview rate.
- e) Enter the dates of trainings/meetings/teleconferences attended.
- f) Answer the question on CRT/CAT member mix and attendance.
- g) Submit FIMR Issues Checklist, FIMR Tracking Log, and Form 8 (CRT/CAT Committee Membership).

#### **Objective 2.0**

- a) Indicate the number of CRT recommendations (as described in the FIMR Tracking Log).
- b) Describe three CRT recommendations.
- c) Indicate the number of interventions implemented.  
Describe interventions, including objectives, key activities, timelines,

# Maternal, Child and Adolescent Health (MCAH) Program

## ANNUAL REPORT DIRECTIONS

### Form 3G FIMR Annual Report (Continued)

evaluation components (process and/or outcome measures), and barriers to implementation. Categorize the interventions by identifying whether these involved policy, systems, and/or community norms change.

Examples of policy, systems, and community norms change:  
Policy change - Focuses on groups/populations; includes legislation, regulation, financing/budget initiatives, and/or government guidelines. Examples include development of a plan to address health needs of pregnant women and infants and setting policy for the perinatal healthcare system.

Systems change - Focuses on systems of care and its elements. For example, a review of SIDS deaths revealed that African American families did not perceive that Back-to-Sleep messages were directed toward them. As a result, a community program was created to foster peer education on Back-to-Sleep within the African American population, thus enhancing cultural competence within systems of care.

Community norms change - Focuses on a standard, model, or pattern regarded as typical within a community. For example, breastfeeding in public became acceptable in the community.

e) Describe PPOR analysis if done.

### **Objective 3.0**

- a) Describe additional key activities and accomplishments not otherwise covered above.
- b) Submit local summary reports and other forms of information distributed to the community.
- c) Submit Form 7 (Annotation of Products Developed).
- d) Provide web links for any products and/or reports.

### Form 4 and BIH Form 3D: MCAH Related Collaboratives

The following points provide general information for filling out Forms 4 and BIH 3D:

- This form is completed by the MCAH Director, PSC, BIH Coordinator or other local MCAH Staff who participate in the MCAH Related Collaboratives that are essential in accomplishing the goals and objectives of MCAH Programs
- Complete a separate form for each identified collaborative that includes: name of the group, type of membership, purpose of the collaborative, frequency of meetings, and description of activities the collaborative performed or accomplished for the fiscal year
- This form serves as secondary documentation for FFP requirements

# Maternal, Child and Adolescent Health (MCAH) Program

## ANNUAL REPORT DIRECTIONS

### **Form 5 and BIH Form 3C: Outreach Activities**

The following points provide general information for filling out Forms 5 and BIH 3C:

- This is a form to report outreach activities. Identify the outreach activity, the topic, the purpose, the target audience, the number of people attending, the location and the methods used
- Complete one form for each activity at the time of the activity. Keep them on file for audit purposes
- Submit three examples for the Annual Report
- Keep the reporting information concise

### **Form 6: Toll Free Telephone Report**

The following points provide general information for filling out Form 6:

- Check the box (es) that describe the type of publicity and/or marketing strategies implemented to disseminate information regarding the local toll-free telephone line
- Enter the hours of operation and number of calls received
- If calls to the toll-free line were low or reduced as compared to the last reporting period, briefly state principal causes and what interventions will be implemented to assure an increase
- If the toll-free call volume increased significantly (greater than 10 percent from the past two years), briefly state the possible reasons or new methods that increased the number of calls
- Keep the answers concise

### **Form 7 and BIH Form 3E: Annotation of Products Developed**

The following points provide general information for filling out Form 7 and BIH 3E:

- Complete this form for each product developed and approved during the reporting period for all MCAH programs (MCAH, AFLP, BIH, FIMR, SIDS, etc.)
  - Keep the form on file to submit with the Annual Report and for audit purposes
- The report should include the product's title, objective, a description or ad copy of the product, format, intended target population, language(s), date produced, contact name and phone number
- If this product is available on the LHJ Web site, include the link

# Maternal, Child and Adolescent Health (MCAH) Program

## ANNUAL REPORT DIRECTIONS

### **Form 8 and BIH Form 3F: Committee Membership**

Forms 8 and BIH 3F must be completed for:

1. BIH Program Community Advisory Committee
2. FIMR Case Review Team
3. FIMR Community Action Team

Fill out a separate section for each committee/team member and include:

1. Name of the member
2. Time served
3. Occupation/title of the member
4. Race/ethnicity of the member
5. Brief summary of the member's experience and skills as it relates to the committee

### **FIMR Issues Checklist**

The following points provide general information for filling out the FIMR Issues Checklist:

- Since this information is de-identified, it is not confidential
- Complete this checklist for each case reviewed
- The checklist enables data abstraction of various factors to facilitate future programmatic decisions

### **FIMR Case Tracking Log**

The following points provide general information for filling out the FIMR Case Tracking Log:

- Since this information is de-identified, it is not confidential
- The tracking log should be used for all FIMR cases reviewed for the FY. It tracks from initial case review through development of recommendations.