

**TITLE V BLOCK GRANT APPLICATION**  
**FORMS (2-21)**  
**STATE: PW**  
**APPLICATION YEAR: 2013**

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**FORM 2**  
**MCH BUDGET DETAILS FOR FY 2013**  
*[Secs. 504 (d) and 505(a)(3)(4)]*  
**STATE: PW**

<b>1. FEDERAL ALLOCATION</b>		\$	154,706
	(Item 15a of the Application Face Sheet [SF 424])		
	Of the Federal Allocation (1 above), the amount earmarked for:		
	A. Preventive and primary care for children:		
	\$ <u>92,206</u> ( <u>59.6</u> %)		
	B. Children with special health care needs:		
	\$ <u>47,800</u> ( <u>30.9</u> %)		
	(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]		
	C. Title V administrative costs:		
	\$ <u>14,700</u> ( <u>9.5</u> %)		
	(The above figure cannot be more than 10%)[Sec. 504(d)]		
<b>2. UNOBLIGATED BALANCE</b>	(Item 15b of SF 424)	\$	<u>0</u>
<b>3. STATE MCH FUNDS</b>	(Item 15c of the SF 424)	\$	<u>0</u>
<b>4. LOCAL MCH FUNDS</b>	(Item 15d of SF 424)	\$	<u>117,000</u>
<b>5. OTHER FUNDS</b>	(Item 15e of SF 424)	\$	<u>0</u>
<b>6. PROGRAM INCOME</b>	(Item 15f of SF 424)	\$	<u>0</u>
<b>7. TOTAL STATE MATCH</b>	(Lines 3 through 6)	\$	<u>117,000</u>
	(Below is your State's FY 1989 Maintenance of Effort Amount)		
	\$ <u>0</u>		
<b>8. FEDERAL-STATE TITLE V BLOCK GRANT PARTNERSHIP (SUBTOTAL)</b>		\$	<u>271,706</u>
	(Total lines 1 through 6. Same as line 15g of SF 424)		
<b>9. OTHER FEDERAL FUNDS</b>			
	(Funds under the control of the person responsible for the administration of the Title V program)		
a. SPRANS:	\$ <u>0</u>		
b. SSDI:	\$ <u>65,357</u>		
c. CISS:	\$ <u>150,000</u>		
d. Abstinence Education:	\$ <u>0</u>		
e. Healthy Start:	\$ <u>0</u>		
f. EMSC:	\$ <u>0</u>		
g. WIC:	\$ <u>0</u>		
h. AIDS:	\$ <u>0</u>		
i. CDC:	\$ <u>0</u>		
j. Education:	\$ <u>0</u>		
k. Home Visiting:	\$ <u>0</u>		
l. Other:	\$ <u>0</u>		
<u>Family Planning</u>	\$ <u>145,000</u>		
<u>UNHSI</u>	\$ <u>172,000</u>		
<b>10. OTHER FEDERAL FUNDS (SUBTOTAL of all Funds under item 9)</b>		\$	<u>532,357</u>
<b>11. STATE MCH BUDGET TOTAL</b>		\$	<u>804,063</u>
	(Partnership subtotal + Other Federal MCH Funds subtotal)		

**FORM NOTES FOR FORM 2**

None

**FIELD LEVEL NOTES**

None

**FORM 3**  
**STATE MCH FUNDING PROFILE**  
*[Secs. 505(a) and 506(a)(1-3)]*  
**STATE: PW**

	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form2)</i>	\$ 152,000	\$ 150,995	\$ 151,665	\$ 151,665	\$ 152,000	\$ 149,000
<b>2. Unobligated Balance</b> <i>(Line2, Form2)</i>	\$ 0	\$ 671	\$ 0	\$ 0	\$ 0	\$ 0
<b>3. State Funds</b> <i>(Line3, Form2)</i>	\$ 0	\$ 0	\$ 113,749	\$ 113,749	\$ 0	\$ 114,000
<b>4. Local MCH Funds</b> <i>(Line4, Form2)</i>	\$ 114,000	\$ 114,000	\$ 0	\$ 0	\$ 114,000	\$ 0
<b>5. Other Funds</b> <i>(Line5, Form2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>6. Program Income</b> <i>(Line6, Form2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>7. Subtotal</b>	\$ 266,000	\$ 265,666	\$ 265,414	\$ 265,414	\$ 266,000	\$ 263,000
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form2)</i>	\$ 234,644	\$ 234,644	\$ 360,000	\$ 360,000	\$ 234,644	\$ 234,644
<b>9. Total</b> <i>(Line11, Form2)</i>	\$ 500,644	\$ 500,310	\$ 625,414	\$ 625,414	\$ 500,644	\$ 497,644
(STATE MCH BUDGET TOTAL)						

**FORM 3**  
**STATE MCH FUNDING PROFILE**  
*[Secs. 505(a) and 506(a)(1-3)]*  
**STATE: PW**

	FY 2011		FY 2012		FY 2013	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form2)</i>	\$ 150,000	\$ 149,000	\$ 150,000	\$	\$ 154,706	\$
<b>2. Unobligated Balance</b> <i>(Line2, Form2)</i>	\$ 0	\$ 0	\$ 0	\$	\$ 0	\$
<b>3. State Funds</b> <i>(Line3, Form2)</i>	\$ 0	\$ 0	\$ 114,000	\$	\$ 0	\$
<b>4. Local MCH Funds</b> <i>(Line4, Form2)</i>	\$ 114,000	\$ 114,000	\$ 0	\$	\$ 117,000	\$
<b>5. Other Funds</b> <i>(Line5, Form2)</i>	\$ 0	\$ 0	\$ 612,000	\$	\$ 0	\$
<b>6. Program Income</b> <i>(Line6, Form2)</i>	\$ 0	\$ 0	\$ 0	\$	\$ 0	\$
<b>7. Subtotal</b>	\$ 264,000	\$ 263,000	\$ 876,000	\$ 0	\$ 271,706	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form2)</i>	\$ 448,565	\$ 448,565	\$ 234,644	\$	\$ 532,357	\$
<b>9. Total</b> <i>(Line11, Form2)</i>	\$ 712,565	\$ 711,565	\$ 1,110,644	\$ 0	\$ 804,063	\$ 0
(STATE MCH BUDGET TOTAL)						

**FORM NOTES FOR FORM 3**

None

**FIELD LEVEL NOTES**

1. **Section Number:** Form3\_Main  
**Field Name:** StateMCHFundsExpended  
**Row Name:** State Funds  
**Column Name:** Expended  
**Year:** 2010  
**Field Note:**  
Corrections- \$114,000 is state funding. It was recommended in the Block Grant Review that this funding is State Funds.
2. **Section Number:** Form3\_Main  
**Field Name:** LocalMCHFundsExpended  
**Row Name:** Local MCH Funds  
**Column Name:** Expended  
**Year:** 2010  
**Field Note:**  
Corrections: No local MCH funds expended. Funding of \$114,000 initially listed under Local MCH Funds has been moved under State Funds.

**FORM 4**  
**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**  
*[Secs 506(2)(2)(iv)]*  
**STATE: PW**

	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 58,520	\$ 58,437	\$ 50,000	\$ 50,000	\$ 58,520	\$ 55,520
b. Infants < 1 year old	\$ 45,220	\$ 45,137	\$ 50,000	\$ 50,000	\$ 45,220	\$ 45,220
c. Children 1 to 22 years old	\$ 98,800	\$ 98,716	\$ 70,833	\$ 70,833	\$ 98,800	\$ 98,800
d. Children with Special Healthcare Needs	\$ 45,600	\$ 45,600	\$ 70,832	\$ 70,832	\$ 45,600	\$ 45,600
e. Others	\$ 10,260	\$ 10,176	\$ 13,749	\$ 13,749	\$ 10,260	\$ 10,260
f. Administration	\$ 7,600	\$ 7,600	\$ 10,000	\$ 10,000	\$ 7,600	\$ 7,600
<b>g. SUBTOTAL</b>	\$ 266,000	\$ 265,666	\$ 265,414	\$ 265,414	\$ 266,000	\$ 263,000
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 94,644		\$ 95,000		\$ 94,644	
c. CISS	\$ 140,000		\$ 140,000		\$ 140,000	
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		\$ 0	
l. Other						
UNHSI	\$ 0		\$ 125,000		\$ 0	
<b>III. SUBTOTAL</b>	\$ 234,644		\$ 360,000		\$ 234,644	

**FORM 4**  
**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**  
*[Secs 506(2)(2)(iv)]*  
**STATE: PW**

	FY 2011		FY 2012		FY 2013	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 57,000	\$ 57,000	\$ 56,520	\$	\$ 56,520	\$
b. Infants < 1 year old	\$ 44,400	\$ 44,300	\$ 45,220	\$	\$ 45,600	\$
c. Children 1 to 22 years old	\$ 98,800	\$ 97,600	\$ 98,800	\$	\$ 97,626	\$
d. Children with Special Healthcare Needs	\$ 45,600	\$ 46,500	\$ 45,600	\$	\$ 48,000	\$
e. Others	\$ 10,600	\$ 10,000	\$ 10,260	\$	\$ 10,260	\$
f. Administration	\$ 7,600	\$ 7,600	\$ 7,600	\$	\$ 14,700	\$
<b>g. SUBTOTAL</b>	\$ 264,000	\$ 263,000	\$ 264,000	\$ 0	\$ 271,706	\$ 0
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 0		\$ 94,644		\$ 65,357	
c. CISS	\$ 132,000		\$ 140,000		\$ 150,000	
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		\$ 0	
l. Other						
Family Planning	\$ 166,565		\$ 0		\$ 145,000	
UNHSI	\$ 150,000		\$ 0		\$ 172,000	
<b>III. SUBTOTAL</b>	\$ 448,565		\$ 234,644		\$ 532,357	

**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: PW**

TYPE OF SERVICE	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 54,874	\$ 54,791	\$ 53,000	\$ 53,000	\$ 54,874	\$ 53,874
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 68,594	\$ 68,510	\$ 52,000	\$ 52,000	\$ 68,594	\$ 67,594
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 68,594	\$ 68,511	\$ 70,000	\$ 70,000	\$ 68,594	\$ 67,594
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 73,938	\$ 73,854	\$ 90,414	\$ 90,414	\$ 73,938	\$ 73,938
<b>V. Federal-State Title V Block Grant Partnership Total</b> (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.)	\$ 266,000	\$ 265,666	\$ 265,414	\$ 265,414	\$ 266,000	\$ 263,000

**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: PW**

TYPE OF SERVICE	FY 2011		FY 2012		FY 2013	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 48,000	\$ 48,000	\$ 53,874	\$	\$ 55,500	\$
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 68,000	\$ 68,000	\$ 68,594	\$	\$ 65,200	\$
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 68,000	\$ 68,000	\$ 67,594	\$	\$ 67,725	\$
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 80,000	\$ 79,000	\$ 73,938	\$	\$ 83,281	\$
<b>V. Federal-State Title V Block Grant Partnership Total</b> (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.)	\$ 264,000	\$ 263,000	\$ 264,000	\$ 0	\$ 271,706	\$ 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: PW**

Total Births by Occurrence: 247 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	244	98.8	0	0	0	
Congenital Hypothyroidism	244	98.8	2	0	0	
Galactosemia	244	98.8	0	0	0	
Sickle Cell Disease						
<b>Other Screening (Specify)</b>						
Congenital Adrenal Hyperplasia	244	98.8	0	0	0	
Hearing Screening	246	99.6	11	0	0	
Glucose-6 Phosphate Deficiency	244	98.8	1	0	0	
<b>Screening Programs for Older Children &amp; Women (Specify Tests by name)</b>						
Depression Screening for Pregnant Women	266		4	0	0	
BMI Screening for school children	1,232		433	352	345	98
Vision Screening for school children	1,065		41	41	22	53.7
Hearing Screening for school children	1,212		320	320	166	51.9
Bullying screening for school children	1,226		250	250	157	62.8
Hypertension screening for school children	1,231		17	17	11	64.7
Dental Screening for School Children	1,232		911	822	527	64.1
Post-Partum Depression Screening	217		7	0	0	
OAE Screening for 1st & 3rd Grade Students	503		70	70	41	58.6

(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:** Phenylketonuria\_Confirmed  
**Row Name:** Phenylketonuria  
**Column Name:** Confirmed Cases  
**Year:** 2013  
**Field Note:**  
There were no presumptive positive screens as well as no confirmed cases for Phenylketonuria screening.
2. **Section Number:** Form6\_Main  
**Field Name:** Galactosemia\_Confirmed  
**Row Name:** Galactosemia  
**Column Name:** Confirmed Cases  
**Year:** 2013  
**Field Note:**  
There are no presumptive positive screens and no confirmed cases for Galactosemia screening.

**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: PW**

Number of Individuals Served - Historical Data by Annual Report Year					
Types of Individuals Served	2006	2007	2008	2009	2010
Pregnant Women	539	506	465	344	382
Infants < 1 year old	259	279	295	273	247
Children 1 to 22 years old	521	9,548	3,303	3,190	2,751
Children with Special Healthcare Needs	627	300	348	348	348
Others	1,673	1,238	4,917	4,743	3,754
<b>Total</b>	<b>3,619</b>	<b>11,871</b>	<b>9,328</b>	<b>8,898</b>	<b>7,482</b>

Reporting Year: 2011

Types of Individuals Served	TITLE V	PRIMARY SOURCES OF COVERAGE				
	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	371				100.0	
Infants < 1 year old	247				100.0	
Children 1 to 22 years old	4,349				100.0	
Children with Special Healthcare Needs	348				100.0	
Others	7,002				85.0	15.0
<b>TOTAL</b>	<b>12,317</b>					

**FORM NOTES FOR FORM 7**

None

**FIELD LEVEL NOTES**

None

**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: PW**

Reporting Year: 2011

**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
<b>DELIVERIES</b>								
Total Deliveries in State	248	1			35	212		
Title V Served	248	1			35	212		
Eligible for Title XIX	248	1			35	212		
<b>INFANTS</b>								
Total Infants in State	247	1			35	211		
Title V Served	247	1			35	211		
Eligible for Title XIX	247	1			35	211		

**II. UNDUPLICATED COUNT BY ETHNICITY**

	<b>HISPANIC OR LATINO (Sub-categories by country or area of origin)</b>							
	(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
<b>DELIVERIES</b>								
Total Deliveries in State	248							
Title V Served	248							
Eligible for Title XIX	248							
<b>INFANTS</b>								
Total Infants in State	247							
Title V Served	247							
Eligible for Title XIX	247							

**FORM NOTES FOR FORM 8**

None

**FIELD LEVEL NOTES**

None

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

	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: PW**

	<b>FY 2013</b>	<b>FY 2012</b>	<b>FY 2011</b>	<b>FY 2010</b>	<b>FY 2009</b>
1. State MCH Toll-Free "Hotline" Telephone Number	(680) 488-1756	(680) 488-1756	(680) 488-1756	(680) 488-1756	(680) 488-1756
2. State MCH Toll-Free "Hotline" Name	Family Health Clinic Hotline	Family Health Clinic Hotline	Family Health Clinic Hotline	Family Health Unit Hotline	Family Health Unit Hotline
3. Name of Contact Person for State MCH "Hotline"	Rosemina Mechol	RoseMina Mechol	RoseMina Mechol	Rosemina Mechol	Rosemina Mechol
4. Contact Person's Telephone Number	(680) 488-2552	(680) 488-2552	(680) 488-2172	(680) 488-2172	(680) 488-2172
5. Contact Person's Email	r_mechol@palau-health.net	r_mechol@palau-health.net	r_mechol@palau-helth.net	r_mechol@palau-health.net	
6. Number of calls received on the State MCH "Hotline" this reporting period	0	0	0	0	0

**FORM NOTES FOR FORM 9**

None

**FIELD LEVEL NOTES**

None



**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: PW**

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.

		<u>Annual Objective and Performance Data</u>				
		2007	2008	2009	2010	2011
Annual Performance Objective	_____ 95	_____ 97	_____ 99	_____ 99	_____ 99	_____ 99
Annual Indicator	_____	_____	_____	_____	_____	_____ 0.0
Numerator	_____	_____	_____	_____	_____	_____ 0
Denominator	_____	_____	_____	_____	_____	_____ 247
Data Source			Newborn Screening Database	Newborn Screening		Newborn Screening
<p>Check this box if you cannot report the numerator because</p> <p>1. There are fewer than 5 events over the last year, and</p> <p>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.  <i>(Explain data in a year note. See Guidance, Appendix IX.)</i></p>		_____	_____	_____ Yes	_____ Yes	_____
Is the Data Provisional or Final?					Provisional	Provisional

		<u>Annual Objective and Performance Data</u>				
		2012	2013	2014	2015	2016
Annual Performance Objective	_____ 99	_____ 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:

In 2011, there were no newborns that were screened positive for any of the genetic screening done. Among the 247 live births, 244 or 98.8% were screened for Phenylketonuria, Congenital Hypothyroidism, G6PD and Congenital Adrenal Hyperplasia.

2. Section Number: Form11\_Performance Measure #1

Field Name: PM01

Row Name:

Column Name:

Year: 2010

Field Note:

In 2012/ Among the 247 live births in 2010, 236 or 86% were screened for Phenylketonuria, Congenital Hypothyroidism, G6PD and Congenital Adrenal Hyperplasia. There were two (2) babies confirmed for G6PD. These babies were enrolled to the High Risk Clinic wherein regular check-up for follow-up and parent counseling are done.//2012//

3. Section Number: Form11\_Performance Measure #1

Field Name: PM01

Row Name:

Column Name:

Year: 2009

Field Note:

In 2009, 151 babies who were born from January to August 2009 have undergone the Genetic Screening Tests. The screening ceased in Aug due to unavailability of testing kits. Screening resumed in January 2010. Among the births from January to August 2009, 79% (151/191) of the occurent births were screened.

The hearing screening for newborns was able to test 97.4% (266/273) of the infants in 2009. 23 babies have not passed the hearing test and are awaiting diagnosis.

There are no screen positive newborns in 2009.

**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)

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	78	81	92	92	93
Annual Indicator	90.3	90.3	90.3	90.3	92.8
Numerator	65	65	65	65	181
Denominator	72	72	72	72	195
Data Source		SLAITS-like Survey, 2007	SLAITS-like Survey, 2007	SLAITS-like Survey, 2007	SLAITS-like Survey, 2011
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

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	94	95	95	95	95
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:**

Among the 252 surveyed parents/guardians of those identified Children with Special Health Care Needs, 77.5% (195/252) responded to the questions at the section on 'Satisfaction with Care'. Computing for the overall average of the seven items in the said section, almost all (92.8% or 181/195) said that their doctor or health care professional have either 'always' or 'some of the time' addressed the issues and concerns of their children. Questions under this section and percent of 'always' and 'some of the time' responses are as follows: Doctor (a) Spent enough time with your child when your child sees him/her? - 90.8% (177/195); (b) Listened to you regarding your child's health/medical problems? - 95.4% (186/195); (c) Been sensitive to your family's values and traditions - 88.7% (172/194); (d) Given you enough information about your child's condition? - 89.6% (180/195); (e) Discussed with you concerns relating to your child's health? - 92.9% (182/196); (f) Showed you how to care for your child? - 93.4% (183/196); and (g) Made you feel like an important partner in your child's care? - 95.9% (188/196).

**2. Section Number:** Form11\_Performance Measure #2

**Field Name:** PM02

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

/2009/ - In 2008, we are using data from 2007 as our survey for 2009 has not been completed. We were suppose to conduct it March, however, due to many procedural changes with the new Palau Government Administration, the paper works were returned and we have to begin the process again. We will have the information for the 2010 Needs Assessment.





**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)

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	40	60	62	64	67
Annual Indicator	57.7	57.7	57.7	57.7	10.7
Numerator	41	41	41	41	26
Denominator	71	71	71	71	243
Data Source		SLAITS-like Survey, 2007	SLAITS-like Survey, 2007	SLAITS-like Survey, 2007	SLAITS-like Survey, 2011
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

  

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	69	69	69	69	69
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:**

A revision was made in CSHCN Survey that was conducted in 2011 to include a section on 'Availability and Accessibility of Community Support Systems'. On average, 1 out of 10 (10.7% or 26/243) said to have availed of some community support systems such as financial support from Palau Disability Stipend Program, parental support from PPE, Omekesang; and support from faith base organizations. The parental supports that have they have received are 'Parental Training'; 'Resoure and Information'; 'Guidance on child's special needs care'; 'Advocated for my family and child'; and others. Supports from faith base organizations include: 'Financial/Sustenance Assistance'; 'Resource and Information'; 'Guidance on child's special needs care'; 'Advocated for my family and child'; and 'Spiritual Support/Empowerment'.

**2. Section Number:** Form11\_Performance Measure #5

**Field Name:** PM05

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

/2012/ - As reported in performance measure 3, when we conducted the trainings and we opened them to our collaborative partners. This is to strengthen collaboration so that services can be streamlined and practices improved at different sites. There are no NGO's supported CSHCN community-based services. Therefore, collaboration on capacity building and coordination of services are key service models that we utilize in order to expand community-based intervention. //2012//

**3. Section Number:** Form11\_Performance Measure #5

**Field Name:** PM05

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

/2009/ - As reported in performance measure 3, when we conducted the trainings in 2007 and 2008, we opened them to our collaborative partners. This is to strengthen collaboration so that services can be streamlined and practices improved at different sites. Staff attended training in Guam on "Wrap Around System of Care" and Medical Home for CSN and high risk adolescents. In Palau community-based system of care for CSHCN are more or less government supported. There are no NGO's supported CSHCN community-based services. Therefore, collaboration on capacity building and coordination of services are key service models that we utilize in order to expand community-based intervention. //2010//

**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.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	<u>36</u>	<u>78</u>	<u>80</u>	<u>82</u>	<u>84</u>
Annual Indicator	<u>76.7</u>	<u>76.7</u>	<u>76.7</u>	<u>76.7</u>	<u>72.7</u>
Numerator	<u>56</u>	<u>56</u>	<u>56</u>	<u>56</u>	<u>40</u>
Denominator	<u>73</u>	<u>73</u>	<u>73</u>	<u>73</u>	<u>55</u>
Data Source		SLAITS-like Survey, 2007	SLAITS-like Survey, 2007	SLAITS-like Survey, 2007	SLAITS-like Survey, 2011

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

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	<u>85</u>	<u>85</u>	<u>85</u>	<u>85</u>	<u>85</u>
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

**1. Section Number:** Fom11\_Performance Measure #6

**Field Name:** PM06

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

By average, about 72.7% (40/55) of the parents/guardians have said that they have received the services they need in the past 12 months of the CSHCN survey. The services they availed were: 'care from primary care physician' - 98.1% (156/159); 'care from specialty physician' - 79.6% (43/54); 'vocational rehabilitation services' - 66.7% (2/3); 'dental care including checkups - 94.2% (113/120); 'physical, occupational, or speech therapy' - 87.1% (27/31); 'mental health care counseling' - 87.5% (14/16); 'substance abuse treatment and counseling' - 100% (n=1); 'eyeglasses or vision care' 100% (n=12); 'hearing aids' - 93.3% (14/15); 'home health care' - 93.3% (14/15); and 'prescription medications' - 96.4% (27/28). About 75.9% (154/203) said that their child have not been delayed or gone without health care. Majority (53.7% or 110/205) have expressed that their child have a regular doctor or nurse who provides routine health care including well baby and preventive care.

**2. Section Number:** Fom11\_Performance Measure #6

**Field Name:** PM06

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

/2012 As reported in the previous years, this was a good performing care component. However, in re-assessing the information, the component of this care which was low was in the area of identified health care provider for the child. The access to care and availability of care was at 97% but previously mentioned care component was 55%. This reflects that the characteristic of the Palau medical home design. In this design, there are several pediatricians, nurses, and social workers who are part of this medical home. Therefore, any child with special need can access quality care at any time and place. Although the systems are in place for provision of health care and transitioning from child to adulthood, components of care that really prepares the child with special needs to be an independent adult are not in place. We understand this, and will need a complete paradigm shift from cultural and traditional contexts of family responsibility to an individual rights and responsibilities to attain fulfillment of life //2012//

**3. Section Number:** Fom11\_Performance Measure #6

**Field Name:** PM06

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

/2009/ - As reported in the previous years, this was a good performing care component. However, in re-assessing the information, the component of this care which was low was in the area of identified health care provider for the child. The access to care and availability of care was at 97% but previously mentioned care component was 55%. This reflects that the characteristic of the Palau medical home design. In this design, there are several pediatricians, nurses, and social workers who are part of this medical home. Therefore, any child with special need can access quality care at any time and place. Although the systems are in place for provision of health care and transitioning from child to adulthood, components of care that really prepares the child with special needs to be an independent adult are not in place. We understand this, and will need a complete paradigm shift from cultural and traditional contexts of family responsibility to an individual rights and responsibilities to attain fulfillment of life.//2010//

**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.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	100	100	100	100	100
Annual Indicator	95	96	88	82	79.3
Numerator					518
Denominator					653
Data Source		Immunization Registry	Immunization Registry	Immunization Program	Immunization 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?

Provisional Provisional

	<u>Annual Objective and Performance Data</u>				
	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 #7  
**Field Name:** PM07  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 Data is reported by immunization program.

2. **Section Number:** Form11\_Performance Measure #7  
**Field Name:** PM07  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 /2012/ Palau is unable to report on this measure at the present time. Data will have to be verified and confirmed with Immunization//2012//

The immunization coverage for 19-35 months in 2010 was 82%.

3. **Section Number:** Form11\_Performance Measure #7  
**Field Name:** PM07  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 Precalculated data from immunization registry

**PERFORMANCE MEASURE # 08**

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

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	10	6.4	6	6	5.8
Annual Indicator	6.5	13.1	15.1	12.9	8.5
Numerator	3	6	7	6	4
Denominator	459	459	463	466	470
Data Source		Birth Certificate, FHU Registry			
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

  

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	5.6	5.2	5.2	5.2	5.2
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

- Section Number:** Form11\_Performance Measure #8  
**Field Name:** PM08  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 Among the 4 teenage mothers who delivered in 2011, one (1) was 15 years old and three (3) were 17-year olds.
- Section Number:** Form11\_Performance Measure #8  
**Field Name:** PM08  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 /2012/ Age breakdown of teenagers who delivered in 2010 are: one 14 yrs old; one 15 years old; one 16 years old; three 17 year olds; seven 18 year olds; and eight 19 year olds.//2012//
- Section Number:** Form11\_Performance Measure #8  
**Field Name:** PM08  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 Among these 7 teenage mothers who delivered in 2009, 4 were 16 years old and 3 were 17 years old. There were also 8 mothers (2.9%) who were 18 years old and 19 mothers (7.0%) were 19 years old.

**PERFORMANCE MEASURE # 09**

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

	2007	2008	2009	2010	2011
<b>Annual Performance Objective</b>	87	90	93	93	93
<b>Annual Indicator</b>	87.1	81.9	15.2	20.8	47.9
<b>Numerator</b>	155	104	41	50	128
<b>Denominator</b>	178	127	270	240	267
<b>Data Source</b>		Dental Serv. Tracking System	Dental Services	Dental Services	Dental Services
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.)					
<b>Is the Data Provisional or Final?</b>				Provisional	Provisional

	2012	2013	2014	2015	2016
<b>Annual Performance Objective</b>	94	95	95	95	95
<b>Annual Indicator</b>					
<b>Numerator</b>					
<b>Denominator</b>					

**Field Level Notes**

**1. Section Number:** Form11\_Performance Measure #9

**Field Name:** PM09

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

2011 Cavity rate: Among the 261 third grade students during the school health screening, 186 (71.3%) were identified to have caries. Among the 217 fifth grade students checked, 158 (72.8%) were identified to have caries.

**2. Section Number:** Form11\_Performance Measure #9

**Field Name:** PM09

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

/2012/ Dental services have reported that sealants supplies were not available during the scheduled school dental clinic.

Among the 212 third grade students checked, 196 or 92.5% of the students were identified to have caries. Among the 219 fifth grade students checked, 187 or 85.4% were identified to have caries. Overall proportion of students in the 3rd and 5th grades who have caries is 88.9%./2012/

**3. Section Number:** Form11\_Performance Measure #9

**Field Name:** PM09

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Dental services reported low number of recipients of sealants due to inavailability of supplies. Denominator used in this indicator is the census of all 3rd grade students from all the schools in Palau.

Among the 199 third grade students checked for dental caries, 105 or 28.2% of them identified to have caries. Among the 173 fifth grade students, 56 or 15.1% were identified to have caries. Combining 3rd and 5th Grades gives us a proportion of 43.3% students having tooth decay.

**PERFORMANCE MEASURE # 10**

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

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	0	0	0	0	0
Annual Indicator	0.0		0.0	0.0	0.0
Numerator	0		0	0	0
Denominator	4,875	4,875	4,963	4,993	5,033
Data Source		MOHMIS	Death Certificates	Death Certificates	Death Certificates

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?

Yes  
 Provisional  
 Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	0	0	0	0	0
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:

There were no reported deaths to children aged 14 years and younger caused by motor vehicle crashes in 2011.

2. Section Number: Form11\_Performance Measure #10

Field Name: PM10

Row Name:

Column Name:

Year: 2010

Field Note:

/2012/ There were no deaths among children 14 years and younger which were caused by motor vehicle crashes//2012//

3. Section Number: Form11\_Performance Measure #10

Field Name: PM10

Row Name:

Column Name:

Year: 2009

Field Note:

Data is not available at this time.

**PERFORMANCE MEASURE # 11**

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

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	65	56	97	98	98
Annual Indicator	52.4	96.8	67.2	75.9	81.4
Numerator	33	92	45	41	48
Denominator	63	95	67	54	59
Data Source		FHU Client Tracking System			
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

  

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	98	98	98	98	98
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

- Section Number:** Fom11\_Performance Measure #11  
**Field Name:** PM11  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 Among the babies that are breastfed, 59%(35/59) are breastfed exclusively and 22% (16/59) are partially breastfed.
- Section Number:** Fom11\_Performance Measure #11  
**Field Name:** PM11  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 /2012/ Data from well baby clinic shows that 48.15% of the babies at 4-6 months old were reported to be fed with exclusive breastfeeding while 27.78% were reported to be fed with partial breastfeeding.//2012//
- Section Number:** Fom11\_Performance Measure #11  
**Field Name:** PM11  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 Data source for this measurement is taken from the well baby clinic registry. 38.8% of the babies at 4-6 months old are reported to be fed with exclusive breastfeeding while 28.4% were reported to be fed with partial breastfeeding.

**PERFORMANCE MEASURE # 12**

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

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	99	85	87	89	91
Annual Indicator	81.4	85.4	97.4	46.6	95.5
Numerator	227	252	266	115	236
Denominator	279	295	273	247	247
Data Source		Newborn Screening Tracking System			
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

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	95	99	99	99	99
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

1. **Section Number:** Form11\_Performance Measure #12

**Field Name:** PM12

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

In 2011, the proportion of babies who were screened prior to hospital discharge was 95.5% (236/247). Among these 236 babies, 196 (83.1% of 236) passed the initial screening while 40 (16.9% of 236) did not pass. Rescreening was done in the well-baby clinic and among those who did not pass in the initial screening, no baby has been confirmed with hearing impairment.

2. **Section Number:** Form11\_Performance Measure #12

**Field Name:** PM12

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

/2012/ In 2010, the proportion of babies who have undergone hearing screening was 99.19% (245/247). Among these 245 babies, 115 (46.9% of 245) were screened prior to hospital discharge while 130 (53.1% of 245) were screened during their well baby clinic visit.//2012//

**PERFORMANCE MEASURE # 13**

Percent of children without health insurance.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	0	0	15	15	15
Annual Indicator	0	15.0		0.0	0.0
Numerator		961	0	0	0
Denominator		6,411		6,411	6,411
Data Source		2000 & 2005 Palau Census of Population	2005 & 2006 Palau Census	2005 and 2006 Census of Population	2005 and 2006 PalauCensus
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and			Yes	Yes	Yes
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.					
<i>(Explain data in a year note. See Guidance, Appendix IX.)</i>					
Is the Data Provisional or Final?				Provisional	Provisional

  

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	15	15	15	15	
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

- Section Number: Form11\_Performance Measure #13

Field Name: PM13

Row Name:

Column Name:

Year: 2010

Field Note:

/2012/ The Government of Palau provides a nationalize preventive health services for all children in Palau under PNC34.102(t) therefore the Government steps in and assumes the role of the primary health insurance coverage for all children.//2012//

- Section Number: Form11\_Performance Measure #13

Field Name: PM13

Row Name:

Column Name:

Year: 2009

Field Note:

The Government of Palau provides a nationalize preventive health services for all children in Palau under PNC34.102(t) therefore the Government steps in and assumes the role of the primary health insurance coverage for all children. Our PRAMS Like Survey indicates that about 15% pregnant women have insurance, however we are not sure if that coverage extend to children.

**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.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	8	6	95	95	95
Annual Indicator					
Numerator					
Denominator					
Data Source		FHU Client Tracking System, MOH Encounter			

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? \_\_\_\_\_

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	95	95	95	95	95
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

- Section Number:** Form11\_Performance Measure #14  
**Field Name:** PM14  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 The 2011 Headstart health screening data shows that there were 43 children (2-5 years old) who were screened to have a BMI at or above 85th percentile. This corresponds to 16.4% (56/262).
- Section Number:** Form11\_Performance Measure #14  
**Field Name:** PM14  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 /2012/ Palau does not have WIC, however there are efforts to collect BMI in the Well Baby Clinic.  
  
 The 2010 Headstart health screening data shows that there were 13 children (3-5 years old) who were screened to have a BMI at or above 85th percentile. This corresponds to 23.2% (n=56).//2012//
- Section Number:** Form11\_Performance Measure #14  
**Field Name:** PM14  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 Palau does not have WIC, however there are efforts to collect BMI in the Well Baby Clinic.  
  
 Although, implementation of BMI in Well Baby Clinic has been discussed and approved, we are having issues relating to the collection of these BMI data. Program is currently working with clinic to address this issue.

**PERFORMANCE MEASURE # 15**

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

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	10	55	53	50	47
Annual Indicator	57.4				7.1
Numerator	39				6
Denominator	68				85
Data Source					PPRASS

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?

		Yes	Yes	
			Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	45	45	45	45	45
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:**

In 2011, the 'Palau Pregnancy Risk Assessment Surveillance System (PPRASS) shows that very few (7.1%) of the surveyed mothers were smoking in the last three months of their pregnancy. However a great majority (62.1% or 53/85) said that they were 'chewing betel nut with cigarette' during the last three months of pregnancy.

2. **Section Number:** Form11\_Performance Measure #15

**Field Name:** PM15

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

/2012/ Palau Pregnancy Risk Assessment Surveillance System (PPRASS) shows that 1 or 1.9% (n=52) mothers claimed that she was smoking during the last three months of pregnancy. Use of tobacco products was more rampant in the form of chewing with betel nut among 26 mothers or 50% of those where were surveyed//2012//

3. **Section Number:** Form11\_Performance Measure #15

**Field Name:** PM15

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Among the mothers who were surveyed in the Palau Pregnancy Risk Assessment Surveillance System (PPRASS), there were 2 or 2.4% (n=85) who said that they were smoking in the last 3 months of their pregnancy. Moreover, 55 or 64.7% said that they were chewing betel nut with cigarette, 5 or 5.9% were chewing betel nut without cigarette; and 23 or 27.1% were not using any tobacco product in the last 3 months of their pregnancy.

**PERFORMANCE MEASURE # 16**

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

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	0	0	0	0	0
Annual Indicator			0.0	0.0	65.2
Numerator			0	0	1
Denominator	1,486	1,486	1,509	1,521	1,534
Data Source		Bureau of Public Health Epidemiology	Bureau of Public Health Epidemiology	Bureau of Public Health Epidemiology	Death Certificates
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and			Yes	Yes	
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

  

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	0	0	0	0	0
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

- Section Number:** Form11\_Performance Measure #16  
**Field Name:** PM16  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 In 2011, there was one (1) suicide death of a 19 year old male whose cause of death is asphyxia due to hanging.
- Section Number:** Form11\_Performance Measure #16  
**Field Name:** PM16  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 /2012/ There were no suicide deaths among youths aged 15 through 19 in 2010. //2012//
- Section Number:** Form11\_Performance Measure #16  
**Field Name:** PM16  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 In 2009, there was one suicide death committed by a 16-year old male.

**PERFORMANCE MEASURE # 17**

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

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	0	0	0	0	0
Annual Indicator	0.0	0.0			0.0
Numerator	0	0	0	0	0
Denominator	279	295			247
Data Source		MOH MIS			Birth Certificates

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?

Yes Yes  
 Provisional Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	0	0	0	0	0
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

- Section Number:** Form11\_Performance Measure #17  
**Field Name:** PM17  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 In 2011, there were no infants born with a very low birth weight. Palau does not have high risk delivery facility.
- Section Number:** Form11\_Performance Measure #17  
**Field Name:** PM17  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 /2012/ In 2010 there were 2 very low birth weigh infants at 709 and 1418 grams. The baby who weighed 709 grams died less than 1 hour in the hospital.//2012//
- Section Number:** Form11\_Performance Measure #17  
**Field Name:** PM17  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 There were 2 very low birth weight infants in 2009. 1 baby that weighed 964 grams died at 1 day old and the other baby that weighed 1276 grams survived.

**PERFORMANCE MEASURE # 18**

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

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	52	36	56	57	57
Annual Indicator	33.3	55.3	44.0	36.4	47.8
Numerator	93	163	120	90	118
Denominator	279	295	273	247	247
Data Source		FHU Client Information System			
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

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	58	58	58	58	58
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

- Section Number: Form11\_Performance Measure #18

Field Name: PM18

Row Name:

Column Name:

Year: 2011

Field Note:

Among the 247 live births in 2011, almost half (48%) had prenatal care beginning in the first trimester of pregnancy. Although there is an increase by 11.4% (36.4% in 2010), this increase is not statistically significant at p-value=0.1 with odds ratio of 0.76.

- Section Number: Form11\_Performance Measure #18

Field Name: PM18

Row Name:

Column Name:

Year: 2010

Field Note:

/2012/ In year 2010, there were 36.4% of infants born to women receiving prenatal care beginning in the first trimester. //2012//

**FORM 11**  
**TRACKING PERFORMANCE MEASURES**  
*[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]*  
**STATE: PW**

**Form Level Notes for Form 11**

None

**STATE PERFORMANCE MEASURE # 1 - REPORTING YEAR**

Percent of adults women of reproductive age group accessing services at FHU whose BMI is over 27 are identified and provided on-site education and referred for weight management program.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
<b>Annual Performance Objective</b>	65	70	75	80	85
<b>Annual Indicator</b>	0	0			56.6
<b>Numerator</b>					687
<b>Denominator</b>					1,213
<b>Data Source</b>		FHU Client Information System		FHU Client Information System	FHU Client Information System
<b>Is the Data Provisional or Final?</b>				Provisional	Provisional

  

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
<b>Annual Performance Objective</b>	90	90	90	90	90
<b>Annual Indicator</b>	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If				
<b>Numerator</b>	you are continuing any of these measures in the new needs assessment period, you may establish objectives for				
<b>Denominator</b>	those measures on Form 11 for the new needs assessment period.				

**Field Level Notes**

1. **Section Number:** Form11\_State Performance Measure #1  
**Field Name:** SM1  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 For 2011, additional data processing were done in order to report this indicator. Since our databases are not yet linked, data reported in this indicator is result of combining clients from family planning clinic and prepregnancy BMI of the mothers who delivered in 2011. A great majority (56.6% or 687/1213) of the clients of the Family Health Clinic have BMI >27.
  
2. **Section Number:** Form11\_State Performance Measure #1  
**Field Name:** SM1  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 /2012/ Among the mothers who delivered in 2010, 100 (42.35% or 100/273) had pre pregnancy BMI of over 27.  
  
 In 2010, data of clients in the Family Planning Clinic shows that 47% (1445/3073) were measured to have BMI over 27.//2012//
  
3. **Section Number:** Form11\_State Performance Measure #1  
**Field Name:** SM1  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 Among the mothers who delivered in 2009, 105 (38.5% or 105/273) had pre pregnancy BMI of over 27.  
  
 The PPRASS shows that 26% (61/61) of those who were surveyed had pre pregnancy BMI of over 27.

**STATE PERFORMANCE MEASURE # 2 - REPORTING YEAR**

The percentage of children and adolescents ages 18 and under who report using (smoke and/or chew) tobacco products in the past 30 days.

	<b>Annual Objective and Performance Data</b>				
	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>
<b>Annual Performance Objective</b>	37	35	33	31	29
<b>Annual Indicator</b>		46.1			14.0
<b>Numerator</b>		602			172
<b>Denominator</b>		1,307			1,225
<b>Data Source</b>		School Health Screening Database			School Health Screening
<b>Is the Data Provisional or Final?</b>				Provisional	Provisional

	<b>Annual Objective and Performance Data</b>				
	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>
<b>Annual Performance Objective</b>	28	25	25	25	25
<b>Annual Indicator</b>	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If				
<b>Numerator</b>	you are continuing any of these measures in the new needs assessment period, you may establish objectives for				
<b>Denominator</b>	those measures on Form 11 for the new needs assessment period.				

**Field Level Notes**

- Section Number:** Form11\_State Performance Measure #2

**Field Name:** SM2

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

The 2011 school health screening shows that 14% (172/1225) screened students admitted to be using tobacco products either through smoking or chewing betel nut. Average age of initiation is at 12 years old, minimum age at 3 and maximum age at 17. Most (81.5% or 101/124) of these students said they smoke tobacco and 56.4% (75/133) said they chew tobacco with betel nut.

- Section Number:** Form11\_State Performance Measure #2

**Field Name:** SM2

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

/2012/ In the 2010 school health screening, there were 253 or 20.6% (n=1227) of the students aged =18 years old who said that they used nicotine through either smoking or chewing tobacco.//2012//

The YRBS is conducted every two years. The last YRBS was conducted in 2009 in Palau. The School Health screening is conducted every year and data are used to guide the intervention component of services are children and adolescents. Program will continue to use both data sources and will report on both data sources in next years application.

- Section Number:** Form11\_State Performance Measure #2

**Field Name:** SM2

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

In the school health screening, there were 271 or 18.5% (n=1468) of the students aged =18 years old who said that they used nicotine through either smoking or chewing tobacco.

In the YRBS for high school and middle school, a total of 634 students or 53.5% (n=1186) have admitted to use tobacco products. Questions in the survey were: a) During the past 30 days, on how many days did you smoke cigarettes; and b) During the past 30 days, on how many days did you use chewing tobacco, snuff, or dip, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen. Responses of 1 to 30 days were scored to be using Nicotine.

**STATE PERFORMANCE MEASURE # 3 - REPORTING YEAR**

Percent of pregnant women entering prenatal care in the first trimester

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
<b>Annual Performance Objective</b>	<u>72</u>	<u>36</u>	<u>39</u>	<u>42</u>	<u>45</u>
<b>Annual Indicator</b>	<u>33.3</u>	<u>42.4</u>	<u>44.0</u>	<u>36.4</u>	<u>47.0</u>
<b>Numerator</b>	<u>93</u>	<u>125</u>	<u>120</u>	<u>90</u>	<u>116</u>
<b>Denominator</b>	<u>279</u>	<u>295</u>	<u>273</u>	<u>247</u>	<u>247</u>
<b>Data Source</b>		FHU Client Information System			
<b>Is the Data Provisional or Final?</b>				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
<b>Annual Performance Objective</b>	<u>48</u>	<u>50</u>	<u>50</u>	<u>50</u>	<u>50</u>
<b>Annual Indicator</b>	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.				
<b>Numerator</b>					
<b>Denominator</b>					

**Field Level Notes**

- Section Number:** Form11\_State Performance Measure #3  
**Field Name:** SM3  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 We report this measure using the number of births as the denominator. In the future, when the new MCH system will be developed, we will be using the number of pregnant women who came for prenatal as the denominator.
- Section Number:** Form11\_State Performance Measure #3  
**Field Name:** SM3  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 /2012/ In year 2010, 36.4% of pregnant women entering prenatal care in their first trimester//2012//

**STATE PERFORMANCE MEASURE # 4 - REPORTING YEAR**

Percent of Pre-term delivery

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
<b>Annual Performance Objective</b>	<u>5</u>	<u>4</u>	<u>3</u>	<u>2</u>	<u>2</u>
<b>Annual Indicator</b>	<u>9.0</u>	<u>8.5</u>		<u>8.1</u>	<u>4.5</u>
<b>Numerator</b>	<u>25</u>	<u>25</u>		<u>20</u>	<u>11</u>
<b>Denominator</b>	<u>279</u>	<u>295</u>		<u>246</u>	<u>247</u>
<b>Data Source</b>		MOHMIS/Birth Certificates		Deliveries registry	Deliveries registry
<b>Is the Data Provisional or Final?</b>				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
<b>Annual Performance Objective</b>	<u>2</u>	<u>2</u>	<u>2</u>	<u>2</u>	<u>2</u>
<b>Annual Indicator</b>	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.				
<b>Numerator</b>					
<b>Denominator</b>					

**Field Level Notes**

- Section Number:** Form11\_State Performance Measure #4  
**Field Name:** SM4  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 Among the 11 pre term deliveries in 2011, majority (63.6% or 7/11) were delivered by mothers aged 35 and over with a maximum age of 43 years old. Mean weight gain is 24 lbs, with a minimum of 3 and maximum of 38 lbs.
- Section Number:** Form11\_State Performance Measure #4  
**Field Name:** SM4  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 /2012/ Among the 20 pre-term deliveries in 2010, 9 or 44.9% were considered risky pregnancy by virtue of age ( greater than or equal to 35 years old) of the mothers.//2012//
- Section Number:** Form11\_State Performance Measure #4  
**Field Name:** SM4  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 Among the 30 pre-term deliveries in 2009, 14 or 46.7% were considered risky pregnancy by virtue of age (<20 or =35 years old) of the mothers.

**STATE PERFORMANCE MEASURE # 5 - REPORTING YEAR**

Percent of parents/caretakers who report that their children with special healthcare needs receive quality health care

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
<b>Annual Performance Objective</b>	50	91	91.5	92	92.5
<b>Annual Indicator</b>	90.3	90.3			92.8
<b>Numerator</b>	65	65			181
<b>Denominator</b>	72	72			195
<b>Data Source</b>	SLAITS-like Survey				SLAITS-like Survey, 2011
<b>Is the Data Provisional or Final?</b>				Provisional	Provisional

  

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
<b>Annual Performance Objective</b>	93	93	93	93	93
<b>Annual Indicator</b>	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.				
<b>Numerator</b>					
<b>Denominator</b>					

**Field Level Notes**

- Section Number:** Form11\_State Performance Measure #5

**Field Name:** SM5

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

In this indicator, 'quality of care' is defined as the 'satisfaction with care' in the parent's/caregiver's perspective. Among the 252 surveyed parents/guardians of those identified Children with Special Health Care Needs, 77.5% (195/252) responded to the questions at the section on 'Satisfaction with Care'. Computing for the overall average of the seven items in the said section, almost all (92.8% or 181/195) said that their doctor or health care professional have either 'always' or 'some of the time' addressed the issues and concerns of their children. Questions under this section and percent of 'always' and 'some of the time' responses are as follows: Doctor (a) Spent enough time with your child when your child sees him/her? - 90.8% (177/195); (b) Listened to you regarding your child's health/medical problems? - 95.4% (186/195); (c) Been sensitive to your family's values and traditions - 88.7% (172/194); (d) Given you enough information about your child's condition? - 89.6% (180/195); (e) Discussed with you concerns relating to your child's health? - 92.9% (182/196); (f) Showed you how to care for your child? - 93.4% (183/196); and (g) Made you feel like an important partner in your child's care? - 95.9% (188/196).

- Section Number:** Form11\_State Performance Measure #5

**Field Name:** SM5

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

/2012/ Palau is unable to report on this performance measure. The SLAIT-LIKE survey is currently being conducted and results will be reported in next year application//2012//

**STATE PERFORMANCE MEASURE # 6 - REPORTING YEAR**

Increase the percentage of well-child service attendance for 12, 24, & 36 months olds and 4 and 5 years olds, enumerated by age and averaged for the reporting year.

<u>Annual Objective and Performance Data</u>					
	2007	2008	2009	2010	2011
Annual Performance Objective	_____	_____	_____	_____	100
Annual Indicator	_____	_____	_____	88.1	_____
Numerator	_____	_____	_____	1,220	_____
Denominator	_____	_____	_____	1,385	_____
Data Source					Well Baby Clinic Visits
Is the Data Provisional or Final?					Provisional

<u>Annual Objective and Performance Data</u>					
	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				
Numerator	you are continuing any of these measures in the new needs assessment period, you may establish objectives for				
Denominator	those measures on Form 11 for the new needs assessment period.				

**Field Level Notes**

- Section Number:** Form11\_State Performance Measure #6

**Field Name:** SM6

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

We are unable to generate data for this performance measure because data collection system malfunctioned during the year and data were corrupted.

- Section Number:** Form11\_State Performance Measure #6

**Field Name:** SM6

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

/2012/ Well Baby Visits Attendance  
 Age in Occurent Birth Percent of  
 Years Visits Births Year Attendance  
 1 502 273 2009 183.9%  
 2 338 295 2008 114.6%  
 3 210 279 2007 75.3%  
 4 148 259 2006 57.1%  
 5 22 279 2005 7.9%  
 Total 1220 1385 88.1%

In 2010, 88% of children age 12, 24, and 36 months, and 4 and 5 years old attend their regula scheduled well baby visits. //2012//

**STATE PERFORMANCE MEASURE # 7 - REPORTING YEAR**

To increase the rate of children who are victims of abuse and neglect that receive appropriate and comprehensive services

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	_____	_____	_____	_____	90
Annual Indicator	_____	_____	_____	_____	0.0
Numerator	_____	_____	_____	_____	0
Denominator	_____	_____	_____	_____	1,753
Data Source					School Health Screening
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	90	90	90	90	_____
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If				
Numerator	you are continuing any of these measures in the new needs assessment period, you may establish objectives for				
Denominator	those measures on Form 11 for the new needs assessment period.				

**Field Level Notes**

1. Section Number: Form11\_State Performance Measure #7

Field Name: SM7

Row Name:

Column Name:

Year: 2010

Field Note:

/2012/ Palau is unable to report on this measure at the present time. Data will be available for next year application//2012//

**STATE PERFORMANCE MEASURE # 8 - REPORTING YEAR**

To reduce the rate of suicide ideation for adolescents 11 to 19 yeras olds.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	_____	_____	_____	_____	20
Annual Indicator	_____	_____	_____	40.2	61.2
Numerator	_____	_____	_____	63	75
Denominator	_____	_____	_____	1,568	1,226
Data Source				School Health Screening	School Health Screening
Is the Data Provisional or Final?				Provisional	Provisional

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

**Field Level Notes**

1. **Section Number:** Form11\_State Performance Measure #8

**Field Name:** SM8

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

Overall, 6.1% (75/1226) of the students who participated in the school health screening said that they have thought of harming themselves. Among the 565 students aged 11-19, 10.3% (58/565) admitted to have thought of harming themselves. Among the students who said to be thinking of harming themselves, 77.3% (58/75) of them were 11-19 year olds.

2. **Section Number:** Form11\_State Performance Measure #8

**Field Name:** SM8

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

/2012/ Among the students interviewed in during the school health screening 6.8% (85/1246) said yes to the question "Have you ever thought of harming yourself?" 63 or 74.1% (63/85) of these students are ages 11-19 years old./2012/

**STATE PERFORMANCE MEASURE # 9 - REPORTING YEAR**

Increase the percentage of children enrolled in schools, in odd grades, who participate in the annual school health screening and intervention program.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	_____	_____	_____	_____	80
Annual Indicator	_____	_____	_____	73.4	70.3
Numerator	_____	_____	_____	1,251	1,232
Denominator	_____	_____	_____	1,704	1,753
Data Source				School Health Screening	School Health Screening
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	80	90	90	90	90
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If				
Numerator	you are continuing any of these measures in the new needs assessment period, you may establish objectives for				
Denominator	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:

In 2011, there has been a 3% decrease in student participation in the school health screening from 73.4 in 2010.

2. Section Number: Form11\_State Performance Measure #9

Field Name: SM9

Row Name:

Column Name:

Year: 2010

Field Note:

/2012/ In year 2010, 73.4% of children enrolled in school in odd grades received the annual school health screening.//2012//

**STATE PERFORMANCE MEASURE # 10 - REPORTING YEAR**

Reduce percentage of negative birth outcome by conducting periodic Infant Fetal Morbidity and Mortality Review (IFMMR).

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	_____	_____	0.0
Numerator	_____	_____	_____	_____	0
Denominator	_____	_____	_____	_____	247
Data Source					MOH Vital Stats
Is the Data Provisional or Final?					Provisional

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

**Field Level Notes**

None

**FORM 12**  
**TRACKING HEALTH OUTCOME MEASURES**  
*[SECS 505 (a)(2)(B)(iii) AND 506 (a)(2)(A)(iii)]*  
**STATE: PW**

Form Level Notes for Form 12

None

**OUTCOME MEASURE # 01**

The infant mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	6.5	6	6	6	5.9
Annual Indicator	7.1	6.8	22.0	12.1	4.0
Numerator	2	2	6	3	1
Denominator	281	295	273	247	247
Data Source		Death Certificate	Death Certificate	Death Certificates	Death Certificates
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

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	5.9	5.9	5.9	5.9	5.9
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

- Section Number:** Form12\_Outcome Measure 1  
**Field Name:** OM01  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 Three-year average for Infant Mortality Rate is 13.0 per 1000, 95% confidence interval of 3.8 - 16.2.
- Section Number:** Form12\_Outcome Measure 1  
**Field Name:** OM01  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 Three-year average for Infant Mortality Rate is 13.4 per 1000, 95% confidence interval of 4.5 - 17.5.
- Section Number:** Form12\_Outcome Measure 1  
**Field Name:** OM01  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 Three-year average for Infant Mortality Rate is 11.8 per 1000, 95% confidence interval of 3.8 - 16.2. Standardized IMR based on US rate of 6.7 ([http://data.worldbank.org/indicator/SP.DYN.IMRT.IN?cid=GPD\\_55](http://data.worldbank.org/indicator/SP.DYN.IMRT.IN?cid=GPD_55)) is 175.49 per 1000.

**OUTCOME MEASURE # 02**

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

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	0	0	0	0	0
Annual Indicator	0.0	0.0	0.0	0.0	0.0
Numerator	0	0	0	0	0
Denominator	281	295	273	247	247
Data Source		Death Certificates	Death Certificates	Death Certificates	Death Certificates
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?			Yes	Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	0	0	0	0	0
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

- Section Number:** Form12\_Outcome Measure 2  
**Field Name:** OM02  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 All infant deaths were of Pacific Island ethnic group.
- Section Number:** Form12\_Outcome Measure 2  
**Field Name:** OM02  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 All infant deaths were of Pacific Islands ethnic group.
- Section Number:** Form12\_Outcome Measure 2  
**Field Name:** OM02  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 All infant deaths were of Pacific Islands ethnic group.

**OUTCOME MEASURE # 03**

The neonatal mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	7	6.5	6	5.8	5.7
Annual Indicator	7.1	6.8	11.0	4.0	4.0
Numerator	2	2	3	1	1
Denominator	281	295	273	247	247
Data Source		Death Certificates	Death Certificates	Death Certificates	Death Certificates
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

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	5.5	5.5	5.5	5.5	5.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

- Section Number:** Form12\_Outcome Measure 3  
**Field Name:** OM03  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 Three-year average for neonatal mortality Rate is 6.5 per 1000, 95% confidence interval of 0.62 - 9.38.
- Section Number:** Form12\_Outcome Measure 3  
**Field Name:** OM03  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 Three year average neonatal mortality rate is 7.4 per 1,000 with 95% Confidence Interval of 1.2-10.8.
- Section Number:** Form12\_Outcome Measure 3  
**Field Name:** OM03  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 Three year average neonatal mortality rate is 8.2 per 1,000 with 95% Confidence Interval of 1.8-12.2.

**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	3	0	0	0	0
Annual Indicator	0.0	0.0	11.0	8.1	0.0
Numerator	0	0	3	2	0
Denominator	279	295	273	247	247
Data Source		Death Certificates	Death Certificates	Death Certificates	Death Certificates

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	0	0	0	0	
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

- 1. Section Number: Form12\_Outcome Measure 4
- Field Name: OM04
- Row Name:
- Column Name:
- Year: 2011
- Field Note: Three-year average for post-neonatal mortality rate is 6.5 per 1000, 95% confidence interval of 0.62 - 9.38.

**OUTCOME MEASURE # 05**

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

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	11	10	10	8	8
Annual Indicator	14.1	3.4	21.7	19.9	8.1
Numerator	4	1	6	5	2
Denominator	283	296	276	251	248
Data Source		Death Certificates	Death Certificates	Death Certificates	Death Certificates and Deliveries Registry

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

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	7	7	7	7	
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. Section Number: Form12\_Outcome Measure 5

Field Name: OM05

Row Name:

Column Name:

Year: 2011

Field Note:

Three-year average for perinatal mortality rate is 16.8 per 1000, 95% confidence interval of 5.9 - 20.1.

2. Section Number: Form12\_Outcome Measure 5

Field Name: OM05

Row Name:

Column Name:

Year: 2010

Field Note:

3-year average of perinatal mortality rate is 13.4 per 1000 live births. This is at 95% confidence interval of 4.5-17.5.

3. Section Number: Form12\_Outcome Measure 5

Field Name: OM05

Row Name:

Column Name:

Year: 2009

Field Note:

Three year average for perinatal mortality rate is 12.9 per 1000 with 95% confidence interval of 4.5-17.5.

**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	50	50	50	40	40
Annual Indicator	108.8	57.8			84.3
Numerator	5	3			4
Denominator	4,596	5,193			4,746
Data Source		Death Certificates	Death Certificates		Death Certificates

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?

			Yes	Yes	
				Provisional	Provisional

**Annual Objective and Performance Data**

	2012	2013	2014	2015	2016
Annual Performance Objective	40	50	50	50	50
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

- Section Number:** Form12\_Outcome Measure 6  
**Field Name:** OM06  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 Three-year average for child death rate is 42.3 per 1000, 95% confidence interval of 1.2 - 10.8.
- Section Number:** Form12\_Outcome Measure 6  
**Field Name:** OM06  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 Three year average child death rate is 35.6 per 1,000 children aged 1-14. This is at 95% confidence interval of 0.6-9.4.
- Section Number:** Form12\_Outcome Measure 6  
**Field Name:** OM06  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 There were two child deaths aged 1 through 14. 1 two year old male died of pneumonia secondary to nutritional anemia and 1 eleven year old female died of cancer.

FORM 12  
**TRACKING HEALTH OUTCOME MEASURES**  
*[SECS 505 (s)(2)(B)(iii) AND 506 (s)(2)(A)(iii)]*  
**STATE: PW**

Form Level Notes for Form 12

None

**STATE OUTCOME MEASURE # 1 - REPORTING YEAR**

To reduce the percentage of birth with negative outcome through timely and routine IFMMMR Review

	<u>Annual Objective and Performance Data</u>				
	2007	2008	2009	2010	2011
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	_____	_____	_____
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Data Source					
Is the Data Provisional or Final?					

	<u>Annual Objective and Performance Data</u>				
	2012	2013	2014	2015	2016
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	_____	_____	_____
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

None

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

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

\_\_\_\_\_ 2

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

\_\_\_\_\_ 2

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

\_\_\_\_\_ 2

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

\_\_\_\_\_ 2

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).

\_\_\_\_\_ 1

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

\_\_\_\_\_ 2

**Total Score:** \_\_\_\_\_ 11

**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 PW 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. To increase the well-child service attendance for 12, 24, 36 months olds and 4 and 5 years olds, enumerated by age and averaged for the year.
2. To improve birth outcome through routine and timely IFMMM review.
3. To increase the rate of women of reproductive age group whose BMI is under 27
4. To increase the percentage of children enrolled in schools in odd grades who participate in the annual school health screening and intervention program.
5. To increase the percentage of children who are victims of abuse and neglect that are provided appropriate and comprehensive services.
6. To reduce the rate of suicide ideation for adolescents 11 to 19 years olds.
7. To reduce the percentage of children and adolescents ages 18 and under who report using (smoke and/or chew) tobacco in the last 30 days.
8. To increase the percentage of pregnant women who enter prenatal care in the first trimester.
9. To reduce the rate of pre-term delivery.
10. To increase the percentage of parents/caretakers who report that their children with special health care needs receive quality health care.

**FORM NOTES FOR FORM 14**

None

**FIELD LEVEL NOTES**

None

**FORM 15**  
**TECHNICAL ASSISTANCE(TA) REQUEST**

STATE: PW

APPLICATION YEAR: 2013

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested <i>(max 250 characters)</i>	Reason(s) Why Assistance Is Needed <i>(max 250 characters)</i>	What State, Organization or Individual Would You suggest Provide the TA (if known) <i>(max 250 characters)</i>
1.	<b>State Performance Measure Issues</b> 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	Review tool for IFMMR	Development of review tool	MCHB
2.	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.	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: _____			
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: PW

SP() # \_\_\_\_\_ 1

**PERFORMANCE MEASURE:**

Percent of adults women of reproductive age group accessing services at FHU whose BMI is over 27 are identified and provided on-site education and referred for weight management program.

**STATUS:**

Active

**GOAL**

Family Health Education will be provided in all communities of Palau regularly

**DEFINITION**

Increasing Family Health education in all communities as a means of increasing lay knowledge so that people can be better informed. This knowledge base can lead them to make better decisions about their health.

**Numerator:**

Number of women of reproductive age group accessing services at FHU who's BMI is over 27 who are screened and provided on-site intervention or referred for weight management.

**Denominator:**

Number of women of reproductive age group accessing services at FHU.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2020 OBJECTIVE**

Those objectives under NCD, Prenatal Care and Women of Reproductive Age Group.

**DATA SOURCES AND DATA ISSUES**

Monthly reports from FHU Clinics submitted each month to FHU Program

**SIGNIFICANCE**

This objective is to empower community people to be their own educators. They will be trained by Public Health Professionals so that they can carry accurate information in their community education activities

SP() # 2

**PERFORMANCE MEASURE:**

The percentage of children and adolescents ages 18 and under who report using (smoke and/or chew) tobacco products in the past 30 days.

**STATUS:**

Active

**GOAL**

The rate of tobacco use among children and adolescents will be reduced to less than 5% in five years

**DEFINITION**

Tobacco use of minors have been shown to contribute to life time use pattern in adulthood. Tobacco use have been shown to contribute to many chronic illnesses in early adulthood

**Numerator:**

children and adolescent tobacco users (smoke and/or chew) in the past 30 days

**Denominator:**

all children in the age group (lowest user to 18 and under)

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2020 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

YRBS, School Health Screening and Tobacco Youth Survey

**SIGNIFICANCE**

Yes as Palau has the highest rate of tobacco use in the nation for all age groups

SP() # 3

**PERFORMANCE MEASURE:**

Percent of pregnant women entering prenatal care in the first trimester

**STATUS:**

Active

**GOAL**

Pregnant women will receive appropriate number of prenatal care that begins in the first trimester

**DEFINITION**

Prenatal care has been documented to play a great role in improved birth outcomes. Many problems associated with pregnancies can be managed so it does not negatively impact on the the birth and the process of birth. This measure is also a way we will use to improve birth outcomes for pregnant women.

**Numerator:**

Number of birthing mothers for the year

**Denominator:**

Number of prenatal clinics attended

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2020 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Public Health Information System; FHU Clinic Data Base

**SIGNIFICANCE**

Yes as First Trimester entry has consistently been low.

SP() # \_\_\_\_\_ 4

**PERFORMANCE MEASURE:**

Percent of Pre-term delivery

**STATUS:**

Active

**GOAL**

Pregnant women will have term labor

**DEFINITION**

Pre-term delivery is a major contributor to neonatal and fetal deaths. This has been on the rise in the past five years and may continue to affect child death rate if it is not stopped.

**Numerator:**  
preterm delivery

**Denominator:**  
all deliveries for the year

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2020 OBJECTIVE**

Infant, Fetal and Neonatal Death

**DATA SOURCES AND DATA ISSUES**

Birth and death certificates/fetal death certificates

**SIGNIFICANCE**

Yes. strategy for impacting of IMR

SP() # 5

**PERFORMANCE MEASURE:**

Percent of parents/caretakers who report that their children with special healthcare needs receive quality health care

**STATUS:**

Active

**GOAL**

CSHCN will have access to quality health care

**DEFINITION**

Quality of Care generally determines the success or unsuccessful of health systems in the eyes of clients and care takers. This will be measures by several qualifying questions that are asked in a SLAITS-like survey that is conducted every two years.

**Numerator:**

Number of positive response to the Quality of Care Question

**Denominator:**

Number of clients surveyed for the given year.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2020 OBJECTIVE**

NPMs1 - 5.

**DATA SOURCES AND DATA ISSUES**

SLAITS like survey

**SIGNIFICANCE**

Yes. One indicator of client satisfaction of health care

SP() # \_\_\_\_\_ 6

**PERFORMANCE MEASURE:**

Increase the percentage of well-child service attendance for 12, 24, & 36 months olds and 4 and 5 years olds, enumerated by age and averaged for the reporting year.

**STATUS:**

Active

**GOAL**

To improve children's health

**DEFINITION**

This new measure will require us to be diligent on well-baby services to assure that all children in Palau receives age appropriate health screening and intervention before school entry.

**Numerator:**

Number of well-baby services attendance by age

**Denominator:**

Number of occurent births for that year

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2020 OBJECTIVE**

Early Periodic Screening, Diagnosis and Treatment

**DATA SOURCES AND DATA ISSUES**

FHU Encounter Forms

**SIGNIFICANCE**

Improving the health of children from birth to adulthood as a way for decrease incidences of early on-set of chronic illnesses

SP() # \_\_\_\_\_ 7

**PERFORMANCE MEASURE:**

To increase the rate of children who are victims of abuse and neglect that receive appropriate and comprehensive services

**STATUS:**

Active

**GOAL**

To reduce child death rate

**DEFINITION**

Children 18 years and under who become victims of abuse and neglect as defined by Palau laws and are identified and referred to any service systems within the Ministry of Health

**Numerator:**

Number of children who are reported to any service systems within the ministry of health who are victims of abuse and neglect

**Denominator:**

All children 18 years and under as reported in the Census

**Units:** 1000 **Text:** Rate

**HEALTHY PEOPLE 2020 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

All data sources in the Ministry that collects such information including Health Encounter Information

**SIGNIFICANCE**

Improve the situation of children in compliance with MCH Title V mandate, Palau laws and ICRC.

SP() # 8

**PERFORMANCE MEASURE:**

To reduce the rate of suicide ideation for adolescents 11 to 19 years olds.

**STATUS:**

Active

**GOAL**

Improving child death rate

**DEFINITION**

Those children who respond to this question in the bi-ennial Palau YRBS

**Numerator:**

Number of children who respond positive to this question

**Denominator:**

All children who participate in the YRBS

**Units:** 1000 **Text:** Rate

**HEALTHY PEOPLE 2020 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Palau YRBS

**SIGNIFICANCE**

decreasing child death rate due to suicide and improving psychosocial health of children

SP() # \_\_\_\_\_ 9

**PERFORMANCE MEASURE:**

Increase the percentage of children enrolled in schools, in odd grades, who participate in the annual school health screening and intervention program.

**STATUS:**

Active

**GOAL**

Improve children's health

**DEFINITION**

All children enrolled in all schools of Palau, in odd grades, who take part in the annual school health screening.

**Numerator:**

children enrolled in schools, in odd grades, who participate in the annual school health screening

**Denominator:**

All children enrolled in all schools of Palau, in odd grades.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2020 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

School Health Screening Data Base

**SIGNIFICANCE**

Improving children's health

SP() # 10

**PERFORMANCE MEASURE:**

Reduce percentage of negative birth outcome by conducting periodic Infant Fetal Morbidity and Mortality Review (IFMMR).

**STATUS:**

Active

**GOAL**

To reduce perinatal death rate.

**DEFINITION**

Birth outcomes inclusive of all infant, fetal, and maternal mortality including births with morbidity associated with the birth process.

**Numerator:**

Number of Cases of morbidity and mortality who are reviewed.

**Denominator:**

Total number of at risk pregnancies and deliveries

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2020 OBJECTIVE**

perinatal death rate

**DATA SOURCES AND DATA ISSUES**

Delivery and birth records, BNH

**SIGNIFICANCE**

This measurement will help reduce infant and maternal morbidity and mortality.

SO() # \_\_\_\_\_ 1

**OUTCOME MEASURE:**

To reduce the percentage of birth with negative outcome through timely and routine IFMMMR Review

**STATUS:**

Active

**GOAL**

To decrease perinatal death rate

**DEFINITION**

birth outcome inclusive of all infant, fetal and maternal mortality including those births with morbidity associated with the birthing process.

**Numerator:**

all infant, fetal and morbidity associated births for the year.

**Denominator:**

all occurent births for the year

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2020 OBJECTIVE**

perinatal death rate

**DATA SOURCES AND DATA ISSUES**

Delivery and birthing records, Belau National Hospital

**SIGNIFICANCE**

Reduction in Infant Mortality and Fetal Deaths

**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: PW

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.

	2007	2008	Annual Indicator Data		
	2009	2010	2011		
Annual Indicator	28.9	28.7	64.0	21.2	35.0
Numerator	4	4	9	3	5
Denominator	1,385	1,396	1,407	1,418	1,430

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

- Section Number:** Form17\_Health Systems Capacity Indicator #01  
**Field Name:** HSC01  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 Data source is Hospital Information System.
- Section Number:** Form17\_Health Systems Capacity Indicator #01  
**Field Name:** HSC01  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 Data taken from Hospital Information system.
- Section Number:** Form17\_Health Systems Capacity Indicator #01  
**Field Name:** HSC01  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 Data collected from Medical Ward discharge diagnosis for 2009. In this reporting we saw this indicator doubled. Other systematic, political and management reasons may have played a big role in this. these reasons played a part in the issue of acces such as cost, quality of care and availability of medicine. We are returning to normal and hope that this change continues.

**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.

	<u>Annual Indicator Data</u>				
	2007	2008	2009	2010	2011
<b>Annual Indicator</b>	_____	_____	_____	_____	_____
<b>Numerator</b>	_____	_____	_____	_____	_____
<b>Denominator</b>	_____	_____	_____	_____	_____
<p><b>Check this box if you cannot report the numerator because</b></p> <p>1. There are fewer than 5 events over the last year, and</p> <p>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.</p> <p><i>(Explain data in a year note. See Guidance, Appendix IX.)</i></p>					
<b>Is the Data Provisional or Final?</b>					Provisional
					Provisional

**Field Level Notes**

- Section Number:** Fom17\_Health Systems Capacity Indicator #02  
**Field Name:** HSC02  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 We are unable to provide data for 2011. MCH Scheduling and Tracking system in the clinic had technical problems during the year. At present the system is running but most of the data for 2011 were corrupted.
- Section Number:** Fom17\_Health Systems Capacity Indicator #02  
**Field Name:** HSC02  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 Distribution of well baby visits by schedules, babies delivered in 2009  
 Number of deliveries for 2009 = 247 (n)  
 Visit Schedule Age at visit Freq Percent visited  
 2 wks 2 - 5 wks 253 102.4  
 6 wks 6 - 11 wks 244 98.8  
 3 mos (12 wks) 12 - 15 wks 194 78.5  
 4 mos (16 wks) 16 - 19 wks 195 78.9  
 5 mos (20 wks) 20 - 23 wks 133 53.8  
 6 mos (24 wks) 24 - 27 wks 156 63.2  
 7 mos (28 wks) 28 - 35 wks 193 78.1  
 9 mos ( 36 wks) 36 - 51 wks 231 93.5  
 Average: 80.9

Data is extracted from the MCH Scheduling and Tracking system. Those appointments that were marked as attended or walkin were included in the above count of clients. Frequency column is the number of babies who came for at least 1 visit in the visit schedule. Percent visit is computed by dividing the number of clients per schedule by the number of births in 2009.
- Section Number:** Fom17\_Health Systems Capacity Indicator #02  
**Field Name:** HSC02  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 Distribution of well baby visits by schedules, babies delivered in 2008  
 Number of deliveries for 2008 = 295 (n)  
 Visit Schedule Age at visit Freq Percent visited  
 2 wks 2 - 5 wks 258 87.5  
 6 wks 6 - 11 wks 286 96.9  
 3 mos (12 wks) 12 - 15 wks 229 77.6  
 4 mos (16 wks) 16 - 19 wks 151 51.2  
 5 mos (20 wks) 20 - 23 wks 82 27.8  
 6 mos (24 wks) 24 - 27 wks 115 39.0  
 7 mos (28 wks) 28 - 35 wks 172 58.3  
 9 mos ( 36 wks) 36 - 47 wks 213 72.2  
 Average: 63.8

Data is extracted from the MCH Scheduling and Tracking system. Those appointments that were marked as attended or walkin were included in the above count of clients. Frequency column is the number of babies who came for at least 1 visit in the visit schedule. Percent visit is computed by dividing the number of clients per schedule by the number of births in 2008

**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	_____	_____	_____	_____	_____
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.)

Is the Data Provisional or Final?

**Field Level Notes**

- 1. **Section Number:** Form17\_Health Systems Capacity Indicator #03

**Field Name:** HSC03

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

Palau does not participate in the SCHIP program.

- 2. **Section Number:** Form17\_Health Systems Capacity Indicator #03

**Field Name:** HSC03

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

/2012/ Although Palau does not participate in the SCHIP Program, Well-baby Services are provided routinely with scheduled childhood immunization. Therefore, there are well-baby clinic at 2 wks after birth, 3 months, 6 months and 9 months during the first year of life. 80.9% children born are visiting the well baby clinic for services that include but are not limited to physical and developmental assessments. Health education with parents on various topics from breastfeeding, childhood nutrition, child development stages are also done during these well-baby services.

Prenatal and postnatal services are offered in the clinics and mothers are encouraged to bring their babies in for their routine follow-ups and care. //2012//

- 3. **Section Number:** Form17\_Health Systems Capacity Indicator #03

**Field Name:** HSC03

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Please refer to narrative for HSCI #02.

**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.

	<u>Annual Indicator Data</u>				
	2007	2008	2009	2010	2011
<b>Annual Indicator</b>	<u>22.9</u>	<u>32.5</u>	<u>55.3</u>	<u>50.6</u>	<u>24.7</u>
<b>Numerator</b>	<u>64</u>	<u>53</u>	<u>151</u>	<u>125</u>	<u>61</u>
<b>Denominator</b>	<u>279</u>	<u>163</u>	<u>273</u>	<u>247</u>	<u>247</u>

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:**

Among the 247 live births in 2011, sixty one (24.7%) had greater than or equal to 80 percent on the Kotelchuck Index. The 26% decrease in 2011 from 50.6% in 2010 is due to the changes in reporting of data. In 2010, regardless of the time the prenatal began, all births that had greater than or equal to 80% on the Kotelchuck Index were reported. In 2011, among the births whose prenatal began on the first trimester were reported.

Using the WHO Standards, in 2011, 84.6% (209/247) of the pregnant women who gave birth had undergone 4 or more prenatal visits.

2. **Section Number:** Form17\_Health Systems Capacity Indicator #04

**Field Name:** HSC04

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

//2012/ In 2010, half (50.6%) of the deliveries had prenatal visits that were greater than or equal to 80 percent of the Kotelchuck Index //2012//

2010 Adequacy of Prenatal Care Utilization Index (APNCU) or Kotelchuck Index

Began Under 50% 50-79% 80-109% 110%+ Total

7-9 Month 30 29 20 11 90

5-6 Month 7 23 33 4 67

3-4 Month 8 20 42 3 73

1-2 Month 1 4 11 1 17

Total 46 76 106 19 247

Data source: FHU Data Base

WHO- In 2010, 81% (200/247) of pregnant women who gave birth had undergone four or more prenatal visits

Definition of Kotelchuck Index:

Kotelchuck, Milton, September 1994, "Overview of Adequacy of Prenatal Care Utilization Index"

<http://www.mchlibrary.info/databases/HSNRCPDFs/OverviewAPCUIndex.pdf>

Accessed September 08, 2011

3. **Section Number:** Form17\_Health Systems Capacity Indicator #04

**Field Name:** HSC04

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

There were 120 mothers who began ANC visit on the first trimester of pregnancy. Among them, 71 mothers received Adequate and Adequate Plus Care.

**HEALTH SYSTEMS CAPACITY #07A**

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

	<u>Annual Indicator Data</u>				
	2007	2008	2009	2010	2011
Annual Indicator	0	0	0		
Numerator					
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.)					
Is the Data Provisional or Final?					Provisional
					Provisional

**Field Level Notes**

1. **Section Number:** Form17\_Health Systems Capacity Indicator #07A  
**Field Name:** HSC07A  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 Palau does not participate in the Medicaid program.

2. **Section Number:** Form17\_Health Systems Capacity Indicator #07A  
**Field Name:** HSC07A  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 /2012/ Palau does not participate in medicaid program//2012//

3. **Section Number:** Form17\_Health Systems Capacity Indicator #07A  
**Field Name:** HSC07A  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 Palau does not participate in the Medicaid Program. Children's preventive services are provided free of charge to all children in Palau.

**HEALTH SYSTEMS CAPACITY #07B**

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

	<b>Annual Indicator Data</b>				
	2007	2008	2009	2010	2011
<b>Annual Indicator</b>	91.6	91.6	91.6	91.6	91.6
<b>Numerator</b>	480	480	480	480	480
<b>Denominator</b>	524	524	524	524	524
<b>Check this box if you cannot report the numerator because</b>					
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.				Yes	Yes
<i>(Explain data in a year note. See Guidance, Appendix IX.)</i>					
<b>Is the Data Provisional or Final?</b>				Provisional	Provisional

**Field Level Notes**

- Section Number:** Form17\_Health Systems Capacity Indicator #07B  
**Field Name:** HSC07B  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
Palau does not participate in the Medicaid Program. Children aged 6 through 9 are provided dental screening as part of the school health screening.
- Section Number:** Form17\_Health Systems Capacity Indicator #07B  
**Field Name:** HSC07B  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
/2012/ Palau does not participate in the Medicaid Program. Children aged 6 through 9 years are provided dental screening as part of the school health screening //2012//
- Section Number:** Form17\_Health Systems Capacity Indicator #07B  
**Field Name:** HSC07B  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
Palau does not participate in Medicaid program. Dental screening and intervention is integrated into the annual school health screening for school age children.

**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.

	<u>Annual Indicator Data</u>				
	2007	2008	2009	2010	2011
Annual Indicator	_____	_____	_____	_____	_____
Numerator	_____	_____	_____	_____	_____
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.)					
Is the Data Provisional or Final?				Provisional	Provisional

**Field Level Notes**

1. **Section Number:** Form17\_Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2011

**Field Note:**

Palau does not participate in the SSI beneficiaries.

2. **Section Number:** Form17\_Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

/2012/ Palau does not participate in SSI Beneficiaries. Under current service system, children with special needs who require rehabilitative services are provided care by the special education program, however, the Belau National Hospital rehabilitative services unit provide consultation services to special education on a case by case basis//2012//

3. **Section Number:** Form17\_Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Rehabilitative services for CSHCN is provided by the Special Education Program. At this time, data is not available to our program for reporting. We will work in the coming years to improve this process. Palau does not participate in the SSI Program.

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

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) <i>Percent of low birth weight (&lt; 2,500 grams)</i>	2011	Matching data files	0	7.7	7.7
b) <i>Infant deaths per 1,000 live births</i>	2011	Matching data files	0	4	4
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2011	Matching data files	0	47.8	47.8
d) <i>Percent of pregnant women with adequate prenatal care (observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])</i>	2011	Matching data files	0	24.7	24.7

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

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

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

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) <i>Infants (0 to 1)</i>		_____
b) <i>Medicaid Children</i> (Age range _____ to _____ ) (Age range _____ to _____ ) (Age range _____ to _____ )		_____ _____ _____
c) <i>Pregnant Women</i>		_____

**FORM NOTES FOR FORM 18**

Palau does not participate in the SCHIP Program.

**FIELD LEVEL NOTES**

1. **Section Number:** Form18\_Indicator 06 - Medicaid  
**Field Name:** Med\_Infant  
**Row Name:** Infants  
**Column Name:**  
**Year:** 2013  
**Field Note:**  
Palau does not participate in the Medicaid Program.
2. **Section Number:** Form18\_Indicator 06 - Medicaid  
**Field Name:** Med\_Children  
**Row Name:** Medicaid Children  
**Column Name:**  
**Year:** 2013  
**Field Note:**  
Palau does not participate in the Medicaid Program.
3. **Section Number:** Form18\_Indicator 06 - Medicaid  
**Field Name:** Med\_Women  
**Row Name:** Pregnant Women  
**Column Name:**  
**Year:** 2013  
**Field Note:**  
Palau does not participate in the Medicaid Program.
4. **Section Number:** Form18\_Indicator 06 - SCHIP  
**Field Name:** SCHIP\_Infant  
**Row Name:** Infants  
**Column Name:**  
**Year:** 2013  
**Field Note:**  
Palau does not participate in the SCHIP program.
5. **Section Number:** Form18\_Indicator 06 - SCHIP  
**Field Name:** SCHIP\_Children  
**Row Name:** SCHIP Children  
**Column Name:**  
**Year:** 2013  
**Field Note:**  
Palau does not participate in the SCHIP program.
6. **Section Number:** Form18\_Indicator 06 - SCHIP  
**Field Name:** SCHIP\_Women  
**Row Name:** Pregnant Women  
**Column Name:**  
**Year:** 2013  
**Field Note:**  
Palau does not participate in the SCHIP program.

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

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

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)
<b>ANNUAL DATA LINKAGES</b>		
Annual linkage of infant birth and infant death certificates	3	No
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	1	No
Annual linkage of birth certificates and WIC eligibility files	1	No
Annual linkage of birth certificates and newborn screening files	3	Yes
<b>REGISTRIES AND SURVEYS</b>		
Hospital discharge survey for at least 90% of in-State discharges	1	No
Annual birth defects surveillance system	2	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: **PW**

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	No
Other: <u>School Health Screening</u>	3	Yes
Youth Tobacco Survey	3	No

\*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: PW

Form Level Notes for Form 20

None

**HEALTH STATUS INDICATOR #01A**

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

	<u>Annual Indicator Data</u>				
	2007	2008	2009	2010	2011
Annual Indicator	9.0	7.8	11.4	6.9	7.7
Numerator	25	23	31	17	19
Denominator	279	295	272	247	247

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:**

In 2011, 7.7% of the newborns weigh less than 2500 grams. There was a slight increase of this indicator from 6.6% in 2010 to 7.7% in 2011.

2. **Section Number:** Form20\_Health Status Indicator #01A

**Field Name:** HSI01A

**Row Name:**

**Column Name:**

**Year:** 2010

**Field Note:**

/2012/ In year 2010, 6.9 percent babies born weigh less than 2500 grams//2012//

**HEALTH STATUS INDICATOR #01B**

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

	2007	2008	Annual Indicator Data		
			2009	2010	2011
Annual Indicator	<u>7.5</u>	<u>7.8</u>	<u>10.4</u>	<u>6.9</u>	<u>7.7</u>
Numerator	<u>21</u>	<u>23</u>	<u>28</u>	<u>17</u>	<u>19</u>
Denominator	<u>279</u>	<u>295</u>	<u>268</u>	<u>247</u>	<u>247</u>

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: Fom20\_Health Status Indicator #01B

Field Name: HSI01B

Row Name:

Column Name:

Year: 2011

Field Note:

In 2011, there were 19 singleton births weighing less than 2500 grams. This is a slight increase from 6.6% in 2010 to 7.7% in 2011.

2. Section Number: Fom20\_Health Status Indicator #01B

Field Name: HSI01B

Row Name:

Column Name:

Year: 2010

Field Note:

/2012/ In 2010, there were 17 live singleton births weighing less than 2500 grams //2012//

**HEALTH STATUS INDICATOR #02A**

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

	2007	2008	Annual Indicator Data		
			2009	2010	2011
Annual Indicator	0.4	0.0			0.0
Numerator	1	0			0
Denominator	279	295			247

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?

Yes

Yes

Provisional

Provisional

**Field Level Notes**

1. Section Number: Form20\_Health Status Indicator #02A

Field Name: HSI02A

Row Name:

Column Name:

Year: 2011

Field Note:

There were no newborns weighing less than 1500 grams in 2011.

2. Section Number: Form20\_Health Status Indicator #02A

Field Name: HSI02A

Row Name:

Column Name:

Year: 2010

Field Note:

//2012// In 2010 there were 2 very low birth weight infants at 709 and 1418 grams. The baby who weighed 709 grams died less than 1 hour in the hospital //2012//

3. Section Number: Form20\_Health Status Indicator #02A

Field Name: HSI02A

Row Name:

Column Name:

Year: 2009

Field Note:

The weights of the two (2) very low birth weight babies are 964 grams and 1276 grams. The 964 grams baby accounted for one of the neonatal deaths.

**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	0.4	0.0			0.0
Numerator	1	0			0
Denominator	279	295			247

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?

Yes

Yes

Provisional

Provisional

**Field Level Notes**

1. Section Number: Form20\_Health Status Indicator #02B

Field Name: HSI02B

Row Name:

Column Name:

Year: 2011

Field Note:

There were no singleton births weighing less than 1500 grams in 2011.

2. Section Number: Form20\_Health Status Indicator #02B

Field Name: HSI02B

Row Name:

Column Name:

Year: 2010

Field Note:

//2012// In 2010 there were 2 very low birth weigh infants at 709 and 1418 grams. The baby who weighed 709 grams died less than 1 hour in the hospital.//2012//

3. Section Number: Form20\_Health Status Indicator #02B

Field Name: HSI02B

Row Name:

Column Name:

Year: 2009

Field Note:

The weights of the two (2) very low birth weight babies are 964 grams and 1276 grams. The 964 grams baby accounted for one of the neonatal deaths

**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
<b>Annual Indicator</b>	61.5	61.5	61.5	0.0	0.0
<b>Numerator</b>	3	3	3	0	0
<b>Denominator</b>	4,875	4,875	4,875	4,993	5,033

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:** Fom20\_Health Status Indicator #03A

**Field Name:** HSI03A**Row Name:****Column Name:****Year:** 2011**Field Note:**

In 2011, there were no deaths due to unintentional injuries among children aged 14 and younger.

2. **Section Number:** Fom20\_Health Status Indicator #03A

**Field Name:** HSI03A**Row Name:****Column Name:****Year:** 2010**Field Note:**

/2012/ In 2010, there were no death among children aged 14 and younger due to unintentional injuries.//2012//

3. **Section Number:** Fom20\_Health Status Indicator #03A

**Field Name:** HSI03A**Row Name:****Column Name:****Year:** 2009**Field Note:**

Palau is unable to provide data for this indicator. Data is obtained through the Ministry of Health Information System. In year 2008 and 2009, program was unable to obtain data. Ministry of Health Information System is unable to provide the require data for this indicator. For 2009, we are using data from year 2007 to prepopulate this indicator.

**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.

	2007	2008	Annual Indicator Data		
			2009	2010	2011
Annual Indicator	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>
Numerator	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Denominator	<u>4,875</u>	<u>4,875</u>	<u>4,875</u>	<u>4,993</u>	<u>5,033</u>

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:

In 2011, there were no unintentional deaths due to motor vehicle crashes among children aged 14 and younger.

2. Section Number: Form20\_Health Status Indicator #03B

Field Name: HSI03B

Row Name:

Column Name:

Year: 2010

Field Note:

In 2010, there were no death among children aged 14 and younger due to motor vehid crashes.

3. Section Number: Form20\_Health Status Indicator #03B

Field Name: HSI03B

Row Name:

Column Name:

Year: 2009

Field Note:

There were no deaths due to motor vehicles crashes for children in this age group for 2009.

**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.

	2007	2008	Annual Indicator Data		
			2009	2010	2011
Annual Indicator	<u>72.2</u>	<u>          </u>	<u>          </u>	<u>0.0</u>	<u>0.0</u>
Numerator	<u>2</u>	<u>          </u>	<u>          </u>	<u>0</u>	<u>0</u>
Denominator	<u>2,772</u>	<u>          </u>	<u>          </u>	<u>2,839</u>	<u>2,862</u>
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.)			<u>Yes</u>	<u>          </u>	<u>          </u>
Is the Data Provisional or Final?				Provisional	Provisional

**Field Level Notes**

- Section Number:** Fom20\_Health Status Indicator #03C  
**Field Name:** HSI03C  
**Row Name:**  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
 In 2011, there were no unintentional deaths due to motor vehicle crashes among youth aged 15 through 24.
- Section Number:** Fom20\_Health Status Indicator #03C  
**Field Name:** HSI03C  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 /2012/ In 2010, there were no death from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years. One death of male aged 20 years old was due to smoke inhalation inside a burning house.//2012//
- Section Number:** Fom20\_Health Status Indicator #03C  
**Field Name:** HSI03C  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 One (1) sixteen year old male died due to car accident in 2009.

**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
<b>Annual Indicator</b>	1,620.5		1,211.4	620.9	437.1
<b>Numerator</b>	79		60	31	22
<b>Denominator</b>	4,875		4,963	4,963	5,033

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:**

Data source is Hospital Information System. In 2011, there were 22 nonfatal injuries among children aged 14 years and younger. Although changes in the rate is not statistically significant (p-value at 0.21), there was a decrease from 620.9 in 2010 to 437.1 in 2011.

2. **Section Number:** Form20\_Health Status Indicator #04A

**Field Name:** HSI04A**Row Name:****Column Name:****Year:** 2010**Field Note:**

/2012/ In 2010, there were 31 cases of nonfatal injuries for children age 14 and younger. This is a preliminary number and we would still have to verify it //2012//

3. **Section Number:** Form20\_Health Status Indicator #04A

**Field Name:** HSI04A**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data for this indicator were collected from the surgical ward which accounted for 28 cases and from the encounters database that accounted for 32 cases. These injuries were referenced to ICD 9 codes 800-999.

**HEALTH STATUS INDICATOR #04B**

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

		<u>Annual Indicator Data</u>				
		2007	2008	2009	2010	2011
Annual Indicator	_____	41.0	_____	_____	_____	_____
Numerator	_____	2	_____	_____	_____	_____
Denominator	_____	4.875	_____	_____	_____	_____
<p>Check this box if you cannot report the numerator because</p> <p>1. There are fewer than 5 events over the last year, and</p> <p>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.  <i>(Explain data in a year note. See Guidance, Appendix IX.)</i></p>						
				Yes	Yes	Yes
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:**  
 For 2011, there was 1 nonfatal injury due to motor vehicle crash among children aged 14 years and younger. Rate per 100,000 is 19.9 (1/5033). Data source for this indicator is the Hospital Information System.
2. **Section Number:** Form20\_Health Status Indicator #04B  
**Field Name:** HSI04B  
**Row Name:**  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
 /2012 In 2010, there were 2 cases of nonfatal injuries due to motor vehicle crashes among children aged 14 and younger.//2012//
3. **Section Number:** Form20\_Health Status Indicator #04B  
**Field Name:** HSI04B  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 There was no data available for 2008 as for 2009 there no reported cases for this age group. Source of data is the Ministry of Justice

**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
<b>Annual Indicator</b>	<u>36.1</u>	<u>36.1</u>	<u>36.1</u>	<u>317.0</u>	<u>594.0</u>
<b>Numerator</b>	<u>1</u>	<u>1</u>	<u>1</u>	<u>9</u>	<u>17</u>
<b>Denominator</b>	<u>2,772</u>	<u>2,772</u>	<u>2,772</u>	<u>2,839</u>	<u>2,862</u>

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:** Fom20\_Health Status Indicator #04C

**Field Name:** HSI04C**Row Name:****Column Name:****Year:** 2011**Field Note:**

There were 17 cases nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years. Data source for this indicator is the Hospital Information System.

2. **Section Number:** Fom20\_Health Status Indicator #04C

**Field Name:** HSI04C**Row Name:****Column Name:****Year:** 2010**Field Note:**

/2012/ 2010 data was taken from the hospital information system.//2012//

3. **Section Number:** Fom20\_Health Status Indicator #04C

**Field Name:** HSI04C**Row Name:****Column Name:****Year:** 2009**Field Note:**

Palau is unable to report on this indicator. No data available. The Ministry of Health Information System is unable to provide data for this indicator. 2007 data are being prepopulated for year 2009.

**HEALTH STATUS INDICATOR #05A**

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

	2007	2008	Annual Indicator Data		2011
			2009	2010	
Annual Indicator	22.4		44.1	359.2	311.9
Numerator	17		34	37	34
Denominator	759		771	103	109

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 #05A

Field Name: HSI05A

Row Name:

Column Name:

Year: 2011

Field Note:

In 2011, there were 34 reported cases of chlamydia among women aged 15 through 19 years old.

2. Section Number: Form20\_Health Status Indicator #05A

Field Name: HSI05A

Row Name:

Column Name:

Year: 2010

Field Note:

/ 2012/ Data source of the chlamydia cases is the HIV program. In 2010, there were 37 reported cases of chlamydia for women in age group 15-19. //2012//

**HEALTH STATUS INDICATOR #05B**

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

	2007	2008	Annual Indicator Data		
			2009	2010	2011
Annual Indicator	22.4		68.3	141.3	145.6
Numerator	82		254	167	198
Denominator	3,661		3,720	1,182	1,360

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: Fom20\_Health Status Indicator #05B

Field Name: HSI05B

Row Name:

Column Name:

Year: 2011

Field Note:

In 2011, there were 198 reported cases of chlamydia among women aged 20 through 44 years old. A significant increase from 68.3% in 2009 to 145.6% in 2011 (p-value=0.00) is due to changes in the definition of the denominator. In 2007 and 2009, we were using the projected population for this age group as the denominator while in 2010 and 2011 the number of screened women was used as the denominator.

2. Section Number: Fom20\_Health Status Indicator #05B

Field Name: HSI05B

Row Name:

Column Name:

Year: 2010

Field Note:

/2012/ In year 2010, there were 167 reported case of chlamydia for women age 20 through 44. //2012//

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: PW**

**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: 2011 Is this data from a State Projection? Yes Is this data final or provisional? Provisional

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	247	1	0	0	35	211	0	0
Children 1 through 4	1,183	12	0	0	130	1,041	0	0
Children 5 through 9	1,597	16	0	0	176	1,405	0	0
Children 10 through 14	2,008	20	0	0	221	1,767	0	0
Children 15 through 19	1,534	15	0	0	169	1,350	0	0
Children 20 through 24	1,328	13	0	0	146	1,169	0	0
Children 0 through 24	7,897	77	0	0	877	6,943	0	0

**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	247	0	0
Children 1 through 4	1,183	0	0
Children 5 through 9	1,597	0	0
Children 10 through 14	2,008	0	0
Children 15 through 19	1,534	0	0
Children 20 through 24	1,328	0	0
Children 0 through 24	7,897	0	0

FORM 21  
HEALTH STATUS INDICATORS  
DEMOGRAPHIC DATA  
STATE: PW

**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: 2011 Is this data from a State Projection? No Is this data final or provisional? Provisional

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	0	0	0	0	0	0	0	0
Women 15 through 17	4	0	0	0	0	4	0	0
Women 18 through 19	14	0	0	0	0	14	0	0
Women 20 through 34	169	0	0	0	25	144	0	0
Women 35 or older	60	1	0	0	10	49	0	0
Women of all ages	247	1	0	0	35	211	0	0

**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	0	0	0
Women 15 through 17	4	0	0
Women 18 through 19	14	0	0
Women 20 through 34	169	0	0
Women 35 or older	60	0	0
Women of all ages	247	0	0

FORM 21  
HEALTH STATUS INDICATORS  
DEMOGRAPHIC DATA  
STATE: PW

**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: 2011 Is this data from a State Projection? No Is this data final or provisional? Provisional

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	1	0	0	0	0	1	0	0
Children 1 through 4	1	0	0	0	0	1	0	0
Children 5 through 9	2	0	0	0	0	2	0	0
Children 10 through 14	1	0	0	0	0	1	0	0
Children 15 through 19	1	0	0	0	0	1	0	0
Children 20 through 24	5	0	0	0	0	5	0	0
Children 0 through 24	11	0	0	0	0	11	0	0

**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	1	0	0
Children 1 through 4	1	0	0
Children 5 through 9	2	0	0
Children 10 through 14	1	0	0
Children 15 through 19	1	0	0
Children 20 through 24	5	0	0
Children 0 through 24	11	0	0

FORM 21  
HEALTH STATUS INDICATORS  
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**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	6,567	66	0	0	722	5,779	0	0	2011
Percent in household headed by single parent	15.0	0.0	0.0	0.0	15.0	15.0	0.0	0.0	2011
Percent in TANF (Grant) families	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2011
Number enrolled in Medicaid	0	0	0	0	0	0	0	0	2011
Number enrolled in SCHIP	0	0	0	0	0	0	0	0	2011
Number living in foster home care	0	0	0	0	0	0	0	0	2011
Number enrolled in food stamp program	0	0	0	0	0	0	0	0	2011
Number enrolled in WIC	0	0	0	0	0	0	0	0	2011
Rate (per 100,000) of juvenile crime arrests	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2011
Percentage of high school drop-outs (grade 9 through 12)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	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	6,567	0	0	2011
Percent in household headed by single parent	15.0	0.0	0.0	2011
Percent in TANF (Grant) families	0.0	0.0	0.0	2011
Number enrolled in Medicaid	0	0	0	2011
Number enrolled in SCHIP	0	0	0	2011
Number living in foster home care	0	0	0	2011
Number enrolled in food stamp program	0	0	0	2011
Number enrolled in WIC	0	0	0	2011
Rate (per 100,000) of juvenile crime arrests	0.0	0.0	0.0	2011
Percentage of high school drop-outs (grade 9 through 12)	0.0	0.0	0.0	2011

**FORM 21**  
**HEALTH STATUS INDICATORS**  
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**STATE: PW**

**HSI #10 - Demographics (Geographic Living Area)** *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*  
 Reporting Year: 2011    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	4,925
Living in rural areas	1,642
Living in frontier areas	0
<b>Total - all children 0 through 19</b>	<b>6,567</b>

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

**FORM 21**  
**HEALTH STATUS INDICATORS**  
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**HSI #11 - Demographics (Poverty Levels)** *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2011    Is this data from a State Projection? Yes    Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Total Population	20,882
Percent Below: 50% of poverty	30.7
100% of poverty	54.1
200% of poverty	90.4

**FORM 21**  
**HEALTH STATUS INDICATORS**  
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**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: 2011    Is this data from a State Projection? Yes    Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	6,567
Percent Below: 50% of poverty	30.7
100% of poverty	54.1
200% of poverty	90.4

**FORM NOTES FOR FORM 21**

None

**FIELD LEVEL NOTES**

None