



GEORGIA DEPARTMENT OF
COMMUNITY HEALTH

NOTICE OF DIRECT AWARD

MATERNAL AND CHILD HEALTH PROGRAM

**EACH PEACH MATTERS: AN INFANT MORTALITY
REDUCTION INITIATIVE IN GEORGIA**

**POSTING DATE: MONDAY, JUNE 27, 2011
INQUIRY CLOSING DATE: 2:00 PM, EST., FRIDAY, JULY 1, 2011**

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DIRECT AWARD JUSTIFICATION

EACH PEACH MATTERS

AGENCY BACKGROUND

The Georgia Department of Community Health (DCH) was created in 1999 by Senate Bill 241 to serve as the lead agency for health care planning and purchasing issues in Georgia. DCH is the single state agency for Medicaid and insures over two million people in the State of Georgia, maximizing the State's health care purchasing power, coordinating health planning for State agencies and proposing cost-effective solutions for reducing the number of uninsured.

Effective July 1, 2009, the Georgia Department of Community Health (DCH) officially transferred services for the Office of Regulatory Services (ORS), Division Public Health (PH) and Emergency Preparedness from the Department of Human Resources (DHR). These services will function as three separate program divisions within DCH. The transition is in response to Senate Bill 433, which instructs DHR to transfer all matters relating to the licensure and regulation of hospitals and health related institutions.

Within DCH, the Division of Public Health (PH), Maternal and Child Health (MCH) Program is responsible for prevention, community ownership, ethical decisions and actions and commitment to a scientific process. Maternal and Child Health operates within a system that has three interrelated components including the foundation, or infrastructure, the means of delivery or services and the children and families interacting with the system to improve their health.

PROGRAM BACKGROUND

The Maternal and Child Health Program addresses the issues through the MCH system that provides the infrastructure and services for the entire population as well as enabling services to assist individuals and families in meeting their needs or direct health care.

The Maternal and Child Health Program (MCHP) has been charged to develop and implement an immediate action plan to identify risk factors and implement practices to prevent infant mortality. In an effort to drive this initiative MCHP conducted an analysis of infant mortality in Georgia which identified six (6) statistically significant geographical clusters with disproportionately high infant mortality rates among Georgia's 159 counties.

<p>PROGRAM OVERVIEW</p>	<p>As a part of its mission for prevention, community ownership, ethical decisions and actions and commitment to a scientific process that is committed to promoting the physical, mental, spiritual and social well-being of children and families through partnerships with communities.</p> <p>Each Peach Matters (EPM) is being developed as a collaborative initiative to implement multiple prevention and intervention strategies to improve conditions that underlie poor perinatal health outcomes. The initiative will be piloted in the six statistically significant geographical clusters which fall into Bibb, Chatham, Fulton, Lowndes, Muscogee and Richmond counties. An additional cluster located in Southwest Georgia comprised of Clay, Quitman, Randolph, and Stewart Counties, will be targeted because its IMR is one of the highest in the State.</p> <p>EPM will build on the good work currently taking place in each of the clusters and will include the collaboration of the Public Health Districts, DFCS, Maternal and Child Health Programs, local OB/GYN providers, family practitioners and pediatricians, birthing hospitals, consumers, and other potential partners.</p> <p>EPM will target women of childbearing age, pregnant women, and infants up to 365 days of age.</p> <p>Proven and promising interventions will be concentrated at different points along the maternal and newborn life span:</p> <p>Preconception and Interconception: Efforts will be made to enhance an individual's health prior to conception and to encourage family planning and preparation for pregnancy and birth. Interventions during the preconception and interconception period can aid in ensuring healthier women at time of conception.</p> <p>Prenatal: Early and consistent prenatal care with comprehensive education addressing increased healthy behaviors and decreased or eliminated unhealthy behaviors will be available to ensure the optimum health of the mother and baby</p> <p>Perinatal: Post- and neonatal interventions including medical, behavioral and environmental applications can ensure comprehensive, high quality follow-up care and improved outcomes for mother and child.</p>
<p>AWARD JUSTIFICATION</p>	<p>The Georgia Department of Community Health intends to award Georgia Family Connection Partnership \$1,147,335 to lead in the development and implementation of an infant mortality reduction initiative to improve conditions that underlie poor perinatal health outcomes.</p> <p>DCH presents this funding as a direct award in that Georgia Family Connection Partnership meets the federal grant requirements.</p>
<p>AWARD(S)</p>	<p>TOTAL DIRECT AWARD FUNDS AVAILABLE: \$1,147,335</p>
<p align="center"><u>TO SUBMIT INQUIRIES TO THIS DIRECT AWARD NOTIFICATION</u></p> <p align="center">Arnita E. Watson, Grant Manager at awatson@dch.ga.gov no later than 2:00 PM on Wednesday, June 29, 2011.</p>	