



# Incorporating Nutrition into the Title V MCH Services Block Grant National Performance Measures

**S**ince its original authorization in 1935, Title V of the Social Security Act has been amended several times to reflect an ongoing commitment to improving the health and well-being of our Nation's mothers, children and their families. The most recent revision was released October 2014. This revision included a transformed national performance measurement system that is intended to show more clearly the contributions of Title V programs in impacting health outcomes.



The revised national performance measurement system is a three-tiered framework, which includes National Outcome Measures (NOMs), National Performance Measures (NPMs) and State-initiated Evidence-based or -informed Strategy Measures (ESMs). The ESMs are developed by the state, and provide accountability for improving quality and performance related to the NPMs and to the MCH public health issues.

Because there is no national nutrition data source that can be broken out at the state level, none of the revised NPMs address nutrition issues. Nutrition strategies can impact most NPMs at the ESM level. This document lists the revised NPMs and suggests nutrition related ESMs.

# Women's Health

## NATIONAL PERFORMANCE MEASURE

# 1

### Percent of women with a past year preventive medical visit

#### GOAL

To increase the number of women who have a preventive visit

#### EVIDENCE BASED OR INFORMED STRATEGIES

##### Ensure nutrition components are required in preventive visit **standard of care**

- **Folic Acid** supplements for women who may become pregnant
- Eating habits and physical activity
- Eating disorders
- Food security
- Use of alcohol, tobacco, and other drugs
- Measuring height and weight
- Calculating body mass index (BMI)
- Checking blood pressure

##### Ensure access to appropriate nutrition referrals

- Standard referral criteria
- Approved referral provider defined as a registered dietitian or nutrition professional who meets certain requirements

## Women's Health

NATIONAL  
PERFORMANCE  
MEASURE

2

Percent of cesarean deliveries among  
low-risk first births

### GOAL

To reduce the number of cesarean deliveries  
among low-risk first births

### EVIDENCE BASED OR INFORMED STRATEGIES

Improve awareness and identification for nutrition  
related indicators for cesarean sections

- Increase percentage of women who enter pregnancy at a healthy body mass index (BMI)  
**Rationale: Increasing BMI was associated with increased risk for cesarean delivery**
- Appropriate weight gain during pregnancy  
**Rationale: The risk of cesarean delivery increases linearly with pregnancy weight gain, independent of birth weight**  
**Rationale: The risk of cesarean delivery reduced by healthy prepregnancy weight and appropriate weight gain**
- Identify and control for Gestation Diabetes Mellitus
  - **Screening for gestational diabetes mellitus (GDM)** in asymptomatic pregnant women after 24 weeks of gestation
  - Medical Nutrition Therapy (MNT) referral for positive screens
- **Hypertension**
- **Pre-existing diabetes**

## Perinatal/Infant Health

NATIONAL  
PERFORMANCE  
MEASURE

3

Percent of of very low birth weight (VLBW) infants born in a hospital with a Level III+ Neonatal Intensive Care Unit (NICU)

### GOAL

To ensure that higher risk mothers and newborns deliver at appropriate level hospitals

### EVIDENCE BASED OR INFORMED STRATEGIES

Increased awareness of nutrition related indicators in high risk of pre-term delivery

- Increase percentage of women who enter pregnancy at a healthy BMI  
**Rationale: Preterm birth consistently associated with low maternal pre-pregnancy weight**
- Appropriate weight gain during pregnancy  
**Rationale: Low weight gain in pregnancy was associated with increased risk of preterm delivery**, particularly if women were underweight or of average weight before pregnancy.
- **Hypertension**

# Perinatal/Infant Health

## NATIONAL PERFORMANCE MEASURE

# 4

- A) Percent of infants who are ever breastfed and
- B) Percent of infants breastfed exclusively through 6 months

### GOAL

To increase the proportion of infants who are breastfed and who are breastfed at six months

### EVIDENCE BASED OR INFORMED STRATEGIES

#### Promote, protect and support breastfeeding

- Increasing “Breastfeeding Friendly” hospitals
- Improving maternity care practices in birthing facilities, such as Ten Steps to Successful Breastfeeding or the Baby-Friendly Hospital Initiative.
- Access to professional support (statewide referral and resources; linkages between birthing facilities and community resources; collaborate with state Medicaid and insurance for coverage)
- Access to peer support
- Support for breastfeeding in the workplace (ensure compliance with workplace accommodation law, enhance lactation support programs) and all facilities that deliver infants
- Support for breastfeeding in early care and education (promote inclusion of breastfeeding support in licensing standards and Quality Rating Improvement Systems, support model breastfeeding policies for families served and breastfeeding employees, facilitate training of Early Care and Education (ECE) providers on how to support breastfeeding families and handling breastmilk)
- Access to breastfeeding education and information (integrate education into public health programs that serve new families, facilitate access to education in the community)
- Promote a breastfeeding-friendly culture (social marketing campaigns, address marketing of breast milk substitutes)
- [The CDC Guide to Strategies to Support Breastfeeding Mothers and Babies](#)

## Perinatal/Infant Health

NATIONAL  
PERFORMANCE  
MEASURE

5

Percent of infants placed to sleep on their backs

### GOAL

To increase the number of infants placed to sleep on their backs

### EVIDENCE BASED OR INFORMED STRATEGIES

Include **safe sleep messages** in efforts to promote breastfeeding

## Child Health

### NATIONAL PERFORMANCE MEASURE

# 6

Percent of children, ages 10 through 71 months, receiving a developmental screening using a parent-completed screening tool

### GOAL

To increase the number of children who receive a developmental screening

### EVIDENCE BASED OR INFORMED STRATEGIES

#### Ensure screening tool includes nutrition components

- Adequacy of feeding
- Appropriate feeding methods
- Access to age appropriate foods
- Family food security
- Attainment of age appropriate feeding milestones

#### Ensure access to appropriate nutrition referrals

- Standard referral criteria
- Approved referral provider defined as a registered dietitian or nutrition professional who meets certain requirements

# Child Health and/or Adolescent Health

NATIONAL  
PERFORMANCE  
MEASURE

7

Rate of hospitalization for non-fatal injury per 100,000 children ages 0 through 9 and adolescents ages 10 through 19

## GOAL

To decrease the number of injury-related hospital admissions among children ages 0 through 19 years

## EVIDENCE BASED OR INFORMED STRATEGIES

Educational efforts/campaigns to reduce accidental poisoning

- Caffeine overdoses related to energy drinks
- Keep vitamin/iron supplements out a reach of children
- Education on hazards of supplements that look like candy

Education efforts/campaigns to reduce choking risks

Early identification and treatment for allergies

# Child Health and/or Adolescent Health

NATIONAL  
PERFORMANCE  
MEASURE

8

Percent of children ages 6 through 11 and adolescents ages 12 through 17 who are physically active at least 60 minutes per day

## GOAL

To increase the number of children and adolescents who are physically active

## EVIDENCE BASED OR INFORMED STRATEGIES

Engage school wellness councils and other groups to advocate for district- and/or state-level physical activity and obesity prevention policy in schools, including early care and education and afterschool programs.

[Bright Futures in Practice: Physical Activity](#)

# Adolescent Health

NATIONAL  
PERFORMANCE  
MEASURE

9

Percent of adolescents, ages 12 through 17, who are bullied or who bully others

## GOAL

To reduce the number of adolescents who are bullied

## EVIDENCE BASED OR INFORMED STRATEGIES

### Linkage between weight bias and bullying

- [Weight Bias is a Major Reason that Students are Bullied in Schools: A Fact Sheet on School Climate](#)
- [Nature, extent and remedies for weight based bullying](#)
- Programs to support size diversity and acceptance
- Programs to support weight normalization for adolescents

# Adolescent Health

NATIONAL  
PERFORMANCE  
MEASURE

10

Percent of adolescents with a preventive medical visit in the past year

## GOAL

To increase the number of adolescents who have a preventive services visit

## EVIDENCE BASED OR INFORMED STRATEGIES

Ensure nutrition components required in preventive visit standard of care.

- Conducting serial growth measurements and plotting on age and sex appropriate grids to monitor growth patterns
- **Folic Acid** supplements for females who may become pregnant
- Eating habits and physical activity
- Eating disorders
- Food security
- Use of alcohol, tobacco, and other drugs
- Checking blood pressure

Ensure access to appropriate nutrition referrals

- Develop standard referral criteria
  - **Key indicators of nutrition risk identified in Bright Futures: Nutrition 3rd Edition**
  - **Bright Futures: Nutrition and Pocket Guide**
- Approved referral provider defined as a registered dietitian or nutrition professional who meets certain requirements

# Children with Special Health Care Needs

NATIONAL  
PERFORMANCE  
MEASURE

11

Percent of children with and without special health care needs having a medical home

## GOAL

To increase the number of children with and without special health care needs who have a medical home

## EVIDENCE BASED OR INFORMED STRATEGIES

Ensuring nutrition screening and services are included in care coordination.

### Ensure access to appropriate nutrition referrals

- Develop standard referral criteria
- Approved referral provider defined as a registered dietitian or nutrition professional who meets certain requirements

## Children with Special Health Care Needs

NATIONAL  
PERFORMANCE  
MEASURE

12

Percent of adolescents with and without special health care needs who received services necessary to make transitions to adult health care

### GOAL

To increase the percent of youth with and without special health care needs who have received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence

### EVIDENCE BASED OR INFORMED STRATEGIES

Ensure nutrition related services are included in the core services

- Knowledge to acquire and prepare nutritious meals
- Appropriate referrals for nutrition needs
- Ensure life long access to metabolic formula for inborn errors of metabolism
- [Phenylalanine hydroxylase deficiency management guidelines](#)

## Cross-cutting/Life Course

NATIONAL  
PERFORMANCE  
MEASURE

13

- A) Percent of women who had a dental visit during pregnancy and
- B) Percent of children, ages 1 to 17, who had a preventive dental visit in the past year

### GOAL

- A) To increase the number of pregnant women who have a dental visit and
- B) To increase the number of infants and children, ages 1 through 17 years, who had a preventive dental visit in the last year

### EVIDENCE BASED OR INFORMED STRATEGIES

**Emphasize nutrition and dietary aspects directly linked with oral health.**

- Promote breastfeeding. Among other important health benefits, breastmilk prevents the occurrence of rampant early childhood caries. Early childhood caries is caused by frequent and prolonged exposure of the teeth to sugar and is often the result of a child going to bed with a bottle of a sweetened drink or drinking at will from a bottle during the day.
- Decreased consumption of sugary drinks
- Advocate a healthy diet which can also help prevent oral cancer. Fresh yellow-green fruits and vegetables have been identified as beneficial as are vitamin A, C and E supplements.
- [WHO Risks to Oral Health and Intervention](#)

**Appropriate referrals for nutrition needs identified during preventive dental visit**

## Cross-cutting/Life Course

### NATIONAL PERFORMANCE MEASURE

# 14

A) Percent of women who smoke during pregnancy and  
B) Percent of children who live in households where  
someone smokes

### GOAL

- A) To decrease the number of women who smoke during pregnancy and  
B) To decrease the number of households where someone smokes

### EVIDENCE BASED OR INFORMED STRATEGIES

**Smoking as weight control measure (especially adolescent girls). Fear of gaining weight with smoking cessation.**

- Inclusion of nutrition and physical activity counseling in smoking cessation programs to ameliorate risk of weight gain
- Increase access for pregnant and post-partum women to Nicotine Replacement Therapy (NRT) through the Quit Line or health insurance benefits. Cessation aides like NRT, appear to be effective in delaying **post-cessation weight gain**.
- Breastfeeding as a protective factor against increases in smoking after childbirth. Shisler, S., Homish, G.G., Molanr, D.S., Schuetze, P., Colder, C.R., Eiden, R.D. **Predictors of Changes in Smoking From Third Trimester to 9 Months Postpartum**. Nicotine Tob Res (2015)doi: 10.1093/ntr/ntv057

## Cross-cutting/Life Course

NATIONAL  
PERFORMANCE  
MEASURE

15

Percent of children ages 0 through 17 who are adequately insured

### GOAL

To increase the number of children who are adequately insured

### EVIDENCE BASED OR INFORMED STRATEGIES

**Ensure nutrition components required in preventive visit standard of care.**

Work to ensure adequately insured definition includes age appropriate nutrition assessment and referral

- Conducting serial growth measurements and plotting on age and sex appropriate grids to monitor growth patterns
- **Folic Acid** supplements for females who may become pregnant
- Eating habits and physical activity
- Eating disorders
- Food security
- Use of alcohol, tobacco, and other drugs
- Checking blood pressure

Coverage for age appropriate nutrition assessment/referrals

- **Adolescent nutrition screening, assessment and intervention**
- Approved referral provider defined as a registered dietitian or nutrition professional who meets certain requirements



## About the Association of State Public Health Nutritionists

Founded in 1952, the Association of State Public Health Nutritionists (ASPHN) is a non-profit membership organization that provides state and national leadership on food and nutrition policy, programs and services aimed at improving the health of our population. ASPHN's membership is comprised of over 250 public health nutritionists located throughout all 50 states, the District of Columbia and five U.S. territories. As we celebrate over 60 years of service, our vision is to create new environmental norms where healthy eating and active living are the easy and natural choices for all Americans.

ASPHN can be found on the Web at [www.asphn.org](http://www.asphn.org) and on Facebook at [www.facebook.com/asphn](https://www.facebook.com/asphn).



**ASPHN**  
Advancing Health Through Leadership

Association of State Public Health Nutritionists  
P.O. Box 1001 • Johnstown, PA 15907-1001  
[tel] 814.255.2829 • [fax] 814.255.6514

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