

National Maternal and Child Health Priorities and Performance Measures

National Priorities:

The National MCH Priorities are determined by the federal Maternal and Child Health Bureau (MCHB) of the Health Resources and Services Administration (HRSA), U.S. Department of Health and Human Services (HHS). As required by The Government Performance and Results Act (GPRA – Public Law 103-62), MCHB must also establish performance measures related to each priority, to be reported as part of the budgetary process that links funding decisions with performance and related outcome measures. The following are current National MCH Priorities:

- Reducing infant morbidity and mortality including preventing low birth weight births, promoting prenatal care and reducing smoking during pregnancy
- Providing newborn metabolic and infant hearing screening programs
- Promoting breastfeeding
- Promoting access to health insurance coverage
- Increasing childhood immunization rates
- Preventing teen births
- Improving oral health
- Reducing childhood obesity
- Promoting access to a medical home for all children, especially those with special health care needs
- Reducing child and adolescent deaths including deaths due to motor vehicle accidents and suicide

National Performance Measures:

1. 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.
2. 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.
3. The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home.
4. 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.
5. 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.

6. 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.
7. 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.
8. The rate of birth (per 1,000) for teenagers aged 15 to 17 years.
9. Percent of third grade children who have received protective sealants on at least one permanent molar tooth.
10. The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.
11. The percent of mothers who breastfeed their infants at 6 months of age.
12. Percentage of newborns who have been screened for hearing before hospital discharge.
13. Percent of children without health insurance.
14. Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.
15. Percentage of women who smoke in the last three months of pregnancy.
16. The rate (per 100,000) of suicide deaths among youths aged 15 through 19.
17. Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.
18. Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

Updated April 20, 2010

For most current updates to this information, see: [MCHB Title V Information System](#)