

# GOAL AND INDICATOR RECOMMENDATIONS

## HEALTH

### WORKSHEET

ARIZONA EARLY CHILDHOOD TASK FORCE WORK WITH THE FIRST THINGS FIRST BOARD APPROVAL			RECOMMENDATIONS FROM THE HEALTH POLICY ADVISORY COMMITTEE					
OUTCOMES	CONDITIONS	FTF ROLES	GOALS Edit/Revise/Add/Delete	PROPOSED GOALS (First Draft)	PROPOSED FINAL GOALS	SAMPLE INDICATORS	INDICATORS	
<ul style="list-style-type: none"> <li>All children have access to high quality preventive and continuous health care, including physical, mental, oral, and nutritional health.</li> </ul>	<p>A. Arizona has enough high quality, affordable, comprehensive health care services to meet the needs of children and families in all communities throughout the state.</p>	<p>1. Supply of Health Care Services - Collaborate with partners to assess and expand the supply of high quality, affordable, comprehensive health care services.</p>	<p>a) More health care professionals are providing affordable, comprehensive services to young children and their families in remote and underserved areas of Arizona.</p>	<p>a. Sustain and expand the existing number and range of healthcare professionals who are serving young children and their families in remote and underserved areas of Arizona</p>	<p>a. Sustain and expand the existing number and range of healthcare professionals who are serving young children and their families in remote and underserved areas of Arizona</p>	% of children 0-5 who live in communities with a shortage of primary care medical, dental and mental health providers		
				<p>b. Increase the number of healthcare professionals accepting public insurance.</p>	<p>b. Sustain and expand the number of healthcare professionals accepting public health insurance</p>	# health care providers accepting public insurance		
	<p>B. Children and families have access to high quality, affordable health care coverage and services, including services that contribute to healthy births.</p>	<p>2. <b>Access to Quality Health Care Coverage and Services - Collaborate with partners to increase access to high quality health care services (including oral health and mental health) and affordable health care coverage for young children and their families.</b></p>	<p>a) More dentists across Arizona serve pediatric populations.</p>	<p>a. Moved to priority role #6</p>				
			<p>b) More children across Arizona have access to preventive oral health services.</p>	<p>b. Increase the number of children who receive preventative oral health services.</p>				
			<p>c) More families are aware of children's health insurance and how to enroll their children.</p>	<p>c. Increase the number of children who have comprehensive health insurance.</p>	<p>New 2.a. Increase the number of children who have health insurance</p>	% of children covered by insurance		
				<p>d. More children and families have access to and utilization of preventative health care services (dental, behavioral, medical).</p>	<p>New 2. b. Increase access to and utilization of preventative health care services for children and families.</p>	<p>Percent of toddlers (ages 13 to 36 months) who receive at least one EPSDT periodic screen in a year.</p> <p>Children under 6 receiving developmental and mental health screenings.</p> <p>#/% of children receiving timely well child visits</p> <p>Children ages 2-6 years receiving dental care in the last 12 months.</p> <p>Percent of Medicaid enrollees ages 1-18 who received at least one preventive dental service within the last year</p> <p>Young children (19-36 mos.) who complete the basic series of age appropriate immunizations</p>		
			<p>e. Increase the number of children receiving timely well child visits</p>					

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				f. Increase the number of women who receive prenatal care in their first trimester.	New 2. c. Increase the number of women who receive early and adequate prenatal care.	Percentage of Births to Mothers Who Received Late or No Prenatal Care  Low Birth Weight, Infants born weighing under 2,500 grams  % of mothers receiving prenatal care in 1 <sup>st</sup> trimester  % of mothers with adequate-as defined by index-prenatal care	
	C. Families, those who serve young children and their families, and communities promote and support good nutrition and active lifestyles for Arizona's children.	3. Nutrition and Physical Activity - Collaborate with partners to support improved nutrition and increased age/developmentally appropriate physical activity levels among young children.	a) More early care and education programs incorporate good nutrition and increased age/developmentally appropriate physical activity into their programs for young children and their families	a. More programs for children practice developmentally appropriate physical activity.	New 3. a. Create, sustain and expand programs that practice developmentally appropriate physical activity and incorporate good nutrition  NEED CLARITY ON WHAT WE MEAN BY PROGRAMS	#/% of community based nutrition/physical activity programs available in a community  The percent of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.  #, % of children aged 2-5 at a healthy weight (BMI)  % Children age 2-5 receiving WIC services with a BMI at or above the 85 <sup>th</sup> percentile  #/% of early care and education providers receiving health and mental health consultation	
			b) More families are aware of the importance of good nutrition and age/developmentally appropriate physical activity and incorporate it into their daily routines.	b. More early care and education programs incorporate good nutrition.			
				c. Increase access to healthy food and opportunities for physical activity through community-based partnerships.	New 3. b. Create, sustain and expand community based partnerships that increase access to healthy food and physical activity	The percent of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.  #, % of children aged 2-5 at a healthy weight (BMI)  The percent of mothers who breastfeed their infants at 6 months of age	

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						% Children age 2-5 receiving WIC services with a BMI at or above the 85 <sup>th</sup> percentile  % of children with appropriate intake of fruits and vegetables  #/% of early care and education providers receiving health and mental health consultation	
				d. More communities advocate for better nutrition and increased physical activity.	New 3. c. Encourage community leadership, public awareness, and community design that supports better nutrition, increased physical activity, and health conscious neighborhoods and public spaces	#/% of school districts with joint land use agreements  #/% of playgrounds/parks per 1,000 people  #/% people per square mile  #/% specialty food stores per 10,000 people	
				d. Community Design supports healthy eating and activity			
	D. Health care for young children is coordinated via a medical and dental home.	4. Medical and Dental Homes - Collaborate with partners to increase access to medical and dental homes for young children and their families.	a) Medical and dental homes are available to young children and their families across Arizona.	a. Increase the utilization of traditional and non-traditional medical and dental homes by young children and their families.	a. Increase the availability and use of medical and dental homes by all young children and their families.	# or % of children ages 0-5 with medical homes  Children with special health care needs age birth to 6 who receive coordinated, ongoing, comprehensive care within a medical home.  #/% of medical homes	
				b. Increase the number of children with special health care needs (age 0-5) who receive coordinated, ongoing comprehensive care within a medical and dental home.			

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	E. All children are provided access to early periodic screening and diagnosis to identify physical, mental, and developmental health issues and, if necessary, follow-up treatment/services are provided.	5. Early Screening and Intervention – Collaborate with partners to increase awareness of and access to a continuum of information, support, and services for families and their children who have or are at risk of having developmental, physical, and/or mental health issues.	<p>a) Resources for information, support, and early intervention services (including screening) that promote early childhood development, identify developmental variation/concerns, connect families with community resources, and/or provide appropriate intervention services are readily available to families throughout the state.</p> <p>b) More early intervention professionals have specialized training in working with young children and their families.</p>	<p>a. Resources for information, support, and early intervention services (including screening) that promote healthy pregnancy and early childhood development, identify developmental variation/concerns, connect families with community resources and/or provide appropriate intervention services are readily available to families throughout the state</p> <p>b. Arizona has a coordinated system to identify and serve children with physical, mental and/or developmental health needs.</p>	<p>New 5. a. Create, sustain and expand the development of coordinated statewide and community-based systems to identify and serve children with physical, mental and/or developmental health needs</p>	<p># of Children ages 3 – 5 identified with or at risk for special needs/disabilities</p> <p>Children birth to 3 years who are identified with and receive Part C Early Intervention Services</p> <p>Percent of toddlers (ages 13 to 36 months) who receive at least one EPSDT periodic screen in a year.</p> <p>Children under 6 receiving developmental and mental health screenings.</p> <p>#/% primary care providers routinely using standardized developmental and health screening tools</p> <p>% of children 0-5 who live in communities with a shortage of primary care medical, dental and mental health providers</p> <p>% of speech language pathologists/occupational therapists/physical therapists providing services to children ages 0-5</p>	

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				c. All children have early and timely access to EPSDT services (comprehensive health assessment in a medical and dental home)	New 5. b. Ensure all children receive periodic developmental and health screening and if necessary are referred for additional evaluation	Children under 6 receiving developmental and mental health screenings.  Children birth to 3 years who are identified with and receive Part C Early Intervention Services  Children with newly diagnosed developmental delays at kindergarten entrance	
<ul style="list-style-type: none"> <li>All early childhood education and health professionals are well prepared, highly skilled, and compensated commensurate with their education and experience.</li> </ul>	<p>A. Arizona has sufficient numbers of health services providers of all types who have had specialized training in working with young children and their families.</p>	<p>1. Specialized Training for Health Services Providers - Collaborate with partners to provide funding and implement strategies for increasing the number of health services providers who have had specialized training in working with young children and their families.</p>	a) More health services providers of all types have had specialized training in working with young children and their families across Arizona.	a. More health service professionals, including early intervention professionals, have had specialized training in working with young children and their families across Arizona.	a. Increase the number of health service professionals including early intervention professionals, who have had specialized training in working with young children and their families across Arizona	<p>#/% of early care and education providers receiving health and mental health consultation</p> <p># of professionals completing the Early Intervention Standards of Practice Modules</p> <p>#/% physicians who received specialized training in working with children 0-5</p>	
				b. More general dentists serve pediatric populations.	b. Increase the number of general dentists who serving pediatric populations		