Title V Block Grant Application
Forms (2-21)
State: DE
Application Year: 2013

- Form 2 - MCH Budget Details
- Form 3 - State MCH Funding Profile
- Form 4 - Budget Details By Types of Individuals Served and Sources of Federal Funds
- Form 5 - State Title V Program Budget and Expenditures by Types of Services
- Form 6 - Number and Percentage of Newborn and Others Screened, Case Confirmed, and Treated
- Form 7 - Number of Individuals Served (Unduplicated) Under Title V
- Form 8 - Deliveries and Infants Served by Title V and Entitled to Benefits under Title XIX
- Form 9 - State MCH Toll-Free Telephone Line Data
- Form 10 - Title V Maternal and Child Health Services Block Grant State Profile for FY 2013
- Form 11 - National and State Performance Measures
- Form 12 - National and State Outcome Measures
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- Form 18
  - Medicaid and Non-Medicaid comparison
  - Medicaid Eligibility Level (HSCI 06)
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- Form 20 - Health Status Indicators 01-05 - Multi-year Data
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  - Population Demographics Data (HSI 06)
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  - Geographic Living Area Demographic Data (HSI 10)
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FORM 2

MCH BUDGET DETAILS FOR FY 2013

[Secs. 504 (d) and 505(a)(3)(4)]

STATE: DE

1. FEDERAL ALLOCATION
(Item 15a of the Application Face Sheet [SF 424]) $ 1,966,509
Of the Federal Allocation (1 above), the amount earmarked for:

A.Preventive and primary care for children:

$ 786,603 (40 %)

B.Children with special health care needs:

$ 786,603 (40 %)
(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]

C.Title V admininstrative costs:

$ 95,709 (4.87 %)
(The above figure cannot be more than 10%)[Sec. 504(d)]

2. UNOBLIGATED BALANCE (Item 15b of SF 424) $ 400,000

3. STATE MCH FUNDS (Item 15c of the SF 424) $ 9,281,008

4. LOCAL MCH FUNDS (Item 15d of SF 424) $ 0

5. OTHER FUNDS (Item 15e of SF 424) $ 0

6. PROGRAM INCOME (Item 15f of SF 424) $ 1,440,000

7. TOTAL STATE MATCH (Lines 3 through 6) $ 10,721,008
(Below is your State's FY 1989 Maintainence of Effort Amount)
$ 5,679,728

8. FEDERAL-STATE TITLE V BLOCK GRANT PARTNERSHIP (SUBTOTAL) $ 13,087,517
(Total lines 1 through 6. Same as line 15g of SF 424)

9. OTHER FEDERAL FUNDS
(Funds under the control of the person responsible for the administration of the Title V program)

a. SPRANS:	$ 0
b. SSDI:	$ 71,636
c. CISS:	$ 0
d. Abstinence Education:	$ 0
e. Healthy Start:	$ 0
f. EMSC:	$ 0
g. WIC:	$ 0
h. AIDS:	$ 0
i. CDC:	$ 0
j. Education:	$ 0
k. Home Visiting:	$ 4,664,355
l. Other:	
1st Time Motherhood	$ 320,630
D70	$ 300,000
ECCS	$ 346,187
EDHI	$ 122,047
Hearing	$ 250,000
PRAMS	$ 120,542
Title X	$ 1,146,543
VIPP	$ 250,000

10. OTHER FEDERAL FUNDS (SUBTOTAL of all Funds under item 9) $ 7,591,940

11. STATE MCH BUDGET TOTAL $ 20,679,457
(Partnership subtotal + Other Federal MCH Funds subtotal)

Form Notes for Form 2

None

Field Level Notes

1. **Section Number:** Form2_Main
   Field Name: UnobligatedBalance
   Row Name: Unobligated Balance
   Column Name:
   Year: 2013
   Field Note:
   An estimated $400,000 will remain expended from FY 2012 MCH Title V Block Grant funds on September 30, 2012.

FORM 3

STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506((a)(I-3)]

STATE: DE

	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation *(Line1, Form2)*	$ 1,981,651	$ 1,843,162	$ 1,962,811	$ 1,962,811	$ 1,966,687	$ 1,966,687
2. Unobligated Balance *(Line2, Form2)*	$ 400,178	$ 400,178	$ 485,507	$ 485,507	$ 568,010	$ 568,010
3. State Funds *(Line3, Form2)*	$ 9,414,588	$ 9,414,588	$ 9,988,654	$ 9,988,654	$ 9,922,543	$ 9,922,543
4. Local MCH Funds *(Line4, Form2)*	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
5. Other Funds *(Line5, Form2)*	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
6. Program Income *(Line6, Form2)*	$ 0	$ 0	$ 1,200,000	$ 1,200,000	$ 784,800	$ 784,800
7. Subtotal	$ 11,796,417	$ 11,657,928	$ 13,636,972	$ 13,636,972	$ 13,242,040	$ 13,242,040
	(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)					
8. Other Federal Funds *(Line10, Form2)*	$ 1,916,247	$ 1,916,247	$ 1,644,687	$ 1,644,687	$ 1,510,076	$ 1,510,076
9. Total *(Line11, Form2)*	$ 13,712,664	$ 13,574,175	$ 15,281,659	$ 15,281,659	$ 14,752,116	$ 14,752,116
	(STATE MCH BUDGET TOTAL)					

FORM 3

STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506((a)(I-3)]

STATE: DE

	FY 2011		FY 2012		FY 2013	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation *(Line1, Form2)*	$ 1,966,509	$ 1,966,509	$ 1,966,509	$	$ 1,966,509	$
2. Unobligated Balance *(Line2, Form2)*	$ 400,000	$ 400,000	$ 400,000	$	$ 400,000	$
3. State Funds *(Line3, Form2)*	$ 9,589,395	$ 9,589,395	$ 8,625,223	$	$ 9,281,008	$
4. Local MCH Funds *(Line4, Form2)*	$ 0	$ 0	$ 0	$	$ 0	$
5. Other Funds *(Line5, Form2)*	$ 0	$ 0	$ 0	$	$ 0	$
6. Program Income *(Line6, Form2)*	$ 784,800	$ 784,800	$ 1,024,800	$	$ 1,440,000	$
7. Subtotal	$ 12,740,704	$ 12,740,704	$ 12,016,532	$ 0	$ 13,087,517	$ 0
	(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)					
8. Other Federal Funds *(Line10, Form2)*	$ 1,539,610	$ 1,539,610	$ 2,456,300	$	$ 7,591,940	$
9. Total *(Line11, Form2)*	$ 14,280,314	$ 14,280,314	$ 14,472,832	$ 0	$ 20,679,457	$ 0
	(STATE MCH BUDGET TOTAL)					

Form Notes for Form 3

None

Field Level Notes

None

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: DE

	FY 2008		FY 2009		FY 2010	
I. Federal-State MCH Block Grant Partnership	**BUDGETED**	**EXPENDED**	**BUDGETED**	**EXPENDED**	**BUDGETED**	**EXPENDED**
a. Pregnant Women	$ 4,023,471	$ 3,887,308	$ 4,103,603	$ 3,588,691	$ 4,199,811	$ 4,199,811
b. Infants < 1 year old	$ 1,360,800	$ 1,494,637	$ 5,303,603	$ 3,582,789	$ 4,984,610	$ 4,984,610
c. Children 1 to 22 years old	$ 4,329,345	$ 4,193,182	$ 1,874,207	$ 2,420,240	$ 1,805,491	$ 1,805,491
d. Children with Special Healthcare Needs	$ 1,945,080	$ 1,945,080	$ 2,140,159	$ 1,655,528	$ 2,086,058	$ 2,086,058
e. Others	$ 0	$ 0	$ 0	$ 2,287,308	$ 0	$ 0
f. Administration	$ 137,721	$ 137,721	$ 215,400	$ 102,416	$ 166,070	$ 166,070
g. SUBTOTAL	$ 11,796,417	$ 11,657,928	$ 13,636,972	$ 13,636,972	$ 13,242,040	$ 13,242,040
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	$ 0		$ 0		$ 0	
b. SSDI	$ 94,644		$ 94,644		$ 94,466	
c. CISS	$ 0		$ 0		$ 0	
d. Abstinence Education	$ 0		$ 0		$ 0	
e. Healthy Start	$ 0		$ 0		$ 0	
f. EMSC	$ 0		$ 0		$ 0	
g. WIC	$ 0		$ 0		$ 0	
h. AIDS	$ 0		$ 0		$ 0	
i. CDC	$ 105,769		$ 0		$ 0	
j. Education	$ 0		$ 0		$ 0	
k. Home Visiting	$ 0		$ 0		$ 0	
l. Other						
ECCS	$ 0		$ 140,000		$ 105,000	
EHDI	$ 0		$ 0		$ 125,000	
PRAMS	$ 0		$ 80,000		$ 95,000	
Title X	$ 0		$ 1,090,610		$ 1,090,610	
Newborn Hearing	$ 0		$ 120,833		$ 0	
TBI	$ 0		$ 118,600		$ 0	
Title X Fam Plan	$ 1,715,834		$ 0		$ 0	
III. SUBTOTAL	$ 1,916,247		$ 1,644,687		$ 1,510,076	

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: DE

	FY 2011		FY 2012		FY 2013	
I. Federal-State MCH Block Grant Partnership	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
a. Pregnant Women	$ 3,353,814	$ 3,353,814	$ 3,061,344	$	$ 3,437,898	$
b. Infants < 1 year old	$ 3,348,298	$ 3,348,298	$ 3,058,237	$	$ 3,568,668	$
c. Children 1 to 22 years old	$ 2,261,837	$ 2,261,837	$ 2,207,929	$	$ 2,226,687	$
d. Children with Special Healthcare Needs	$ 1,543,437	$ 1,543,437	$ 1,506,651	$	$ 1,519,451	$
e. Others	$ 2,137,609	$ 2,137,609	$ 2,086,662	$	$ 2,239,104	$
f. Administration	$ 95,709	$ 95,709	$ 95,709	$	$ 95,709	$
g. SUBTOTAL	$ 12,740,704	$ 12,740,704	$ 12,016,532	$ 0	$ 13,087,517	$ 0
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	$ 0		$ 0		$ 0	
b. SSDI	$ 100,000		$ 97,260		$ 71,636	
c. CISS	$ 0		$ 0		$ 0	
d. Abstinence Education	$ 0		$ 0		$ 0	
e. Healthy Start	$ 0		$ 0		$ 0	
f. EMSC	$ 0		$ 0		$ 0	
g. WIC	$ 0		$ 0		$ 0	
h. AIDS	$ 0		$ 0		$ 0	
i. CDC	$ 0		$ 0		$ 0	
j. Education	$ 0		$ 0		$ 0	
k. Home Visiting	$ 0		$ 0		$ 4,664,355	
l. Other						
1st Time Motherhood	$ 0		$ 320,000		$ 320,630	
D70	$ 0		$ 0		$ 300,000	
ECCS	$ 132,000		$ 140,000		$ 346,187	
EDHI	$ 0		$ 0		$ 122,047	
Hearing	$ 0		$ 0		$ 250,000	
PRAMS	$ 85,000		$ 135,000		$ 120,542	
Title X	$ 0		$ 0		$ 1,146,543	
VIPP	$ 0		$ 0		$ 250,000	
Home Visiting	$ 0		$ 595,091		$ 0	
TITLE X	$ 0		$ 1,168,949		$ 0	
TItle X	$ 1,222,610		$ 0		$ 0	
III. SUBTOTAL	$ 1,539,610		$ 2,456,300		$ 7,591,940	

Form Notes for Form 4

None

Field Level Notes

None

FORM 5

STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: DE

TYPE OF SERVICE	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	$ 3,295,304	$ 3,156,815	$ 3,430,620	$ 4,342,818	$ 3,529,324	$ 3,529,324
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	$ 3,217,870	$ 3,217,870	$ 3,357,733	$ 6,329,719	$ 3,435,200	$ 3,435,200
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	$ 2,539,250	$ 2,539,250	$ 3,901,661	$ 1,258,173	$ 3,372,775	$ 3,372,775
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	$ 2,743,993	$ 2,743,993	$ 2,946,958	$ 1,706,262	$ 2,904,741	$ 2,904,741
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	$ 11,796,417	$ 11,657,928	$ 13,636,972	$ 13,636,972	$ 13,242,040	$ 13,242,040

FORM 5

STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: DE

TYPE OF SERVICE	FY 2011		FY 2012		FY 2013	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	$ 4,058,584	$ 4,058,584	$ 3,751,597	$	$ 4,188,276	$
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	$ 5,915,444	$ 5,915,444	$ 5,564,199	$	$ 6,080,246	$
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	$ 1,172,088	$ 1,172,088	$ 1,144,153	$	$ 1,194,253	$
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	$ 1,594,588	$ 1,594,588	$ 1,556,583	$	$ 1,624,742	$
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	$ 12,740,704	$ 12,740,704	$ 12,016,532	$ 0	$ 13,087,517	$ 0

Form Notes for Form 5

None

Field Level Notes

None

FORM 6

NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED

Sect. 506(a)(2)(B)(iii)

STATE: DE

Total Births by Occurrence: 11,627 | **Reporting Year: 2011**

Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment (3)	
	No.	%			No.	%
Phenylketonuria	11,668	100.4	4	2	2	100
Congenital Hypothyroidism	11,668	100.4	9	6	6	100
Galactosemia	11,668	100.4	2	0	0	
Sickle Cell Disease	11,668	100.4	12	9	9	100
Other Screening (Specify)						
Cystic Fibrosis	11,668	100.4	8	5	5	100
Screening Programs for Older Children & Women (Specify Tests by name)						

(1) Use occurrent births as denominator.
(2) Report only those from resident births.
(3) Use number of confirmed cases as denominator.

Form Notes for Form 6

None

Field Level Notes

1. **Section Number:** Form6_Main
   Field Name: BirthOccurence
   Row Name: Total Births By Occurence
   Column Name: Total Births By Occurence
   Year: 2013
   Field Note:
   The number of occurent births is from Newborn Screening Data. The official number of births, as reported by Delaware Health Statistics is not available for 2011 at this time.
2. **Section Number:** Form6_Main
   Field Name: Phenylketonuria_OneScreenNo
   Row Name: Phenylketonuria
   Column Name: Receiving at least one screen
   Year: 2013
   Field Note:
   The number of screens exceeds the number of occurent births due to out-of-state births receiving a screen in Delaware.
3. **Section Number:** Form6_Main
   Field Name: Congenital_OneScreenNo
   Row Name: Congenital
   Column Name: Receiving at least one screen
   Year: 2013
   Field Note:
   The number of screens exceeds the number of occurent births due to out-of-state births receiving a screen in Delaware.
4. **Section Number:** Form6_Main
   Field Name: Galactosemia_OneScreenNo
   Row Name: Galactosemia
   Column Name: Receiving at least one screen
   Year: 2013
   Field Note:
   The number of screens exceeds the number of occurent births due to out-of-state births receiving a screen in Delaware.
5. **Section Number:** Form6_Main
   Field Name: SickleCellDisease_OneScreenNo
   Row Name: SickleCellDisease
   Column Name: Receiving at least one screen
   Year: 2013
   Field Note:
   The number of screens exceeds the number of occurent births due to out-of-state births receiving a screen in Delaware.

FORM 7

NUMBER OF INDIVIDUALS SERVED (UNDUPLICATED) UNDER TITLE V
(BY CLASS OF INDIVIDUALS AND PERCENT OF HEALTH COVERAGE)

[Sec. 506(a)(2)(A)(i-ii)]

STATE: DE

Number of Individuals Served - Historical Data by Annual Report Year

Types of Individuals Served	2006	2007	2008	2009	2010
Pregnant Women	1,080	2,460	3,787	3,231	3,224
Infants < 1 year old	12,225	12,666	13,000	12,153	12,016
Children 1 to 22 years old	2,543	2,533	2,207	488	138
Children with Special Healthcare Needs	1,397	908	3,074	3,094	3,094
Others	0	4,768	14,839	9,118	2,356
Total	17,245	23,335	36,907	28,084	20,828

Reporting Year: 2011

	TITLE V	PRIMARY SOURCES OF COVERAGE				
Types of Individuals Served	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	4,138	84.0	0.0	0.0	0.0	16.0
Infants < 1 year old	11,905	48.6	0.0	45.4	0.0	6.0
Children 1 to 22 years old	1,091	80.0	0.0	0.0	0.0	20.0
Children with Special Healthcare Needs	3,366	25.0	0.0	62.0	0.0	13.0
Others	3,122	84.0	0.0	0.0	0.0	16.0
TOTAL	23,622					

Form Notes for Form 7

None

Field Level Notes

1. **Section Number:** Form7_Main
   Field Name: PregWomen_TS
   Row Name: Pregnant Women
   Column Name: Title V Total Served
   Year: 2013
   Field Note:
   Healthy Women, Healthy Babies FY 2011

2. **Section Number:** Form7_Main
   Field Name: Children_0_1_TS
   Row Name: Infants <1 year of age
   Column Name: Title V Total Served
   Year: 2013
   Field Note:
   The number of infants is estimated and base on 2009 Population Projections (2011.1). 2009 is used as the reporting year in this instance, because the number of births reported on Form 8 are from 2009 (the lastest year Vital Statistics data are available).

3. **Section Number:** Form7_Main
   Field Name: Children_0_1_Unknown
   Row Name: Infants <1 year of age
   Column Name: Unknown %
   Year: 2013
   Field Note:
   Unknown Includes "Other Government (2.7%)" "Self Pay (1.5%)," and "Unknown (1.8%)." Source: Delaware Vital Statistics Annual Report, 2009.

4. **Section Number:** Form7_Main
   Field Name: Children_1_22_TS
   Row Name: Children 1 to 22 years of age
   Column Name: Title V Total Served
   Year: 2013
   Field Note:
   Kids Kare / Smart Start, 2011

5. **Section Number:** Form7_Main
   Field Name: CSHCN_TS
   Row Name: Children with Special Health Care Needs
   Column Name: Title V Total Served
   Year: 2013
   Field Note:
   Child Development Watch, 2011

6. **Section Number:** Form7_Main
   Field Name: AllOthers_TS
   Row Name: Others
   Column Name: Title V Total Served
   Year: 2013
   Field Note:
   Healthy Women, Healthy Babies, FY 2012 - Preconception Women

FORM 8
DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE XIX
(BY RACE AND ETHNICITY)
[SEC. 506(A)(2)(C-D)]
STATE: DE

Reporting Year: 2009

I. UNDUPLICATED COUNT BY RACE

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
DELIVERIES								
Total Deliveries in State	11,369	7,573	3,178	25	498	4	0	91
Title V Served	11,369	7,573	3,178	25	498	4	0	91
Eligible for Title XIX	5,533	3,272	2,078	8	147	1	0	27
INFANTS								
Total Infants in State	11,905	8,124	3,090	0	0	0	0	691
Title V Served	11,905	8,124	3,090	0	0	0	0	691
Eligible for Title XIX	5,736	3,510	2,021	0	0	0	0	205

II. UNDUPLICATED COUNT BY ETHNICITY

				HISPANIC OR LATINO (Sub-categories by country or area of origin)				
	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
DELIVERIES								
Total Deliveries in State	9,710	1,659	0	795	13	349	387	115
Title V Served	9,710	1,659	0	795	13	349	387	115
Eligible for Title XIX	4,719	1,369	0	659	11	288	319	95
INFANTS								
Total Infants in State	10,828	1,077	0	0	0	0	0	0
Title V Served	10,828	1,077	0	0	0	0	0	0
Eligible for Title XIX	5,262	889	0	0	0	0	0	0

Form Notes for Form 8

None

Field Level Notes

1. **Section Number:** Form8_I. Unduplicated Count By Race
   Field Name: DeliveriesTitleXIX_White
   Row Name: Eligible for Title XIX
   Column Name: White
   Year: 2013
   Field Note:
   Estimate based on 43.2% of White Infants receiving Medicaid (2009 Delaware Vital Stats).

2. **Section Number:** Form8_I. Unduplicated Count By Race
   Field Name: DeliveriesTitleXIX_Black
   Row Name: Eligible for Title XIX
   Column Name: Black or African American
   Year: 2013
   Field Note:
   Estimate based on 65.4% of Black Infants receiving Medicaid (2009 Delaware Vital Stats).

3. **Section Number:** Form8_I. Unduplicated Count By Race
   Field Name: DeliveriesTitleXIX_Indian
   Row Name: Eligible for Title XIX
   Column Name: American Indian or Native American
   Year: 2013
   Field Note:
   Estimate based on 29.6% of "Other" Infants receiving Medicaid (2009 Delaware Vital Stats).

4. **Section Number:** Form8_I. Unduplicated Count By Race
   Field Name: DeliveriesTitleXIX_Asian
   Row Name: Eligible for Title XIX
   Column Name: Asian
   Year: 2013
   Field Note:
   Estimate based on 29.6% of "Other" Infants receiving Medicaid (2009 Delaware Vital Stats).

5. **Section Number:** Form8_I. Unduplicated Count By Race
   Field Name: DeliveriesTitleXIX_Hawaiian
   Row Name: Eligible for Title XIX
   Column Name: Native Hawaiian or Other Pacific Islander
   Year: 2013
   Field Note:
   Estimate based on 29.6% of "Other" Infants receiving Medicaid (2009 Delaware Vital Stats).

6. **Section Number:** Form8_I. Unduplicated Count By Race
   Field Name: DeliveriesTitleXIX_RaceOther
   Row Name: Eligible for Title XIX
   Column Name: Other and Unknown
   Year: 2013
   Field Note:
   Estimate based on 29.6% of "Other" Infants receiving Medicaid (2009 Delaware Vital Stats).

7. **Section Number:** Form8_I. Unduplicated Count By Race
   Field Name: InfantsTotal_All
   Row Name: Total Infants in State
   Column Name: Total All Races
   Year: 2013
   Field Note:
   Estimate from Delaware Population Consortium for 2009 (v 2011.1).

8. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
   Field Name: DeliveriesTitleXIX_TotalNotHispanic
   Row Name: Eligible for Title XIX
   Column Name: Total Not Hispanic or Latino
   Year: 2013
   Field Note:
   Estimate based on 48.6% of General Population received Medicaid as a source of payment for birth in 2009.

9. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
   Field Name: DeliveriesTitleXIX_TotalHispanic
   Row Name: Eligible for Title XIX
   Column Name: Total Hispanic or Latino
   Year: 2013
   Field Note:
   Estimate (82.% of Hispanics received Medicaid as a source of payment for birth in 2009).

10. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
    Field Name: InfantsTotal_TotalHispanic
    Row Name: Total Infants in State
    Column Name: Total Hispanic or Latino
    Year: 2013
    Field Note:
    This is an estimate based on population projections from the Delaware Population Consortium for 2009 (v 2011.1). The projections do not provide estimates for Hispanic or Latino ethinicities (B.1 - B.5).

11. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
    Field Name: InfantsTitleV_TotalHispanic
    Row Name: Title V Served
    Column Name: Total Hispanic or Latino
    Year: 2013
    Field Note:

This is an estimate based on population projections from the Delaware Population Consortium for 2009 (v 2011.1). The projections do not provide estimates for Hispanic or Latino ethinicities (B.1 - B.5).

12. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX_TotalNotHispanic
Row Name: Eligible for Title XIX
Column Name: Total Not Hispanic or Latino
Year: 2013
Field Note:
Estimate based on 48.6% of General Population received Medicaid as a source of payment for birth in 2009.

13. **Section Number:** Form8_II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX_TotalHispanic
Row Name: Eligible for Title XIX
Column Name: Total Hispanic or Latino
Year: 2013
Field Note:
Estimate based on 48.6% of General Population received Medicaid as a source of payment for birth in 2009.

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL)
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: DE

	FY 2013	FY 2012	FY 2011	FY 2010	FY 2009
1. State MCH Toll-Free "Hotline" Telephone Number					
2. State MCH Toll-Free "Hotline" Name					
3. Name of Contact Person for State MCH "Hotline"					
4. Contact Person's Telephone Number					
5. Contact Person's Email					
6. Number of calls received on the State MCH "Hotline" this reporting period	0	0	0	0	0

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: DE

	FY 2013	FY 2012	FY 2011	FY 2010	FY 2009
1. State MCH Toll-Free "Hotline" Telephone Number	1-800-464-4357	1-800-464-4357	1-800-464-4357	(800) 464-Help	(800) 464-Help
2. State MCH Toll-Free "Hotline" Name	Helpline and 211 Help Me Grow	Helpline	Helpline	Helpline	Helpline
3. Name of Contact Person for State MCH "Hotline"	Wanda Lopez	Monique Chadbond	Monique Chadbond	Anna Maloney	Ann Lewandowski
4. Contact Person's Telephone Number	302-255-1810	302-255-1810	302-255-1810	302-255-1827	302-255-1829
5. Contact Person's Email	wanda.m.lopez@state.de.us	Monique.Chadbond@state.de.us	Monique.Chadbond@state.de.us	Anna.Maloney@state.de.us	
6. Number of calls received on the State MCH "Hotline" this reporting period	0	0	122846	1622	1029

Form Notes for Form 9

None

Field Level Notes

1. **Section Number:** Form9_Main
   Field Name: calls_2
   Row Name: Number of calls received On the State MCH Hotline This reporting period
   Column Name: FY
   Year: 2011
   Field Note:
   In 2011 There were 122,846 calls to the Delaware Helpline and 65,534 visits to the Delaware Helpline website. 25.4% of these calls (n=31,202) were for finanical assistance issues ranging from child support to health care costs to utilities. 9.8% of these calls (n-12,063) were classified as class regarding health and medical care. The remaining calls covered a wide range of social service needs including educaton, tax assistance, mental health / addiction counseling, housing, and transportation.

   In 2012 Delaware is implementing a 211 number for Help Me Grow.

FORM 10
TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT
STATE PROFILE FOR FY 2013
[SEC. 506(A)(1)]
STATE: DE

1. State MCH Administration:
(max 2500 characters)

The Delaware Department of Health and Social Services, Division of Public Health is the state agency responsible for administration of the Title V Maternal & Child Health (MCH) Block Grant Program. The Delaware MCH efforts include the public health clinic-based programs (Home Visiting, Child Development Watch, and Oral Health) and initiatives under the Infant Mortality Elimination Program (Healthy Women, Healthy Babies; Fetal Infant Mortality Review; and the Pregnancy Risk Assessment and Monitoring Surveillance (PRAMS) Survey. Core programs within the Delaware MCH Bureau include newborn Metabolic Screening, Newborn Hearing Screening, the Early Childhood Comprehensive Systems initiative, the State Systems Development Initiative and the Birth Defects / Autism Registries.

Block Grant Funds	
2. Federal Allocation (Line 1, Form 2)	$ 1,966,509
3. Unobligated balance (Line 2, Form 2)	$ 400,000
4. State Funds (Line 3, Form 2)	$ 9,281,008
5. Local MCH Funds (Line 4, Form 2)	$ 0
6. Other Funds (Line 5, Form 2)	$ 0
7. Program Income (Line 6, Form 2)	$ 1,440,000
8. Total Federal-State Partnership (Line 8, Form 2)	$ 13,087,517

9. Most significant providers receiving MCH funds:

Public Health Clinics / Home Visiting
Child Development Watch (CSHCN)
Healthy Women, Healthy Babies
Family Support Initiative (CSHCN)

10. Individuals served by the Title V Program (Col. A, Form 7)

a. Pregnant Women	4,138
b. Infants < 1 year old	11,905
c. Children 1 to 22 years old	1,091
d. CSHCN	3,366
e. Others	3,122

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:
(max 2500 characters)

Smart Start/Home Visiting is enhanced home visiting program that offers services from registered nurses, social workers and nutritionists. Child Development Watch is a case management program for Children with Special Health Care Needs. Child Development Watch offers screening, diagnosis and referral services for children 0-3 years of age. Healthy Women, Healthy Babies is a preconception, interconception and prenatal care program for reproductive age women with one or more risk factors.

b. Population-Based Services:
(max 2500 characters)

Newborn Metabolic Screening and Newborn Hearing Screening services are available for every infant born in Delaware. The Healthy Mothers and Infants Consortium's Public Awareness campaign provides messages to the general public about preconception health and its importance in achieving optimal birth outcomes. The Delaware Immunizations program provides immunizations to children and adults and the Family Planning program provides vaccine for the prevention of cervical cancer in women. The Division of Public Health also provides seasonal flu vaccinations as well a pandemic flu response. Other population-based services include lead prevention, assorted media campaigns, a healthy homes initiative, tobacco prevention and injury prevention.

c. Infrastructure Building Services:
(max 2500 characters)

Delaware's MCH Program supports an assortment of infrastructure building services. The Early Childhood Comprehensive Services Initiative seeks to ensure that all children are ready for success in school. The State Systems Development Initiative supports program planning and development through the linkage of data sets for needs assessment, monitoring and evaluation purposes. Emergency Medical Services for Children seeks to ensure that pediatric issues are addressed in Delaware's EMS system and operates the Special Needs Alert Program for Children with Special Health Care Needs. Delaware's MCH programs also are active in supporting family organizations, particularly those dedicated to Children with Special Health Care Needs, in capacity building. The Delaware PRAMS survey is instrumental in identifying emerging risks for pregnant women. The MCH program also supports breastfeeding and child nutrition initiatives as part of its infrastructure building efforts.

12. The primary Title V Program contact person:

Name	Alisa M. Jones, MPH
Title	MCH Director
Address	417 Federal Street
City	Dover
State	Delaware
Zip	19901
Phone	302-744-4901
Fax	302-739-3313
Email	Alisa.Jones@state.de.us
Web	http://www.dhss.delaware.gov/dhss/dph/chca/fhsmhome.html

13. The children with special health care needs (CSHCN) contact person:

Name	Bhavana Viswanathan
Title	Director, Children with Special Health Care Needs
Address	417 Federal Street
City	Dover
State	Delaware
Zip	19901
Phone	302-744-4901
Fax	302-739-3313
Email	Bhavana.Viswanathan@state.de.us
Web	http://www.dhss.delaware.gov/dhss/dph/chca/fhsmhome.html

14. State Family or Youth Leader Contact person:

Name	Paulina Gyan
Title	ECCS Director
Address	417 Federal Street
City	Dover
State	Delaware
Zip	19901
Phone	302-744-4901
Fax	302-739-3313
Email	Paulina.Gyan@state.de.us
Web	http://www.dhss.delaware.gov/dhss/dph/chca/fhsmhome.html

Form Notes for Form 10

None

Field Level Notes

None

FORM 11
TRACKING PERFORMANCE MEASURES
[SECS 485 (2)(2)(B)(III) AND 486 (A)(2)(A)(III)]
STATE: DE

Form Level Notes for Form 11

None

PERFORMANCE MEASURE # 01

The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their State-sponsored newborn screening programs.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	100	100	100	100	100
Annual Indicator	100.0	100.0	100.0	100.0	100.0
Numerator	35	33	48	60	61
Denominator	35	33	48	60	61
Data Source		Newborn Screening Data	Newborn Screening Data	Newborn Screening	Newborn Screening Program
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #1
   Field Name: PM01
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 Newborn Screening Data

PERFORMANCE MEASURE # 02

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	65	65	65	65	65
Annual Indicator	61.1	61.1	61.1	61.1	72
Numerator					
Denominator					
Data Source		National Survey of CSHCN, 2005-2006	National Survey of CSHCN, 2005-2006	National Survey of CSHCN, 2005-2006	National Survey of CSHCN, 2009-2010
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	72.7	73.4	74.2	74.9	75.6
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #2
   Field Name: PM02
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   For 2011-2014, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. This survey was first conducted in 2001. The same questions were used to generate this indicator for both the 2001 and the 2005-06 CSHCN survey. However, in 2009-2010 there were wording changes and additions to the questions used to generate this indicator. The data for 2009-2010 are NOT comparable to earlier versions of the survey.

   All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

   Method of Target Setting: 10% improvement over next 10 years.

2. **Section Number:** Form11_Performance Measure #2
   Field Name: PM02
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey.

3. **Section Number:** Form11_Performance Measure #2
   Field Name: PM02
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey.

PERFORMANCE MEASURE # 03

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	60	50	50	50	50
Annual Indicator	48.1	48.1	48.1	48.1	41.4
Numerator					
Denominator					
Data Source		National Survey of CSHCN, 2005-2006	National Survey of CSHCN, 2005-2006	National Survey of CSHCN, 2005-2006	National Survey of CSHCN, 2009-2010
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	41.8	42.2	42.6	43.1	43.5
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #3
   Field Name: PM03
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   For 2011-2014, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate this indicator for the 2005-06 CSHCN survey. The data for the 2001 and 2005-2006 surveys are not comparable for NPM 3. However, the same questions were used to generate the NPM 3 indicator for both the 2005-2006 and 2009-2010, therefore these two surveys are comparable.

   All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

   Method of Target Setting: 10% improvement over next 10 years.

2. **Section Number:** Form11_Performance Measure #3
   Field Name: PM03
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions and additions to the questions used to generate the NPM03 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #03.

3. **Section Number:** Form11_Performance Measure #3
   Field Name: PM03
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions and additions to the questions used to generate the NPM03 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #03.

PERFORMANCE MEASURE # 04

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	70	65	65	65	65
Annual Indicator	63.2	63.2	63.2	63.2	69.9
Numerator					
Denominator					
Data Source		National Survey of CSHCN, 2005-2006	National Survey of CSHCN, 2005-2006	National Survey of CSHCN, 2005-2006	National Survey of CSHCN, 2009-2010
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	70.6	71.3	72	72.7	73.4
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #4
   Field Name: PM04
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   For 2011-2014, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. This survey was first conducted in 2001. The same questions were used to generate the NPM 4 indicator for the 2001, 2005-06, and 2009-2010 CSHCN surveys.

   All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

   Method of Target Setting: 10% improvement over next 10 years.

2. **Section Number:** Form11_Performance Measure #4
   Field Name: PM04
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM04 indicator for both the 2001 and the 2005-2006 CSHCN survey.

3. **Section Number:** Form11_Performance Measure #4
   Field Name: PM04
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM04 indicator for both the 2001 and the 2005-2006 CSHCN survey.

PERFORMANCE MEASURE # 05

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	80	90	90	90	92
Annual Indicator	88.1	88.1	88.1	88.1	69
Numerator					
Denominator					
Data Source		National Survey of CSHCN, 2005-2006	National Survey of CSHCN, 2005-2006	National Survey of CSHCN, 2005-2006	National Survey of CSHCN, 2009-2010
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	69.7	70.4	71.1	71.8	72.5
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #5
   Field Name: PM05
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   For 2011-2014, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. Compared to the 2001 CSHCN survey, there were revisions to the wording, order, and number of questions used to generate this indicator for the 2005-06 CSHCN survey. The questions were also revised extensively for the 2009-2010 CSHCN survey. Therefore, none of the three rounds of the surveys are comparable.

   All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

   Method of Target Setting: 10% improvement over next 10 years.

2. **Section Number:** Form11_Performance Measure #5
   Field Name: PM05
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate the NPM05 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #05.

3. **Section Number:** Form11_Performance Measure #5
   Field Name: PM05
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate the NPM05 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #05.

PERFORMANCE MEASURE # 06

The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	25	45	45	45	45
Annual Indicator	42.4	42.4	42.4	42.4	38.4
Numerator					
Denominator					
Data Source		National Survey of CSHCN, 2005-2006	National Survey of CSHCN, 2005-2006	National Survey of CSHCN, 2005-2006	National Survey of CSHCN, 2009-2010
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	38.8	39.2	39.6	39.9	40.3
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #6
   Field Name: PM06
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   For 2011-2014, indicator data come from the National Survey of Children with Special Health Care Needs (CSHCN), conducted by the U.S. Health Resources and Services Administration and the U.S. Centers for Disease Control and Prevention in 2009-2010. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate this indicator for the 2005-06 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the 2 surveys are not comparable for NPM 6, and findings from the 2005-06 survey may be considered baseline data. However, the same questions were used to generate the NPM 6 indicator for the 2009-2010 survey. Therefore, the 2005-2006 and 2009-2010 surveys can be compared.

   All estimates from the National Survey of CSHCN are subject to sampling variability, as well as survey design flaws, respondent classification and reporting errors, and data processing mistakes.

   Method of Target Setting: 10% improvement over next 10 years.

2. **Section Number:** Form11_Performance Measure #6
   Field Name: PM06
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate the NPM06 indicator for the 2005-2006 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the two surveys are not comparable for PM #06 and the 2005-2006 may be considered baseline data.

3. **Section Number:** Form11_Performance Measure #6
   Field Name: PM06
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate the NPM06 indicator for the 2005-2006 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the two surveys are not comparable for PM #06 and the 2005-2006 may be considered baseline data.

PERFORMANCE MEASURE # 07

Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	90	80	82	74	70
Annual Indicator	78.9	80.3	71.8	65.3	72.2
Numerator					
Denominator					
Data Source		National Immunization Survey	National Immunization Survey	National Immunization Survey	National Immunization Survey
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. *(Explain data in a year note. See Guidance, Appendix IX.)*					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	72.9	73.6	74.4	75.1	75.8
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #7
   Field Name: PM07
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   Estimated Vaccination Coverage with 4:3:1:3:3:1 Amoung Children 19-35 Months of Age by Race/Ethnicity, U.S. National Immunization survey, July 2010 - June 2011. Confidence Intervals +/- 6.4%.

   Method of Target Setting: 10% improvement over next 10 years.

2. **Section Number:** Form11_Performance Measure #7
   Field Name: PM07
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2009 National Immunization Data, Q1-Q4 (4:3:1:3:3:1). Confidence Interval +/- 7.1 %. There is not statistically signficant difference between rates reported for 2009 and 2010.

3. **Section Number:** Form11_Performance Measure #7
   Field Name: PM07
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   National Immunization Survey, Selected Vaccination Series by 19-35 Months of Age, Delaware 4:3:1:3:3:1. Estimated Vaccination Coverage, 2008. Confidence interval for the estimate is +/- 6.8. Note that the CIs for the 2007-2008 Surveys overlap. There is not statistically significant difference for the 2008-2009 estimates.

PERFORMANCE MEASURE # 08

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	26	20	20	20	20
Annual Indicator	22.0	21.2	17.8	17.8	17.8
Numerator	387	369	308	308	308
Denominator	17,600	17,439	17,346	17,346	17,346
Data Source		Delaware Vital Statistics, 2007	Delaware Vital Statistics, 2007	Delaware Vital Statistics	Delaware Vital Statistics
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	17.6	17.4	17.3	17.1	16.9
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #8
   Field Name: PM08
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2010 data are not available. Estimate is based on 2009.

   Method of Target Setting: 10% improvement over next 10 years.

2. **Section Number:** Form11_Performance Measure #8
   Field Name: PM08
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2008 Vital Statistics Data.

3. **Section Number:** Form11_Performance Measure #8
   Field Name: PM08
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2008 Delaware Vital Stats Data.

   Target Setting Method: 5 Percent Improvement by 2016.

PERFORMANCE MEASURE # 09

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	40	35	35	35	35
Annual Indicator	34	34	34	34	34
Numerator					
Denominator					
Data Source		Delaware Dental Survey	Delaware Dental Survey	Delaware Dental Survey	Delaware Dental Survey
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	34.7	35.4	36	36.7	37.4
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #9
   Field Name: PM09
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   The 2011 indicator is based on a 2002 statewide survey of third grade children. More recent estimates are not available at this time.

   Method of Target Setting: 20% improvement over next 10 years.

2. **Section Number:** Form11_Performance Measure #9
   Field Name: PM09
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   The 2010 indicator is based on a 2002 statewide survey of third grade children. More recent estimates are not available at this time.

3. **Section Number:** Form11_Performance Measure #9
   Field Name: PM09
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   The 2009 indicator is based on a 2002 statewide survey of third grade children. More recent estimates are not available at this time.

   2010 Sealant Stats for the Oral Health Program:
   # of Children Screened (2nd grade): 30
   # of Children w/ Caries Presence (Decay): 18
   # of Total Sealants Placed: 68
   #Regular Referral: 15
   #Urgent Referral: 5 (urgent is classified when pain or infection present within diagnosis of decay/ extraction)

PERFORMANCE MEASURE # 10

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	2.5	1.7	1.7	1.7	3.4
Annual Indicator	1.8	3.6	3.2	3.2	3.2
Numerator	9	6	16	16	16
Denominator	500,732	168,041	506,490	506,490	506,490
Data Source		Hospital Discharge Data, 2005	Delaware Vital Stats Data	Delaware Vital Stas Data.	Delaware Vital Statistics
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	3.1	3.1	3.1	3.1	3
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #10
   Field Name: PM10
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available. This indicator is provisional.

   Method of Target Setting: 10% improvement over next 10 years.

2. **Section Number:** Form11_Performance Measure #10
   Field Name: PM10
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 data are not available. This indicator is provisional.

3. **Section Number:** Form11_Performance Measure #10
   Field Name: PM10
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2007-2009 Delaware Vital Statistics Data.
   This is a three year rate.

   Single year rates are as follows:

   2007: 1.2 / 100,000 (C.I. +/- 1.6)
   2008: 3.6 / 100,000 (C.I. +/- 2.9)
   2009: 4.7 / 100,000 (C.I. +/- 3.3)

   The national rate for 2010 is 2.3 / 100,000.
   The expected number of deaths based on the national rate is 3.9.
   The three year average for 2007-2009 is lower than than national rate for 2010 (National Vital Statistics Report, 60(4), January 11, 2012).

   Method of target setting: 5% improvement by 2016.

PERFORMANCE MEASURE # 11

The percent of mothers who breastfeed their infants at 6 months of age.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	36	36	32	34	44
Annual Indicator	30.6	30.6	32.8	43.2	48.9
Numerator					
Denominator					
Data Source		National Immunization Survey	National Immunization Survey	National Immunization Survey	Delaware PRAMS Data
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	49.4	49.9	50.4	50.9	51.3
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #11
   Field Name: PM11
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2008 Delaware PRAMS Data. Percent of women who are still breastfeeding at time of interview.

   Method of Target Setting: 10% improvement over next 10 years.

2. **Section Number:** Form11_Performance Measure #11
   Field Name: PM11
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2007 National Immunization Survey. Breastfeeding at 6 Months (n=268). Confidence Interval +/-6.7%.

3. **Section Number:** Form11_Performance Measure #11
   Field Name: PM11
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2006 National Immunization Survey (32.5% +/- 6.6%) - Any breastfeeding at 6 months of age.

PERFORMANCE MEASURE # 12

Percentage of newborns who have been screened for hearing before hospital discharge.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	100	100	100	100	100
Annual Indicator	93.7	98.7	99.4	98.7	99.7
Numerator	11,864	12,468	12,079	11,545	11,587
Denominator	12,666	12,627	12,153	11,694	11,627
Data Source		Delaware Newborn Hearing Screening Program	Delaware Newborn Screening Program	Delaware Newborn Screening Program	Delaware Newborn Screening Program
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

None

PERFORMANCE MEASURE # 13

Percent of children without health insurance.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	8	12	10	9.2	8
Annual Indicator	12.3	10.5	9.4	8.5	8
Numerator	24,992				
Denominator	203,188				
Data Source		Kids Count Fact Book, 2009	2010 Kids Count Fact Book, 2009	2011 Kids Count Fact Book	2012 Kids Count
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	7.9	7.8	7.8	7.7	7.6
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #13
   Field Name: PM13
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2009-2011 three year average as reported in 2012 KIDS COUNT.

   Method of Target Setting: 10% improvement over next 10 years.

2. **Section Number:** Form11_Performance Measure #13
   Field Name: PM13
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   This is a percent based on estimates from the Center for Applied Demography and Survey Research (Three year average 2007-2009).

3. **Section Number:** Form11_Performance Measure #13
   Field Name: PM13
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   This is a percent based on estimates from the Center for Applied Demography and Survey Research (Three year average 2007-2009).

PERFORMANCE MEASURE # 14

Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	33	20	20	15	20.4
Annual Indicator	28.4	20.2	16.0	20.6	21.5
Numerator	2,814	2,075	2,075	2,669	2,704
Denominator	9,920	10,264	12,962	12,937	12,593
Data Source		Delaware WIC Program	Delaware WIC Program	Delaware WIC Program	Delaware WIC Program
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	21.1	20.6	20.2	19.8	19.4
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #14
   Field Name: PM14
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 Delaware WIC Program

   Method of Target Setting: 10% improvement over next 10 years.

2. **Section Number:** Form11_Performance Measure #14
   Field Name: PM14
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   Delaware WIC Program Data for Calendar Year 2010

PERFORMANCE MEASURE # 15

Percentage of women who smoke in the last three months of pregnancy.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	10.9	6.5	6.6	9.4	9.4
Annual Indicator	6.8	9.6	10.3	10.3	10.3
Numerator	814	1,157	1,172	1,172	1,172
Denominator	11,898	12,016	11,369	11,369	11,369
Data Source		Delaware Vital Statistics	Delaware Vital Statistics	Delaware Vital Statistics	Delaware Vital Stats
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	10.2	10.1	10	9.9	9.8
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #15
   Field Name: PM15
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   Method of Target Setting: 10% improvement over next 10 years.

2. **Section Number:** Form11_Performance Measure #15
   Field Name: PM15
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2008 Delaware Vital Statistics Data.

3. **Section Number:** Form11_Performance Measure #15
   Field Name: PM15
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2008 Delaware Vital Statistics Data.

PERFORMANCE MEASURE # 16

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	5.4	5.4	13	8	3.2
Annual Indicator	8.3	3.4	5.6	5.6	5.6
Numerator	5	2	10	10	10
Denominator	59,899	59,701	179,765	179,765	179,765
Data Source		Delaware Vital Statistics	Delaware Vital Statistics	Delaware Vital Statistics Data	Delaware Vital Statistics
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	5.5	5.5	5.4	5.4	5.3
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #16
   Field Name: PM16
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2007-2009 Delaware Vital Statistics Data. Provisional data.

   Due to low numbers, indicator is reported as a three year moving average.

   Method of Target Setting: 10% improvement over next 10 years.

2. **Section Number:** Form11_Performance Measure #16
   Field Name: PM16
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2007-2009. Delaware Vital Statistics Data. Due to low numbers, indicator is reported as a three year moving average.

3. **Section Number:** Form11_Performance Measure #16
   Field Name: PM16
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2007-2009 Delaware Vital Statistics Data. Due to low numbers, indicator is reported as a three year moving average.

PERFORMANCE MEASURE # 17

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	90	80	80	92	78
Annual Indicator	90.5	77.5	78.7	78.7	78.7
Numerator	182	172	166	166	166
Denominator	201	222	211	211	211
Data Source		2007 Delaware Vital Statistics	2007 Delaware Vital Statistics	2008 Delaware Vital Statistics Data	Delaware Vital Statistics Data
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	79.5	80.3	80.1	81.8	82.6
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #17
   Field Name: PM17
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   Method of Target Setting: 10% improvement over next 10 years.

2. **Section Number:** Form11_Performance Measure #17
   Field Name: PM17
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2008 Delaware Vital Statistics Data

3. **Section Number:** Form11_Performance Measure #17
   Field Name: PM17
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2008 Delaware Vital Statistics Data

PERFORMANCE MEASURE # 18

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	90	75	75	68	73
Annual Indicator	66.9	72.7	74.9	74.9	74.9
Numerator	8,092	8,739	8,519	8,519	8,519
Denominator	12,097	12,016	11,369	11,369	11,369
Data Source		Delaware Vital Statistics	Delaware Vital Statistics	Delaware Vital Statistics	Delware Vital Statistics
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	79.5	80.3	81.1	81.8	82.6
Annual Indicator					
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #18
   Field Name: PM18
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   Method of Target Setting: 10% improvement over next 10 years.

2. **Section Number:** Form11_Performance Measure #18
   Field Name: PM18
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2008 Delaware Vital Statistics Data

3. **Section Number:** Form11_Performance Measure #18
   Field Name: PM18
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2008 Delaware Vital Statistics Data

FORM 11
TRACKING PERFORMANCE MEASURES
[SECS 485 (2)(2)(B)(III) AND 486 (A)(2)(A)(III)]
STATE: DE

Form Level Notes for Form 11

None

STATE PERFORMANCE MEASURE # 1 - REPORTING YEAR

The rate of infant deaths between birth and 1 year of life.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective			8	8	7.8
Annual Indicator	8.3	8.4	8.0	8.0	8.0
Numerator	99	101	91	91	91
Denominator	11,898	12,016	11,369	11,369	11,369
Data Source		Delaware Vital Statisitics	Delaware Vital Stats	Delaware Vital Stats	Delaware Vital Stats
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	7.9	7.8	7.8	7.7	7.6
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_State Performance Measure #1
   Field Name: SM1
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available. The data reported for 2011 are provisional.

   Method of Target Setting: 10% improvement over next 10 years.

2. **Section Number:** Form11_State Performance Measure #1
   Field Name: SM1
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2008 Delaware Vital Statistics Data

3. **Section Number:** Form11_State Performance Measure #1
   Field Name: SM1
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 Delaware Vital Statistics Data

STATE PERFORMANCE MEASURE # 2 - REPORTING YEAR

The rate of live births at 32 to 36 weeks of gestation(preterm birth).

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective			110	108	106
Annual Indicator	112.4	102.5	102.3	102.3	102.3
Numerator	1,337	1,232	1,163	1,163	1,163
Denominator	11,898	12,016	11,369	11,369	11,369
Data Source		Delaware Vital Statistics	Delaware Vital Statistics	Delaware Vital Statistics	Delaware Vital Stats
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	101.3	100.3	99.2	98.2	97.2
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_State Performance Measure #2
   Field Name: SM2
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available. Data reported for 2011 are provisional.

   Method of Target Setting: 10% improvement over next 10 years.

2. **Section Number:** Form11_State Performance Measure #2
   Field Name: SM2
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 data are not available. Data reported for 2010 are provisional.

3. **Section Number:** Form11_State Performance Measure #2
   Field Name: SM2
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 Delaware Vital Statistics Data

STATE PERFORMANCE MEASURE # 3 - REPORTING YEAR

The rate of low birth weight and very low birth weight deliveries.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective			92	90	84
Annual Indicator	92.4	84.9	104.6	104.6	104.6
Numerator	1,118	1,020	1,189	1,189	1,189
Denominator	12,097	12,016	11,369	11,369	11,369
Data Source		Delaware Vital Statistics	Delaware Vital Statistics	Delaware Vital Statistics	Delaware Vital Stats
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	103.6	102.5	101.5	100.4	99.4
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_State Performance Measure #3
   Field Name: SM3
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available. Data reported for 2011 are provisional.

   Method of Target Setting: 10% improvement over next 10 years.

2. **Section Number:** Form11_State Performance Measure #3
   Field Name: SM3
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 data not available. Data reported for 2010 are provisional.

3. **Section Number:** Form11_State Performance Measure #3
   Field Name: SM3
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 Delaware Vital Statistics Data

STATE PERFORMANCE MEASURE # 4 - REPORTING YEAR

The percent of children and adolescents who are overweight or obese.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective			33	33	33
Annual Indicator		33.2	33.2	33.5	29.1
Numerator					
Denominator					
Data Source		2011 KIDS Count Fact Book	2011 KIDS Count Fact Book	2011 KIDS Count Fact Book	2011 Delaware High School YRBS
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	28.5	27.9	27.4	26.8	26.2
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_State Performance Measure #4
   Field Name: SM4
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 Delaware High School YRBS. Overweight 16.9% CI (14.9-19.0); Obese 12.2% CI (10.8-13.8).

   Method of Target Setting: 20% improvement over next 10 years.

2. **Section Number:** Form11_State Performance Measure #4
   Field Name: SM4
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   Childhood Obesity Action Network. State Obesity Profiles, 2009. National Initiative for Children's Healthcare Quality, Child Policy Research Center, and Child and Adolescent Health Measurement Initiative

3. **Section Number:** Form11_State Performance Measure #4
   Field Name: SM4
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   Childhood Obesity Action Network. State Obesity Profiles, 2009. National Initiative for Children's Healthcare Quality, Child Policy Research Center, and Child and Adolescent Health Measurement Initiative

STATE PERFORMANCE MEASURE # 5 - REPORTING YEAR

The percent of women of childbearing age (15-44) who are obese (BMI 30 or higher).

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective			26	26	25
Annual Indicator	27	27	27	14.7	14.7
Numerator					
Denominator					
Data Source		Delaware BRFSS	Delaware BRFSS	2010 Delaware BRFSS	2010 Delaware BRFSS
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	14.4	14.1	13.8	13.5	13.2
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_State Performance Measure #5
   Field Name: SM5
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2010 Delaware BRFSS, Obese Women, ages 18-64.

   Method of Target Setting: 20% improvement over next 10 years.

2. **Section Number:** Form11_State Performance Measure #5
   Field Name: SM5
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 Delaware BRFSS, Obese Women, ages 18-64.

3. **Section Number:** Form11_State Performance Measure #5
   Field Name: SM5
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   Percent of women 25-34 (Obese and Overweight), 2007 Delaware BRFSS

STATE PERFORMANCE MEASURE # 6 - REPORTING YEAR

The mortality rate among children and youth (0-21 years) due to unintentional injuries.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective			10.5	10.5	12.6
Annual Indicator	16.1	12.8	15.4	15.4	15.4
Numerator		32	39	39	39
Denominator		250,636	253,638	253,638	253,638
Data Source		Delaware Health Statistics	Delaware Health Statistics	Delaware Health Statistics	Delaware Health Statistics
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	15.2	15.1	14.9	14.8	14.6
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_State Performance Measure #6
   Field Name: SM6
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available. Data reported for 2011 are provisional.

   Method of Target Setting: 10% improvement over next 10 years.

2. **Section Number:** Form11_State Performance Measure #6
   Field Name: SM6
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 data are not available. Data reported for 2010 are provisional.

3. **Section Number:** Form11_State Performance Measure #6
   Field Name: SM6
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 Delaware Vital Statistics

STATE PERFORMANCE MEASURE # 7 - REPORTING YEAR

The percent of Delaware public high school students who currently smoke.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective			10	10	18.8
Annual Indicator	18.2	19.1	19.1	19.1	18.3
Numerator					
Denominator					
Data Source		Delaware YRBS	Delaware YRBS	Delaware YRBS	2011 Delaware High School YRBS
Is the Data Provisional or Final?				Provisional	Final

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	18.1	17.9	17.8	17.6	17.4
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_State Performance Measure #7
   Field Name: SM7
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 Delaware High School YRBS, Smoked cigarettes on at least 1 day in the last 30 days. 18.3%, CI (16.2-20.5).

   Method of Target Setting: 10% improvement over next 10 years.

2. **Section Number:** Form11_State Performance Measure #7
   Field Name: SM7
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2009 YRBS

3. **Section Number:** Form11_State Performance Measure #7
   Field Name: SM7
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 YRBS

STATE PERFORMANCE MEASURE # 8 - REPORTING YEAR

The percent of benchmark measures completed for implementation of a formal umbrella structure for organizations serving families with children with special health care needs in Delaware.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective			60	80	100
Annual Indicator		20.0	60.0	80.0	80.0
Numerator		1	3	4	4
Denominator		5	5	5	5
Data Source		State Title V Program Data	State Title V Program	State Title V Program	State Title V Program
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	100	100	100	100	100
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_State Performance Measure #8
   Field Name: SM8
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   See Form 16, SPM 8 "Detail Sheet" for how this measure is determined.

2. **Section Number:** Form11_State Performance Measure #8
   Field Name: SM8
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   See Form 16, SPM 8 "Detail Sheet" for how this measure is determined.

STATE PERFORMANCE MEASURE # 9 - REPORTING YEAR

The percentage of children aged 4 months to 5 years with no or low risk for developmental, behavioral or social delays.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective			76	76	78
Annual Indicator		74	74	74	74
Numerator					
Denominator					
Data Source		NSCH, 2007	NSCH, 2007	NSCH, 2007	NSCH 2007
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	74.7	75.5	76.2	77	77.7
Annual Indicator					
Numerator					
Denominator					

Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.

Field Level Notes

1. **Section Number:** Form11_State Performance Measure #9
   Field Name: SM9
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2007 National Survey on Children's Health

   Method of Target Setting: 10% improvement over next ten years.

2. **Section Number:** Form11_State Performance Measure #9
   Field Name: SM9
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2007 National Survey on Children's Health

3. **Section Number:** Form11_State Performance Measure #9
   Field Name: SM9
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2007 National Survey on Children's Health

STATE PERFORMANCE MEASURE # 10 - REPORTING YEAR

The percent of health indicators that improve across four domains (child health, mental health, health care access and quality, and family health) for children with special health care needs.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective				0	20
Annual Indicator					
Numerator					
Denominator					
Data Source					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	20	30	30	30	30
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form11_State Performance Measure #10
   Field Name: SM10
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   The indictors for the index measure are derived from the National Survey of Children's Health. Baseline data was established from the 2007 NSCH Survey (NSCH Health Disparities Snapshot). For the indicators selected at baseline, CSHCN and their families were significantly different than children and their families without special health care needs. Since this is a measure based on improvement - reducing the disparties between CSHCN and those without special health care needs, the baseline indicator for 2011 is set at zero (0).

   See Form 16, SPM 10 "Detail Sheet" for how this measure will be determined.

   Method of target setting: 50% improvement over next five years.

2. **Section Number:** Form11_State Performance Measure #10
   Field Name: SM10
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   The indictors for the index measure are derived from the National Survey of Children's Health. Baseline data was established from the 2007 NSCH Survey (NSCH Health Disparities Snapshot). For the indicators selected at baseline, CSHCN and their families were significantly different than children and their families without special health care needs. Since this is a measure based on improvement - reducing the disparties between CSHCN and those without special health care needs, the baseline indicator for 2011 is set at zero (0).

   See Form 16, SPM 10 "Detail Sheet" for how this measure will be determined.

3. **Section Number:** Form11_State Performance Measure #10
   Field Name: SM10
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   The indictors for the index measure are derived from the National Survey of Children's Health. Baseline data was established from the 2007 NSCH Survey (NSCH Health Disparities Snapshot). For the indicators selected at baseline, CSHCN and their families were significantly different than children and their families without special health care needs. Since this is a measure based on improvement - reducing the disparties between CSHCN and those without special health care needs, the baseline indicator for 2011 is set at zero (0).

FORM 12
TRACKING HEALTH OUTCOME MEASURES
[SECS 505 (A)(2)(B)(III) AND 506 (A)(2)(A)(III)]
STATE: DE

Form Level Notes for Form 12

None

OUTCOME MEASURE # 01

The infant mortality rate per 1,000 live births.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	6.9	6.9	6.9	6.9	7.8
Annual Indicator	7.4	8.4	8.0	8.0	8.0
Numerator	90	101	91	91	91
Denominator	12,097	12,016	11,369	11,369	11,369
Data Source		Delaware Vital Statistics Data	Delaware Vital Statistics Data	Delaware Vital Statistics Data	Delaware Vital Stats
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	7.8	7.8	7.7	7.7	7.6
Annual Indicator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form12_Outcome Measure 1
   Field Name: OM01
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available at this time. Data reported for 2011 are provisional.

2. **Section Number:** Form12_Outcome Measure 1
   Field Name: OM01
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 data are not available at this time. Data reported for 2010 are provisional.

3. **Section Number:** Form12_Outcome Measure 1
   Field Name: OM01
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 Delaware Vital Statistics

OUTCOME MEASURE # 02

The ratio of the black infant mortality rate to the white infant mortality rate.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	2.2	2.1	2.1	2.4	2.4
Annual Indicator	2.5	2.5	2.8	2.8	2.8
Numerator	15.6	15.3	15.7	15.7	15.7
Denominator	6.2	6.2	5.7	5.7	5.7
Data Source		Delaware Vital Statistics Data	Delaware Vital Statistics Date	Delaware Vital Statistics Data	Delaware Vital Stats
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	2.3	2.3	2.2	2.2	2.1
Annual Indicator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form12_Outcome Measure 2
   Field Name: OM02
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available at this time. Data reported for 2011 are provisional.

2. **Section Number:** Form12_Outcome Measure 2
   Field Name: OM02
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 data are not available at this time. Data reported for 2010 are provisional.

3. **Section Number:** Form12_Outcome Measure 2
   Field Name: OM02
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 Delaware Vital Statistics Data

OUTCOME MEASURE # 03

The neonatal mortality rate per 1,000 live births.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	5	5	5	5.2	5.6
Annual Indicator	5.3	5.7	5.8	5.8	5.8
Numerator	64	68	66	66	66
Denominator	12,097	12,016	11,369	11,369	11,369
Data Source		Delaware Vital Statistics Data	Delaware Vital Statistics Data	Delaware Vital Statistics Data	Delaware Vital Stats.
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	5.6	5.5	5.5	5.4	5.4
Annual Indicator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form12_Outcome Measure 3
   Field Name: OM03
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available at this time. Data reported for 2011 are provisional.

2. **Section Number:** Form12_Outcome Measure 3
   Field Name: OM03
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 data are not available at this time. Data reported for 2010 are provisional.

3. **Section Number:** Form12_Outcome Measure 3
   Field Name: OM03
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 Delaware Vital Statistics Data

OUTCOME MEASURE # 04

The postneonatal mortality rate per 1,000 live births.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	2.3	2.2	2.2	2	2.6
Annual Indicator	2.1	2.7	2.2	2.2	2.2
Numerator	26	33	25	25	25
Denominator	12,097	12,016	11,369	11,369	11,369
Data Source		2008 Delaware Vital Statistics Data	Delaware Vital Stats	Delaware Vital Stats	Delaware Vital Stats
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	2.1	2.1	2	2	1.9
Annual Indicator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form12_Outcome Measure 4
   Field Name: OM04
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available at this time. Data reported for 2011 are provisional.

2. **Section Number:** Form12_Outcome Measure 4
   Field Name: OM04
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 data are not available at this time. Data reported for 2010 are provisional.

3. **Section Number:** Form12_Outcome Measure 4
   Field Name: OM04
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 Delaware Vital Statistics Data

OUTCOME MEASURE # 05

The perinatal mortality rate per 1,000 live births plus fetal deaths.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	8.3	8.2	8.2	7.1	7.6
Annual Indicator	7.2	7.7	6.6	6.6	6.6
Numerator	88	93	75	75	75
Denominator	12,159	12,016	11,435	11,435	11,435
Data Source		2008 Delaware Vital Statistics Data	Delawaer Vital Stats	Delaware Vital Stats	Delaware Vital Stats
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	6.6	6.5	6.5	6.4	6.4
Annual Indicator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form12_Outcome Measure 5
   Field Name: OM05
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available at this time. Data reported for 2011 are provisional.

2. **Section Number:** Form12_Outcome Measure 5
   Field Name: OM05
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 data are not available at this time. Data reported for 2010 are provisional.

3. **Section Number:** Form12_Outcome Measure 5
   Field Name: OM05
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 Delaware Vital Statistics Data

OUTCOME MEASURE # 06

The child death rate per 100,000 children aged 1 through 14.

Annual Objective and Performance Data

	2007	2008	2009	2010	2011
Annual Performance Objective	21	21	21	9.5	9.5
Annual Indicator	9.6	14.7	17.1	17.1	17.1
Numerator	15	23	27	27	27
Denominator	156,590	156,377	158,133	158,133	158,133
Data Source		2008 Delaware Vital Statistics Data	Delaware Vital Stats	Delaware Vital Stats	Delaware Vital Stats
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data

	2012	2013	2014	2015	2016
Annual Performance Objective	17	17	16.9	16.9	16.8
Annual Indicator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Numerator					
Denominator					

Field Level Notes

1. **Section Number:** Form12_Outcome Measure 6
   Field Name: OM06
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available at this time. Data reported for 2011 are provisional.

2. **Section Number:** Form12_Outcome Measure 6
   Field Name: OM06
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 data are not available at this time. Data reported for 2010 are provisional.

3. **Section Number:** Form12_Outcome Measure 6
   Field Name: OM06
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 Delaware Vital Statistics Data

FORM 12
TRACKING HEALTH OUTCOME MEASURES
[SECS 505 (A)(2)(B)(III) AND 506 (A)(2)(A)(III)]
STATE: DE

Form Level Notes for Form 12

None

FORM 13
CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS
STATE: DE

1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

3

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

3

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

3

4. Family members are involved in service training of CSHCN staff and providers.

3

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

3

6. Family members of diverse cultures are involved in all of the above activities.

3

Total Score: 18

Rating Key
0 = Not Met
1 = Partially Met
2 = Mostly Met
3 = Completely Met

Form Notes for Form 13

None

Field Level Notes

None

FORM 14
LIST OF MCH PRIORITY NEEDS

[Sec. 505(a)(5)]

STATE: DE FY: 2013

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase ,list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1. The infant mortality rate in Delaware should be reduced.
2. The incidence of low birth weight and preterm births should be reduced.
3. The prevalence of obesity among children and teens should be reduced.
4. The prevalence of obesity among women of childbearing age should be reduced.
5. The incidence of unintentional injury and the mortality rate among children and youth should be reduced.
6. The prevalence of smoking among teens should be reduced.
7. A multi-faceted approach to providing support to organizations serving families with children with special health care needs should be implemented statewide.
8. Developmental delay in early childhood should be identified early and appropriate intervention services should be provided to children at risk of developmental delay.
9. Health disparities among Families with Children with Special Health Care Needs should be reduced.
10. Oral health preventive and treatment services should be made available to children, including children with special health care needs.

Form Notes for Form 14

None

Field Level Notes

None

FORM 15
TECHNICAL ASSISTANCE(TA) REQUEST

STATE: de **APPLICATION YEAR: 2013**

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested *(max 250 characters)*	Reason(s) Why Assistance Is Needed *(max 250 characters)*	What State, Organization or Individual Would You suggest Provide the TA (if known) *(max 250 characters)*
1.	**General Systems Capacity Issues** If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: N/A	2. Centralized Intake System development for Children and Youth with Special Health Care Needs and their Families and consensus building	Technical assistance is requested to further refine and develop the Family SHADE organization, and assist the group with coming to a consensus on a centralized intake system (information and referral) in order to achieve its goals and priorities.	Not Known
2.	**National Performance Measure Issues** If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: 3	3. Children and Youth with Special Health Care Needs Medical Home Pilot	Delaware Maternal and Child Health Bureau is requesting technical assistance to develop and improve medical homes for children and youth with special health care needs and their families. Professional development on resources such as Bright Futures, health care transitions, and other AAP provider tools is necessary to build local capacity to support medical homes. This request addresses NPM #3, NPM#6, NPM#13, and SPM#18.	Not Known
3.	**Other** If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: N/A	Develop Cultural and Linguistic Competence of Delaware Title V MCH personnel	Delaware Maternal and Child Health is requesting assistance with building capacity of its MCH personnel through a workshop to (1) value diversity, (2) conduct an organizational self-assessment, (3) manage the dynamics of difference, (4) acquire and institutionalize cultural knowledge and (5) adapt to diversity and the cultural contexts of the communities we serve.	Not Known
4.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
5.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
11.	If you selected State or National Performance Measure Issue categories			

	above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
12.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

Form Notes for Form 15

None

Field Level Notes

None

FORM 16
STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET
STATE: DE

SP() #_____1_____

PERFORMANCE MEASURE:	The rate of infant deaths between birth and 1 year of life.
STATUS:	Active
GOAL	Reduce the Statewide infant mortality rate to 4.5 per 1,000 live births.
DEFINITION	The number of deaths of infants (one year of age or younger) per 1000 live births **Numerator:** The number of deaths to live born infants aged 0-364 days during the year. **Denominator:** Number of live births during the year. **Units:** 1000 **Text:** Rate
HEALTHY PEOPLE 2020 OBJECTIVE	16-1c. Reduce fetal and infant deaths. Infant death is a critical indicator of the health of a population. It reflects the overall state of maternal health as well as the quality and accessibility of primary health care available to pregnant women and infants (Healthy People 2010).
DATA SOURCES AND DATA ISSUES	Delaware Vital Statistics
SIGNIFICANCE	Infant Mortality is an important measure of a nation's health and a worldwide indicator of health status and social well-being. Delaware is ranked 5th highest in infant mortality nationwide.

SP() #_____2	
PERFORMANCE MEASURE:	The rate of live births at 32 to 36 weeks of gestation(preterm birth).
STATUS:	Active
GOAL	Reduce the rate of live births at 32 to 26 weeks of gestation to 96 per 1,000.
DEFINITION	The rate of live births at gestational ages of 32 to 36 weeks during the year per 1,000 live births. **Numerator:** The number of live births at gestational ages of 32 to 36 weeks during the year. **Denominator:** The number of live births during the year. **Units:** 1000 **Text:** Rate
HEALTHY PEOPLE 2020 OBJECTIVE	16-11b. Reduce preterm births. Approximately two-thirds of LBW infants and 98 percent of VLBW infants are born preterm. In addition, preterm birth is the leading cause of those neonatal deaths not associated with birth defects (Healthy People 2010).
DATA SOURCES AND DATA ISSUES	Delaware Vital Statistics Birth Records.
SIGNIFICANCE	Short gestation is one of the primary causes of infant mortality. Four conditions (birth defects, conditions related to short gestation/low birth weight, SIDS and respiratory distress syndrome) account for more than half of all infant deaths nationwide.

SP() #3	
Performance Measure:	The rate of low birth weight and very low birth weight deliveries.
Status:	Active
Goal	Reduce the rate of infants born at less than 2,500 grams to 5.9 per 1,000 live births.
Definition	The rate of live births with a birth weight of less than 2,500 grams per 1,000 live births. **Numerator:** The number of live births with a birth weight of less than 2,500 grams. **Denominator:** The number of live births. **Units:** 1000 **Text:** Rate
Healthy People 2020 Objective	16-10. Reduce low birth weight (LBW) and very low birth weight (VLBW). LBW is the risk factor most closely associated with neonatal death; thus, improvements in infant birth weight can contribute substantially to reductions in the infant mortality rate (Healthy People 2010).
Data Sources and Data Issues	Delaware Vital Statistics Birth Records
Significance	LBW/VLBW is the risk factor most closely associated with neonatal death; thus, improvements in infant birth weight can contribute substantially to reductions in the infant mortality rate.

SP() #4	
PERFORMANCE MEASURE:	The percent of children and adolescents who are overweight or obese.
STATUS:	Active
GOAL	Reduce the number of children that are overweight or obese to 5 percent.
DEFINITION	The percent of children aged 6 to 19 years that are overweight or obese. **Numerator:** The number of children aged 6 to 19 years that are overweight or obese. **Denominator:** The nuber of children aged 6 to 19 years. **Units:** 100 **Text:** Percent
HEALTHY PEOPLE 2020 OBJECTIVE	19-3. Reduce the proportion of children and adolescents who are obese or overweight. Maintenance of a healthy weight is a major goal in the effort to reduce the burden of illness and its consequent reduction in quality of life and life expectancy (Healthy People 2010).
DATA SOURCES AND DATA ISSUES	Delaware Youth Risk Behavior Survey.
SIGNIFICANCE	Obesity and overweight are at epidemic proportions nationwide. In Delaware, over a third of children are overweight. This increases health risks, including risk for chronic health conditions.

SP() #5	
Performance Measure:	The percent of women of childbearing age (15-44) who are obese (BMI 30 or higher).
Status:	Active
Goal	Reduce the percent of women aged 15 to 44 years that are obese to 15%.
Definition	The percent of women aged 15 to 44 that have a Body Mass Index of 30 or higher. **Numerator:** The number of women aged 15 to 44 years with a BMI equal to or greater than 30. **Denominator:** The number of women aged 15 to 44 years. **Units:** 100 **Text:** Percent
Healthy People 2020 Objective	19-2. Reduce the proportion of adults who are obese. Maintenance of a healthy weight is a major goal in the effort to reduce the burden of illness and its consequent reduction in quality of life and life expectancy.
Data Sources and Data Issues	Delaware Behavioral Risk Factor Surveillance.
Significance	Obesity among women of childbearing age increases the overall risk of mortality for women and increases the risk for complications of pregnancy including hypertension and gestational diabetes.

SP() #6	
Performance Measure:	The mortality rate among children and youth (0-21 years) due to unintentional injuries.
Status:	Active
Goal	Reduce the mortality rate due to unintentional injuries among children and youth age 0-21 years to 17.5 per 100,000.
Definition	The rate of deaths to children aged 0-21 due to unintentional injuries per 100,000 children aged 0-21 years. **Numerator:** The number of deaths to children aged 0-21 years due to unintentional injuries. **Denominator:** The number of children age 0-21 years. **Units:** 100000 **Text:** Rate
Healthy People 2020 Objective	15-13. Reduce deaths caused by unintentional injury. Injuries are a leading cause of death among children and youth nationwide and in Delaware.
Data Sources and Data Issues	Delaware Vital Statistics data.
Significance	Injuries are a leading cause of death among children and youth nationwide and in Delaware.

SP() #_____7	
PERFORMANCE MEASURE:	The percent of Delaware public high school students who currently smoke.
STATUS:	Active
GOAL	Reduce the percent of high school student who currently smoke to 10%.
DEFINITION	The percent of high school students (grades 9-12) that report smoking tobacco in the past 30 days. **Numerator:** The number of students in grades 9-12 that report smoking in the past 30 days. **Denominator:** The number of students in grades 9-12. **Units:** 100 **Text:** Percent
HEALTHY PEOPLE 2020 OBJECTIVE	27-2. Reduce tobacco use among adolescents. Because tobacco use is linked with numerous adverse health outcomes, reducing tobacco use will reduce illness, disability, and death across a spectrum of conditions, including heart disease, cancer, and chronic lung disease (Healthy People 2010).
DATA SOURCES AND DATA ISSUES	Delaware Youth Risk Behavior Survey.
SIGNIFICANCE	There are approximately 430,000 tobacco related deaths each year nationwide. Since tobacco addiction usually begins in adolescence, the best way to reduce tobacco use is to prevent youth initiation of tobacco use.

SP() #8	
PERFORMANCE MEASURE:	The percent of benchmark measures completed for implementation of a formal umbrella structure for organizations serving families with children with special health care needs in Delaware.
STATUS:	Active
GOAL	To increase the effectiveness and efficiency of organizations that serve families of children with special health care needs throughout Delaware.
DEFINITION	The percentage of performance benchmarks the Title V/CSHCN program has reached toward implementation of an overarching structure that supports organizations that serve families with CSHCN. Benchmarks: 1) complete key informant interviews and needs assessment of CSHCN organizations; 2) develop and issue a Request for Proposals for an "umbrella" organization in Delaware; 3) implement a contract with successful bidder; 4) formalize the structure and governance of the "umbrella" organization (executive board, advisory board, strategic plan, policies/procedures, etc.); 5) complete an implementation evaluation and long term business plan, including identification of funding streams. **Numerator:** Number of benchmarks Delaware has completed in implementing the CSHCN "umbrella" organization. **Denominator:** Total number of benchmarks (5) **Units:** 100 **Text:** Percent
HEALTHY PEOPLE 2020 OBJECTIVE	None. This performance measure is not directly related to a Healthy People 2010 Objective.
DATA SOURCES AND DATA ISSUES	Title V/CSHCN program data.
SIGNIFICANCE	Fragmentation of efforts with regard to services for families with children with special health care needs results in inefficient and less than optimal use of available resources. Under a shared structure, organizations that serve families of CSHCN will be able to collaborate and access resources for 1) information and referral; 2) development of organizational capacity; 3) training of parents and professionals; 4) funding; and 5) advocacy.

SP() #9	
Performance Measure:	The percentage of children aged 4 months to 5 years with no or low risk for developmental, behavioral or social delays.
Status:	Active
Goal	Increase the percentage of children with low/no risk of developmental, behavioral or social delays.
Definition	The basic logic for scoring the PEDS© is that for specific ages there are age-specific parental concerns that are "predictive" of a child's risk for delays. The more concerns a parent has to items that are "predictive" of a child's risk, the more at risk the child is for delays. - Children whose parents' report concerns to 2 or more items predictive of delays, are identified as at "high risk". - Children whose parents' have concerns to one item that is predictive of a delay are identified as at "moderate risk". - Children whose parents have concerns, but those concerns are not predictive of delays are identified at "low risk". - Lastly, children whose parents have no concerns to any of the eight items asked, are identified as "no risk". (NSCH, 2007). **Numerator:** Number of Children with no or low-risk for developmental, behavioral or social delay. **Denominator:** Number of Children aged 4 months through 5 years. **Units:** 100 **Text:** Percent
Healthy People 2020 Objective	None. This objective is not directly related to a Healthy People 2010 Objective.
Data Sources and Data Issues	NSCH, PEDS results, State Surveys.
Significance	Developmental, behavioral and social delays adversely affect an optimal health trajectory for children throughout their life.

SP() #10

Performance Measure:	The percent of health indicators that improve across four domains (child health, mental health, health care access and quality, and family health) for children with special health care needs.
Status:	Active
Goal	To eliminate health disparities for families of children with special health care needs throughout Delaware, we must ensure access to the services, information and support they need to improve health. This measure seeks to eliminate health disparties between children with special needs and those children without special needs.
Definition	This is an index measure based on the following indicators measured for CSHCN and children without special health care needs: 1) Percentage of children ages 0-17 whose overall health is excellent or very good; 2) Percentage of children ages 1-17 whose teeth are in excellent or very good condition; 3) Percentage of parents who report having a medical home; 4) Percentage of children ages 0-17 needing care coordination in the past year that received effective care coordination; 5) Percnetage of children ages 0-17 who needed and had problems getting specialist care in the past year; 6) Percentage of mothers whose children ages 0-17 are currently reported in excellent or very good general health; 7) Percentage of mothers whose children are currently living in the same household living reported in excellent or very good mental health; 8) Percentage of fathers whose children are currently living in the same household reported to be in excellent or very good mental health. **Numerator:** The number of indictors which have improved for CSHCN (relative to children without special health care needs) since the previous National Survey of Children's Health. **Denominator:** The denominator is the number of total indicators in the index (8). **Units:** 100 **Text:** Percent
Healthy People 2020 Objective	Multiple Objectives This state performance measure is related to multiple health objectives from Healthy People 2010. The SPM is also related to the overarching goal of HP 2010 to reduce health disparities.
Data Sources and Data Issues	The indictors for the index measure are derived from the National Survey of Children's Health. Baseline data was established from the 2007 NSCH Survey (NSCH Health Disparities Snapshot). For the indicators selected at baseline, CSHCN and their families were significantly different than children and their families without special health care needs. Since this is a measure based on improvement - reducing the disparties between CSHCN and those without special health care needs, the baseline indicator for 2011 is set at zero (0).
Significance	The reduction and elimination of health disparities among children with special health care needs and their families is an important priority of the Delaware CSHCN Program. This measure is an attempt to capture the effects of the implementation of a "Family Support Network" across a number of domains related to health among this population.

Form Notes for Form 16

None

Field Level Notes

None

FORM 17
HEALTH SYSTEMS CAPACITY INDICATORS
FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA
STATE: DE

Form Level Notes for Form 17

None

HEALTH SYSTEMS CAPACITY #01

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

	Annual Indicator Data				
	2007	**2008**	**2009**	**2010**	**2011**
Annual Indicator	63.2	61.3	82.2	82.2	82.2
Numerator	362	353	478	478	478
Denominator	57,303	57,585	58,137	58,137	58,137
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #01
   Field Name: HSC01
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available at this time. Data reported for 2011 are provisional.

2. **Section Number:** Form17_Health Systems Capacity Indicator #01
   Field Name: HSC01
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 data are not available at this time. Data reported for 2010 are provisional.

3. **Section Number:** Form17_Health Systems Capacity Indicator #01
   Field Name: HSC01
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 Hospital Discharge data.

HEALTH SYSTEMS CAPACITY #02

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen.

	Annual Indicator Data				
	2007	**2008**	**2009**	**2010**	**2011**
Annual Indicator	86.4	89.0	88.9	92.9	92.9
Numerator	5,761	6,143	5,973	4,728	4,728
Denominator	6,666	6,899	6,719	5,090	5,090
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Final	Provisional

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #02
   Field Name: HSC02
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available at this time. The data reported are provisional and based on 2010.

2. **Section Number:** Form17_Health Systems Capacity Indicator #02
   Field Name: HSC02
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   Annual EPSDT Participation Report, Form CMS-416, Fiscal Year 2010, 2/21/2012

3. **Section Number:** Form17_Health Systems Capacity Indicator #02
   Field Name: HSC02
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 Annual EPSDT Participation Report

HEALTH SYSTEMS CAPACITY #03

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	Annual Indicator Data				
	2007	2008	2009	2010	2011
Annual Indicator					
Numerator	0	0	0	0	0
Denominator					
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. *(Explain data in a year note. See Guidance, Appendix IX.)*			Yes	Yes	Yes
Is the Data Provisional or Final?				Final	Final

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #03
   Field Name: HSC03
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   All infants are eligible for Medicaid and therefore do not get SCHIP.

2. **Section Number:** Form17_Health Systems Capacity Indicator #03
   Field Name: HSC03
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   All infants are eligible for Medicaid and therefore do not get SCHIP.

3. **Section Number:** Form17_Health Systems Capacity Indicator #03
   Field Name: HSC03
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   All infants are eligible for Medicaid and therefore do not get SCHIP.

HEALTH SYSTEMS CAPACITY #04

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

	Annual Indicator Data				
	2007	2008	2009	2010	2011
Annual Indicator	68.4	74.8	75.6	75.6	75.6
Numerator	8,256	8,982	8,592	8,592	8,592
Denominator	12,069	12,016	11,369	11,369	11,369
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. *(Explain data in a year note. See Guidance, Appendix IX.)*					
Is the Data Provisional or Final?				Provisional	Provisional

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #04
   Field Name: HSC04
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   Data for 2011 are not available. Provisional estimates are based on 2009.

2. **Section Number:** Form17_Health Systems Capacity Indicator #04
   Field Name: HSC04
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   Data for 2010 are not available. Provisional estimates are based on 2009.

3. **Section Number:** Form17_Health Systems Capacity Indicator #04
   Field Name: HSC04
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 Delaware Vital Statistics Data

HEALTH SYSTEMS CAPACITY #07A

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

	Annual Indicator Data				
	2007	2008	2009	2010	2011
Annual Indicator	94.2	94.3	91.2	96.8	89.8
Numerator	89,704	94,332	96,861	107,430	104,767
Denominator	95,253	100,015	106,259	111,009	116,720
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Final	Final

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #07A
   Field Name: HSC07A
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   Division of Medicaid and Medical Assistance

HEALTH SYSTEMS CAPACITY #07B

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

	Annual Indicator Data				
	2007	2008	2009	2010	2011
Annual Indicator	33.4	49.8	54.4	58.4	58.4
Numerator	5,684	8,880	10,234	11,325	11,325
Denominator	16,996	17,817	18,828	19,391	19,391
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Final	Provisional

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #07B
   Field Name: HSC07B
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available at this time. 2011 data are provisional and based on 2010.

2. **Section Number:** Form17_Health Systems Capacity Indicator #07B
   Field Name: HSC07B
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   Annual EPSDT Participation Report, Form CMS-416, Fiscal Year 2010, 2/21/2012

3. **Section Number:** Form17_Health Systems Capacity Indicator #07B
   Field Name: HSC07B
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 EPSDT Participation Report

HEALTH SYSTEMS CAPACITY #08

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	Annual Indicator Data				
	2007	2008	2009	2010	2011
Annual Indicator	100.0	100.0	100.0	100.0	100.0
Numerator	2,927	3,486	3,577	3,577	3,139
Denominator	2,927	3,486	3,577	3,577	3,139
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. *(Explain data in a year note. See Guidance, Appendix IX.)*					
Is the Data Provisional or Final?				Final	Final

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #08
   Field Name: HSC08
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   Delaware's CSHCN Program funds infrastructure building activities, therefore all children with special health care needs are defined as receiving services.

   Source for number of children receiving federally administered SSI payments: Social Secuity Administration, Supplmental Security Record, December 2011.

2. **Section Number:** Form17_Health Systems Capacity Indicator #08
   Field Name: HSC08
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2009 State SSI Beneficiaries Aged 17 and Under. www.statehealthfacts.org

3. **Section Number:** Form17_Health Systems Capacity Indicator #08
   Field Name: HSC08
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 State SSI Beneficiaries Aged 17 and Under. www.statehealthfacts.org

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #05
(MEDICAID AND NON-MEDICAID COMPARISON)
STATE: DE

INDICATOR #05 ***Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State***	**YEAR**	**DATA SOURCE**	**POPULATION**		
			MEDICAID	**NON-MEDICAID**	**ALL**
a) *Percent of low birth weight (< 2,500 grams)*	2009	Payment source from birth certificate	9.4	7.7	8.6
b) *Infant deaths per 1,000 live births*	2009	Payment source from birth certificate	10.1	6.3	8
c) *Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester*	2009	Payment source from birth certificate	63.9	85.5	74.9
d) *Percent of pregnant women with adequate prenatal care(observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])*	2009	Payment source from birth certificate	66.9	84.5	75.6

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06(MEDICAID ELIGIBILITY LEVEL)
STATE: DE

INDICATOR #06 ***The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.***	**YEAR**	**PERCENT OF POVERTY LEVEL MEDICAID (Valid range: 100-300 percent)**
a) *Infants (0 to 1)*	2011	200
b) *Medicaid Children* (Age range 1 to 5) (Age range 6 to 19) (Age range _____ to _____)	2011	133 100 _____
c) *Pregnant Women*	2011	200

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06(SCHIP ELIGIBILITY LEVEL)
STATE: DE

INDICATOR #06 ***The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.***	**YEAR**	**PERCENT OF POVERTY LEVEL SCHIP**
a) *Infants (0 to 1)*		_____
b) *Medicaid Children* (Age range 1 to 19) (Age range _____ to _____) (Age range _____ to _____)	2011	200 _____ _____
c) *Pregnant Women*		_____

FORM NOTES FOR FORM 18

Delaware Vital Statistics Data

FIELD LEVEL NOTES

1. **Section Number:** Form18_Indicator 06 - SCHIP
   Field Name: SCHIP_Infant
   Row Name: Infants
   Column Name:
   Year: 2013
   Field Note:
   Infants are eligible for Medicaid. Children are not enrolled into SCHIP until age 1.
2. **Section Number:** Form18_Indicator 06 - SCHIP
   Field Name: SCHIP_Women
   Row Name: Pregnant Women
   Column Name:
   Year: 2013
   Field Note:
   Pregnant women receive Medicaid.

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: DE

HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)
(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Informatioin)

DATABASES OR SURVEYS	Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *	Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)
ANNUAL DATA LINKAGES **Annual linkage of infant birth and infant death certificates**	3	Yes
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	2	Yes
Annual linkage of birth certificates and WIC eligibility files	2	No
Annual linkage of birth certificates and newborn screening files	3	Yes
REGISTRIES AND SURVEYS **Hospital discharge survey for at least 90% of in-State discharges**	3	Yes
Annual birth defects surveillance system	3	Yes
Survey of recent mothers at least every two years (like PRAMS)	3	Yes

*Where:
1 = No, the MCH agency does not have this ability.
2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.
3 = Yes, the MCH agency always has this ability.

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: DE

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	Yes
Other: _____		
_____		
_____		

*Where:
1 = No
2 = Yes, the State participates but the sample size is not large enough for valid statewide estimates for this age group.
3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

Notes:

1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

Form Notes for Form 19

None

Field Level Notes

None

FORM 20
HEALTH STATUS INDICATORS #01-#05
MULTI-YEAR DATA
STATE: DE

Form Level Notes for Form 20

None

HEALTH STATUS INDICATOR #01A

The percent of live births weighing less than 2,500 grams.

	Annual Indicator Data				
	2007	**2008**	**2009**	**2010**	**2011**
Annual Indicator	9.2	8.5	8.6	8.6	8.6
Numerator	1,118	1,020	978	978	978
Denominator	12,097	12,016	11,369	11,369	11,369
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #01A
   Field Name: HSI01A
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available at this time. Data reported for 2011 are provisional.

2. **Section Number:** Form20_Health Status Indicator #01A
   Field Name: HSI01A
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 data are not available at this time. Data reported for 2010 are provisional.

3. **Section Number:** Form20_Health Status Indicator #01A
   Field Name: HSI01A
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 Delaware Vital Statistics Data

HEALTH STATUS INDICATOR #01B

The percent of live singleton births weighing less than 2,500 grams.

	Annual Indicator Data				
	2007	**2008**	**2009**	**2010**	**2011**
Annual Indicator	7.6	6.8	7.1	7.1	7.1
Numerator	885	785	778	778	778
Denominator	11,712	11,590	10,975	10,975	10,975
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #01B
   Field Name: HSI01B
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available at this time. Data reported for 2011 are provisional.

2. **Section Number:** Form20_Health Status Indicator #01B
   Field Name: HSI01B
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 data are not available at this time. Data reported for 2010 are provisional.

3. **Section Number:** Form20_Health Status Indicator #01B
   Field Name: HSI01B
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 Delaware Vital Statistics Data

HEALTH STATUS INDICATOR #02A

The percent of live births weighing less than 1,500 grams.

	Annual Indicator Data				
	2007	**2008**	**2009**	**2010**	**2011**
Annual Indicator	1.7	1.8	1.9	1.9	1.9
Numerator	201	222	211	211	211
Denominator	12,097	12,016	11,369	11,369	11,369
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #02A
   Field Name: HSI02A
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available at this time. Data reported for 2011 are provisional.

2. **Section Number:** Form20_Health Status Indicator #02A
   Field Name: HSI02A
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 data are not available at this time. Data reported for 2010 are provisional.

3. **Section Number:** Form20_Health Status Indicator #02A
   Field Name: HSI02A
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 Delaware Vital Statistics Data

HEALTH STATUS INDICATOR #02B

The percent of live singleton births weighing less than 1,500 grams.

	Annual Indicator Data				
	2007	**2008**	**2009**	**2010**	**2011**
Annual Indicator	1.3	1.4	1.6	1.6	1.6
Numerator	149	164	171	171	171
Denominator	11,712	11,590	10,975	10,975	10,975
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #02B
   Field Name: HSI02B
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available at this time. Data reported for 2011 are provisional.

2. **Section Number:** Form20_Health Status Indicator #02B
   Field Name: HSI02B
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 data are not available at this time. Data reported for 2010 are provisional.

3. **Section Number:** Form20_Health Status Indicator #02B
   Field Name: HSI02B
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 Delaware Vital Statistics Data

HEALTH STATUS INDICATOR #03A

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

	Annual Indicator Data				
	2007	**2008**	**2009**	**2010**	**2011**
Annual Indicator	3.6	6.5	6.1	6.1	6.1
Numerator	6	11	31	31	31
Denominator	168,487	168,041	506,490	506,490	506,490
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #03A
   Field Name: HSI03A
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available at this time. Data reported for 2011 are provisional.

   Data are based on 2007-2009 Delaware Vital Statistics Data. Due to Low Numbers, this Indicator is being reported as a three year rate.

2. **Section Number:** Form20_Health Status Indicator #03A
   Field Name: HSI03A
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 data are not available at this time. Data reported for 2010 are provisional.

   Data are based on 2007-2009 Delaware Vital Statistics Data. Due to Low Numbers, this Indicator is being reported as a three year rate.

3. **Section Number:** Form20_Health Status Indicator #03A
   Field Name: HSI03A
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2007-2009 Delaware Vital Statistics Data. Due to Low Numbers, this Indicator is being reported as a three year rate.

HEALTH STATUS INDICATOR #03B

The death rate per 100,000 for unintentional injuries among children aged 14 years and younger due to motor vehicle crashes.

	Annual Indicator Data				
	2007	**2008**	**2009**	**2010**	**2011**
Annual Indicator	1.2	3.6	3.2	3.2	3.2
Numerator	2	6	16	16	16
Denominator	168,487	168,041	506,490	506,490	506,490
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #03B
   Field Name: HSI03B
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available at this time. Data reported for 2011 are provisional.

   2007-2009. Due to low numbers, indicator is reported as a three year moving average.

2. **Section Number:** Form20_Health Status Indicator #03B
   Field Name: HSI03B
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 data are not available at this time. Data reported for 2010 are provisional.

3. **Section Number:** Form20_Health Status Indicator #03B
   Field Name: HSI03B
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2007-2009 Delaware Vital Statistics Data. Due to low numbers, indicator is reported as a three year moving average.

HEALTH STATUS INDICATOR #03C

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	Annual Indicator Data				
	2007	**2008**	**2009**	**2010**	**2011**
Annual Indicator	28.3	18.9	20.8	20.8	20.8
Numerator	33	22	73	73	73
Denominator	116,509	116,614	351,240	351,240	351,240
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #03C
   Field Name: HSI03C
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available at this time. Data reported for 2011 are provisional.

   2007-2009. Due to low numbers, inidicator is being reported as a three year moving average.

2. **Section Number:** Form20_Health Status Indicator #03C
   Field Name: HSI03C
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 data are not available at this time. Data reported for 2010 are provisional.

   2007-2009. Due to low numbers, inidicator is being reported as a three year moving average.

3. **Section Number:** Form20_Health Status Indicator #03C
   Field Name: HSI03C
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 Delaware Vital Statistics Data

HEALTH STATUS INDICATOR #04A

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

	Annual Indicator Data				
	2007	**2008**	**2009**	**2010**	**2011**
Annual Indicator	3.6	387.4	343.0	343.0	343.0
Numerator	6	651	583	583	583
Denominator	168,487	168,041	169,962	169,962	169,962
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #04A
   Field Name: HSI04A
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available at this time. Data reported for 2011 are provisional.

2. **Section Number:** Form20_Health Status Indicator #04A
   Field Name: HSI04A
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 data are not available at this time. Data reported for 2010 are provisional.

   NOTE: Historical Information from 2006-2007 is incorrect.

3. **Section Number:** Form20_Health Status Indicator #04A
   Field Name: HSI04A
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 Delaware Vital Statistics Data.

   NOTE: Historical Information from 2006-2007 is incorrect.

HEALTH STATUS INDICATOR #04B

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

	Annual Indicator Data				
	2007	**2008**	**2009**	**2010**	**2011**
Annual Indicator	1.2	32.1	30.6	30.6	30.6
Numerator	2	54	52	52	52
Denominator	168,487	168,041	169,962	169,962	169,962
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #04B
   Field Name: HSI04B
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2010 data are not available at this time. Data reported for 2010 are provisional.

2. **Section Number:** Form20_Health Status Indicator #04B
   Field Name: HSI04B
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 data are not available at this time. Data reported for 2010 are provisional.

   NOTE: Historical Information from 2006-2007 is incorrect.

3. **Section Number:** Form20_Health Status Indicator #04B
   Field Name: HSI04B
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 Delaware Vital Statistics Data.

   NOTE: Historical Information from 2006-2007 is incorrect.

HEALTH STATUS INDICATOR #04C

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	Annual Indicator Data				
	2007	**2008**	**2009**	**2010**	**2011**
Annual Indicator	176.0	159.5	133.8	133.8	133.8
Numerator	205	186	158	158	158
Denominator	116,509	116,614	118,117	118,117	118,117
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Provisional	Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #04C
   Field Name: HSI04C
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 data are not available at this time. Data reported for 2011 are provisional.

2. **Section Number:** Form20_Health Status Indicator #04C
   Field Name: HSI04C
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   2010 data are not available at this time. Data reported for 2010 are provisional.

3. **Section Number:** Form20_Health Status Indicator #04C
   Field Name: HSI04C
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 Delaware Vital Statistics Data.

HEALTH STATUS INDICATOR #05A

The rate per 1,000 women aged 15 through 19 years with a reported case of chlamydia.

	Annual Indicator Data				
	2007	**2008**	**2009**	**2010**	**2011**
Annual Indicator	34.0	47.6	56.2	55.6	53.2
Numerator	1,000	1,392	1,648	1,609	1,561
Denominator	29,397	29,252	29,299	28,955	29,342
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Final	Final

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #05A
   Field Name: HSI05A
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 Reported Clyamydia Cases (numerator). Population projections 2011 - Women 15-19 year olds.

2. **Section Number:** Form20_Health Status Indicator #05A
   Field Name: HSI05A
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   Number of reported cases of chlamydia in 2010. Projected number of 15-19 year women for 2010.

3. **Section Number:** Form20_Health Status Indicator #05A
   Field Name: HSI05A
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   Number of reported cases of chlamydia in 2009. Projected number of 15-19 year women for 2009.

HEALTH STATUS INDICATOR #05B

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

	Annual Indicator Data				
	2007	**2008**	**2009**	**2010**	**2011**
Annual Indicator	10.3	11.5	11.5	13.3	
Numerator	1,499	1,655	1,655	1,916	
Denominator	145,178	144,325	144,325	144,539	
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. ***(Explain data in a year note. See Guidance, Appendix IX.)***					
Is the Data Provisional or Final?				Final	

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #05B
   Field Name: HSI05B
   Row Name:
   Column Name:
   Year: 2011
   Field Note:
   2011 Reported Cases of Chlamydia among women 20-44 years of age. 2011 population projections (Women 20-44).

2. **Section Number:** Form20_Health Status Indicator #05B
   Field Name: HSI05B
   Row Name:
   Column Name:
   Year: 2010
   Field Note:
   Number of reported cases of chlamydia in 2010. Projected number of 20-44 year women for 2010.

3. **Section Number:** Form20_Health Status Indicator #05B
   Field Name: HSI05B
   Row Name:
   Column Name:
   Year: 2009
   Field Note:
   2009 data are not available.

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: DE

HSI #06A - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics)*

For both parts A and B: Reporting Year: 2010 Is this data from a State Projection? No Is this data final or provisional? Final

CATEGORY TOTAL POPULATION BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	11,177	6,235	2,847	65	417	6	894	713
Children 1 through 4	44,709	24,939	11,390	260	1,667	23	3,576	2,854
Children 5 through 9	56,489	32,575	14,610	289	2,036	40	3,736	3,203
Children 10 through 14	56,844	34,008	15,292	271	1,655	27	2,994	2,597
Children 15 through 19	64,583	39,932	17,319	332	1,800	28	2,538	2,634
Children 20 through 24	62,867	40,801	14,879	298	2,021	48	1,750	3,070
Children 0 through 24	296,669	178,490	76,337	1,515	9,596	172	15,488	15,071

HSI #06B - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	9,371	1,806	0
Children 1 through 4	37,483	7,226	0
Children 5 through 9	57,608	7,881	0
Children 10 through 14	50,391	6,453	0
Children 15 through 19	58,124	6,459	0
Children 20 through 24	55,831	7,036	0
Children 0 through 24	268,808	36,861	0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: DE

HSI #07A - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and race. (Demographics)*

For both parts A and B: Reporting Year: 2009 Is this data from a State Projection? No Is this data final or provisional? Final

CATEGORY TOTAL LIVE BIRTHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Women < 15	18	10	8	0	0	0	0	0
Women 15 through 17	308	156	148	0	1	0	0	3
Women 18 through 19	759	424	326	2	3	0	0	4
Women 20 through 34	8,736	5,903	2,332	22	395	4	0	80
Women 35 or older	1,548	1,080	364	1	99	0	0	4
Women of all ages	11,369	7,573	3,178	25	498	4	0	91

HSI #07B - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Women < 15	11	7	0
Women 15 through 17	244	64	0
Women 18 through 19	607	152	0
Women 20 through 34	7,441	1,295	0
Women 35 or older	1,407	1,659	0
Women of all ages	9,710	3,177	0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: DE

HSI #08A - Demographics (Total deaths) *Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics)*

For both parts A and B: Reporting Year: 2009 Is this data from a State Projection? No Is this data final or provisional? Final

CATEGORY TOTAL DEATHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	91	30	54	0	0	0	1	6
Children 1 through 4	7	3	4	0	0	0	0	0
Children 5 through 9	10	9	1	0	0	0	0	0
Children 10 through 14	10	8	2	0	0	0	0	0
Children 15 through 19	38	18	20	0	0	0	0	0
Children 20 through 24	54	39	15	0	0	0	0	0
Children 0 through 24	210	107	96	0	0	0	1	6

HSI #08B - Demographics (Total deaths) *Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)*

CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	83	8	0
Children 1 through 4	5	2	0
Children 5 through 9	9	1	0
Children 10 through 14	9	1	0
Children 15 through 19	36	2	0
Children 20 through 24	50	4	0
Children 0 through 24	192	18	0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: DE

HSI #09A - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

Is this data final or provisional? Provisional

CATEGORY Miscellaneous Data BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown	Specific Reporting Year
All children 0 through 19	233,803	137,686	61,458	1,217	7,575	128	13,738	12,001	2010
Percent in household headed by single parent	36.6	36.6	36.6	36.6	36.6	36.6	36.6	36.6	2011
Percent in TANF (Grant) families	100.0	24.0	65.8	0.0	0.1	0.0	0.0	10.1	2008
Number enrolled in Medicaid	107,585	39,393	44,975	204	1,683	0	0	21,330	2011
Number enrolled in SCHIP	13,357	5,525	4,624	19	292	0	0	2,897	2011
Number living in foster home care	1,251	350	726	0	0	0	63	112	2011
Number enrolled in food stamp program	60,788	29,999	27,260	183	365	0	1,399	1,582	2010
Number enrolled in WIC	18,904	5,119	6,826	33	237	16	0	6,673	2011
Rate (per 100,000) of juvenile crime arrests	200.0	200.0	200.0	200.0	200.0	200.0	200.0	200.0	2010
Percentage of high school drop-outs (grade 9 through 12)	3.7	2.8	5.1	3.7	3.7	3.7	3.7	3.7	2011

HSI #09B - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity.(Demographics)*

CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported	Specific Reporting Year
All children 0 through 19	203,978	29,825	0	2010
Percent in household headed by single parent	36.6	36.6	36.6	2011
Percent in TANF (Grant) families	92.3	9.7	0.0	2008
Number enrolled in Medicaid	86,255	21,330	0	2011
Number enrolled in SCHIP	10,460	2,897	0	2011
Number living in foster home care	1,151	100	0	2011
Number enrolled in food stamp program	54,162	6,626	0	2010
Number enrolled in WIC	15,302	3,602	0	2011
Rate (per 100,000) of juvenile crime arrests	200.0	200.0	200.0	2010
Percentage of high school drop-outs (grade 9 through 12)	3.7	4.4	3.7	2011

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: DE

HSI #10 - Demographics (Geographic Living Area) *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: 2010 Is this data from a State Projection? Yes Is this data final or provisional? Provisional

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	0
Living in urban areas	153,785
Living in rural areas	80,018
Living in frontier areas	0
Total - all children 0 through 19	233,803

Note:
The Total will be determined by adding reported numbers for urban, rural and frontier areas.

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: DE

HSI #11 - Demographics (Poverty Levels) *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2010 Is this data from a State Projection? No Is this data final or provisional? Final

POVERTY LEVELS	TOTAL
Total Population	874,321
Percent Below: 50% of poverty	5.4
100% of poverty	11.8
200% of poverty	27.8

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: DE

HSI #12 - Demographics (Poverty Levels) *Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2010 Is this data from a State Projection? No Is this data final or provisional? Final

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	233,803
Percent Below: 50% of poverty	11.6
100% of poverty	18.1
200% of poverty	34

Form Notes for Form 21

2010 U.S. Census applied to Population Projections. Urban includes the areas of New Castle County, including Wilmington and the City of Dover. Rural includes Kent County, excluding Dover and Sussex County.

Field Level Notes

1. **Section Number:** Form21_Indicator 09A
   Field Name: HSIRace_Children
   Row Name: All children 0 through 19
   Column Name:
   Year: 2013
   Field Note:
   2010 U.S. Census Data

2. **Section Number:** Form21_Indicator 09A
   Field Name: HSIRace_SingleParentPercent
   Row Name: Percent in household headed by single parent
   Column Name:
   Year: 2013
   Field Note:
   Percent of Children in One Parent Families (2009-2011). University of Delaware Center for Applied Demography as reported in 2012 Kids Count. Race/Ethnic specific data are not available.

3. **Section Number:** Form21_Indicator 09A
   Field Name: HSIRace_TANFPercent
   Row Name: Percent in TANF (Grant) families
   Column Name:
   Year: 2013
   Field Note:
   TANF 9th Annual Report to Congress, May 2012;
   http://www.acf.hhs.gov/programs/ofa/data-reports/annualreport9/ar9index.htm

4. **Section Number:** Form21_Indicator 09A
   Field Name: HSIRace_MedicaidNo
   Row Name: Number enrolled in Medicaid
   Column Name:
   Year: 2013
   Field Note:
   Other Includes Hispanics.

5. **Section Number:** Form21_Indicator 09A
   Field Name: HSIRace_SCHIPNo
   Row Name: Number enrolled in SCHIP
   Column Name:
   Year: 2013
   Field Note:
   Other Includes Hispanics.

6. **Section Number:** Form21_Indicator 09A
   Field Name: HSIRace_FoodStampNo
   Row Name: Number enrolled in food stamp program
   Column Name:
   Year: 2013
   Field Note:
   August 2010 SNAP enrollment as reported by 2012 DE KIDS Count and applied to estimated racial/ethnic distribution based on FDA Characteristics of SNAP Households for DE Congressional District (at Large), September 2011 - http://www.fns.usda.gov/ora/SNAPCharacteristics/Delaware/Delaware.pdf

7. **Section Number:** Form21_Indicator 09A
   Field Name: HSIRace_WICNo
   Row Name: Number enrolled in WIC
   Column Name:
   Year: 2013
   Field Note:
   Children and infants enrolled in WIC, April 2012 applied to race/ethnic distribution of mothers enrolled in WIC.

8. **Section Number:** Form21_Indicator 09A
   Field Name: HSIRace_JuvenileCrimeRate
   Row Name: Rate (per 100,000) of juvenile crime arrests
   Column Name:
   Year: 2013
   Field Note:
   Juvenile Class A Offenses per 100,000 population include Juvenile Violent Crimes, Drug and Narcotics, and Other Social and property crimes (2010) as reported in KIDS Count, 2012. Data by Race/Ethicity are not available.

9. **Section Number:** Form21_Indicator 09A
   Field Name: HSIRace_DropOutPercent
   Row Name: Percentage of high school drop-outs (grade 9 through 12)
   Column Name:
   Year: 2013
   Field Note:
   Drop-Out data is reported by the Department of Education for White, Black, Hispanic and all. The percent of drop-out for all other categories is unknown and estimated at the general rate for "All" (3.7%).

10. **Section Number:** Form21_Indicator 09B
    Field Name: HSIEthnicity_Children
    Row Name: All children 0 through 19
    Column Name:
    Year: 2013
    Field Note:
    2010 U.S. Census

11. **Section Number:** Form21_Indicator 09B

Field Name: HSIEthnicity_SingleParentPercent
Row Name: Percent in household headed by single parent
Column Name:
Year: 2013
Field Note:
Percent of Children in One Parent Families (2009-2011). University of Delaware Center for Applied Demography as reported in 2012 Kids Count. Race/Ethnic specific data are not available.

12. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_TANFPercent
Row Name: Percent in TANF (Grant) families
Column Name:
Year: 2013
Field Note:
TANF 9th Annual Report to Congress, May 2012;
http://www.acf.hhs.gov/programs/ofa/data-reports/annualreport9/ar9index.htm

13. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_FoodStampNo
Row Name: Number enrolled in food stamp program
Column Name:
Year: 2013
Field Note:
August 2010 SNAP enrollment as reported by 2012 DE KIDS Count and applied to estimated racial/ethnic distribution based on FDA Characteristics of SNAP Households for DE Congressional District (at Large), September 2011 - http://www.fns.usda.gov/ora/SNAPCharacteristics/Delaware/Delaware.pdf

14. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_WICNo
Row Name: Number enrolled in WIC
Column Name:
Year: 2013
Field Note:
Children and infants enrolled in WIC, April 2012 applied to race/ethnic distribution of mothers enrolled in WIC.

15. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_JuvenileCrimeRate
Row Name: Rate (per 100,000) of juvenile crime arrests
Column Name:
Year: 2013
Field Note:
Juvenile Class A Offenses per 100,000 population include Juvenile Violent Crimes, Drug and Narcotics, and Other Social and property crimes (2010) as reported in KIDS Count, 2012. Data by Race/Ethicity are not available.

16. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_DropOutPercent
Row Name: Percentage of high school drop-outs (grade 9 through 12)
Column Name:
Year: 2013
Field Note:
Drop-Out data is reported by the Department of Education for White, Black, Hispanic and all. The percent of drop-out for all other categories is unknown and estimated at the general rate for "All" (3.7%).

17. **Section Number:** Form21_Indicator 11
Field Name: S11_total
Row Name: Total Population
Column Name:
Year: 2013
Field Note:
Source: U.S. Census Bureau. Poverty Status in the Past 12 Months, 2010 American Community Survey 1-Year Estimates.

18. **Section Number:** Form21_Indicator 11
Field Name: S11_50percent
Row Name: Percent Below: 50% of poverty
Column Name:
Year: 2013
Field Note:
Source: U.S. Census Bureau. Poverty Status in the Past 12 Months, 2010 American Community Survey 1-Year Estimates.

19. **Section Number:** Form21_Indicator 11
Field Name: S11_100percent
Row Name: 100% of poverty
Column Name:
Year: 2013
Field Note:
Source: U.S. Census Bureau. Poverty Status in the Past 12 Months, 2010 American Community Survey 1-Year Estimates.

20. **Section Number:** Form21_Indicator 11
Field Name: S11_200percent
Row Name: 200% of poverty
Column Name:
Year: 2013
Field Note:
Source: U.S. Census Bureau. Poverty Status in the Past 12 Months, 2010 American Community Survey 1-Year Estimates.

21. **Section Number:** Form21_Indicator 12
Field Name: S12_Children
Row Name: Children 0 through 19 years old
Column Name:
Year: 2013
Field Note:
Source: U.S. Census Bureau. Poverty Status in the Past 12 Months, 2010 American Community Survey 1-Year Estimates. Children Under 18 Years of Age.

22. **Section Number:** Form21_Indicator 12

Field Name: S12_50percent
Row Name: Percent Below: 50% of poverty
Column Name:
Year: 2013
Field Note:
Estimate.

23. **Section Number:** Form21_Indicator 12
Field Name: S12_100percent
Row Name: 100% of poverty
Column Name:
Year: 2013
Field Note:
Source: U.S. Census Bureau. Poverty Status in the Past 12 Months, 2010 American Community Survey 1-Year Estimates. Children Under 18 Years of Age.

24. **Section Number:** Form21_Indicator 12
Field Name: S12_200percent
Row Name: 200% of poverty
Column Name:
Year: 2013
Field Note:
Estimate.

25. **Section Number:** Form21_Indicator 09A
Field Name: HSIRace_FosterCare
Row Name: Number living in foster home care
Column Name:
Year: 2013
Field Note:
1251 Children were living in foster care in 2011. Numbers by race and ethnicity are estimated based on distributions reported by KIDs Count Data Center

http://datacenter.kidscount.org/data/acrossstates/Rankings.aspx?ind=6246

26. **Section Number:** Form21_Indicator 09B
Field Name: HSIEthnicity_FosterCare
Row Name: Number living in foster home care
Column Name:
Year: 2013
Field Note:
1251 Children were living in foster care in 2011. Numbers by race and ethnicity are estimated based on distributions reported by KIDs Count Data Center

http://datacenter.kidscount.org/data/acrossstates/Rankings.aspx?ind=6246