

Children

Children's Health

	<u>Sub-category: Access to Health Care</u> <u>Priority: Second Tier Priority (+10 pts.)</u> <u>Primary Service Gaps:</u> Medical workforce size & distribution Primary care access points Insurance access & acceptance	<u>Nevada Statistics from the Fund For A Healthy Nevada Needs Assessment, 2003</u> In 2002, 15.8% of Nevadans did not have any health insurance Nevada ranks 37th in the nation of the ratio of physicians to total population <u>Funding Sources for State Fiscal Year 2003-2004</u> FFHN \$5,258,832				
<u>Tab #</u>	<u>Applicant: (continuation applicants)</u>	<u>Av. Score</u>	<u>05-06 Request</u>	<u>Other Funding*</u>	<u>Pop. Served/#</u>	<u>FFHV AV. Unit cost**</u>
63	Clark County Health District School Based Health Centers	102.5	\$939,085	\$1,993,879	16,200 (D)	\$58 per youth
61	Care Chest of Sierra Nevada*** Emergency prescriptions for children	96	\$99,018	\$17,388	1125 (D)	\$88 per youth
64	Community Chest, Inc. Community Health Services (COW bus)	73	\$48,914	\$2,000	500 (D)	\$98 per youth
	<u>Applicant: (new applicants)</u>	<u>Av. Score</u>	<u>05-06 Request</u>	<u>Other Funding*</u>	<u>Pop. Served/#</u>	<u>FFHV AV. Unit cost**</u>
83	Casa of Carson City Mental & Developmental Screenings	79.5	\$220,862	\$21,648	500 (D)	\$442 per child
94	Nevada State College school-based health center at Basic HS	76.5	\$457,898	\$85,570	9,200 (D)	\$50 per youth

* Other funding includes secured or pending funds identified in the budget.

**FFHN average unit cost reflects requested funds divided by number directly and indirectly served.

*** Budget broken out by children served (see Disabled #37)

EXHIBIT HealthyNV Document consists of 10 pages
 Entire document provided.
 Due to size limitations, pages ____ through ____ provided.
 A copy of the complete document is available through the Research Library
 (775-684-6827 or e-mail library@lcb.state.nv.us).
 Meeting Date 4/20/04

Children's Health

	<p><u>Sub-category: Chronic Disease</u></p> <p><u>Priority: First Tier Priority (+15 pts.)</u></p> <p><u>Primary Service Gaps:</u> Coordination of health education efforts Treatment/Support services for arthritis</p>	<p><u>Nevada Statistics from the Fund For A Healthy Nevada Needs Assessment, 2003</u> NV ranks 16th highest in country for cancer, 2nd leading cause of death in NV 7 out of every 10 deaths in NV due to a chronic disease 26.9% of all deaths in Nevada due to heart disease Diabetes is the 11th leading cause of death in Nevada</p> <p><u>Funding Sources for State Fiscal Year 2003-2004</u> FFHN \$1,357,000</p>																														
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Children's Health

	<p><u>Sub-category: Family Planning</u></p> <p><u>Priority: Second Tier Priority (+10 pts.)</u></p> <p><u>Primary Service Gaps:</u> Teen access to services Targeting of education resources</p>	<p><u>Nevada Statistics from the Fund For A Healthy Nevada Needs Assessment, 2003</u> 35% of NV high school students report being sexually active Nevada has highest teen pregnancy rate in the country for females 15-19</p> <p><u>Funding Sources for State Fiscal Year 2003-2004</u> FFHN \$100,000</p>										
<p><u>Tab #</u></p> <p>95</p>	<p><u>Applicant: (new applicants)</u></p> <p>Planned Parenthood Mar Monte Expand Saturday Teen Clinic basic reproductive health care</p>	<table border="1"> <thead> <tr> <th><u>Av. Score</u></th> <th><u>05-06 Request</u></th> <th><u>Other Funding*</u></th> <th><u>Pop. Served/#</u></th> <th><u>FFHV AV. Unit cost**</u></th> </tr> </thead> <tbody> <tr> <td>91</td> <td>\$53,227</td> <td>\$77,135</td> <td>1,000(D) 4,000(I)</td> <td>\$11 per individual</td> </tr> </tbody> </table>	<u>Av. Score</u>	<u>05-06 Request</u>	<u>Other Funding*</u>	<u>Pop. Served/#</u>	<u>FFHV AV. Unit cost**</u>	91	\$53,227	\$77,135	1,000(D) 4,000(I)	\$11 per individual
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Children's Health

<u>Sub-category: Fitness and Nutrition</u> <u>Priority: Second Tier Priority (+10 pts.)</u> <u>Primary Service Gaps:</u> Increased food access for children Increased education for healthy weight		<u>Nevada Statistics from the Fund For A Healthy Nevada Needs Assessment, 2003</u> 118,347 people served with emergency food assistance each month in Nevada Over 315,000 Nevadans are obese; another 600,000 are overweight <u>Funding Sources for State Fiscal Year 2003-2004</u> FFHN \$671,546				
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69	Food Bank of No. Nevada USDA child summer nutrition program	85	\$554,586	\$0	4,090 (D)	\$136 per child
	<u>Applicant: (new applicants)</u>	<u>Av. Score</u>	<u>05-06 Request</u>	<u>Other Funding*</u>	<u>Pop. Served/#</u>	<u>FFHV AV. Unit cost**</u>
82	Carson City Health Dept. fitness & nutrition education to 3rd graders	87.5	\$168,560	\$99,226	1,315 (D) 11,500 (I)	\$13 per child
103	Wells Family Resource Ctr. (Silver Sage)*** Nutrition & fitness program for children	89	\$44,522	\$1,672	106 (D)	\$396 per child
90	Friends of Channel 10 Practical Parenting - immunizations/obesity	80	\$197,950	\$908,000	1 million (I)	\$0.20 per Nevadan
99	UNLV Dept. Educational Leadership PATHS Healthier Schools Program	77.5	\$385,050	\$0	6,900 (D)	\$56 per child
88	Elko County School District Fitness equipment & health materials & research study	76.5	\$99,549	\$33,262	650 (D)	\$153 per student
89	Elko County School District Pedometer program	71	\$49,913	\$0	1700 (D)	\$29 per student

Children's Health

	<p><u>Sub-category: Injury/Violence Prevention</u></p> <p><u>Priority: Second Tier Priority (+10 pts.)</u></p> <p><u>Primary Service Gaps:</u> Services for children exposed to dom.violence Trng.- domestic violence identification Child Abuse Prevention programs</p>	<p><u>Nevada Statistics from the Fund For A Healthy Nevada Needs Assessment, 2003</u> 11% of high school youth report they have attempted suicide 54% of the time children are present during an incident of domestic violence 2,731 known and suspected pre-K-high school homeless youth in NV</p> <p><u>Funding Sources for State Fiscal Year 2003-2004</u> FFHN \$476,256</p>				
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<p>67</p>	<p>Family Counseling Services Sexual abuse treatment camp</p>	<p>90</p>	<p>\$80,354</p>	<p>\$58,536</p>	<p>60-90 (D)</p>	<p>\$893 per child</p>
<p>65</p>	<p>Community Chest, Inc. Homeless Youth Community Educ/Trng.</p>	<p>86.5</p>	<p>\$58,432</p>	<p>\$1,920</p>	<p>210 (D) 5,000 (I)</p>	<p>\$11 per youth</p>
	<p><u>Applicant: (new applicants)</u></p>	<p><u>Av. Score</u></p>	<p><u>05-06 Request</u></p>	<p><u>Other Funding*</u></p>	<p><u>Pop. Served/#</u></p>	<p><u>FFHV AV. Unit cost**</u></p>
<p>84</p>	<p>The Children's Cabinet, Inc. Bullying Prevention Education</p>	<p>98.5</p>	<p>\$184,424</p>	<p>\$25,000</p>	<p>12,820 (D) 2,000,000 (I)</p>	<p>\$0.09 per individual</p>
<p>104</p>	<p>Z Squared-The Early Grades Non-Violence Curriculum Trng.</p>	<p>58</p>	<p>\$53,120</p>	<p>\$2,480</p>	<p>160 (D) 3,600 (I)</p>	<p>\$14 per individual</p>

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Children's Health

	<p><u>Sub-category: Maternal & Infant Health</u></p> <p><u>Priority: Second Tier Priority (+10 pts.)</u></p> <p><u>Primary Service Gaps:</u> Access to and utilization of prenatal care</p>	<p><u>Nevada Statistics from the Fund For A Healthy Nevada Needs Assessment, 2003</u> In 2001 over 24% of Nevada mothers had no or late prenatal care In 2001 the infant mortality rate was 5.24 per 1,000 live births</p> <p><u>Funding Sources for State Fiscal Year 2003-2004</u></p> <table border="0"> <tr> <td>WIC</td> <td>\$26,601,000</td> <td>FFHN</td> <td>\$500,128</td> </tr> <tr> <td></td> <td></td> <td>Family To Family</td> <td>\$1,331,901</td> </tr> </table>					WIC	\$26,601,000	FFHN	\$500,128			Family To Family	\$1,331,901
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<p>71</p>	<p>Parent Educ. & Child Enrichment (PEACE) Child health & Safety Education</p>	<p>94.5</p>	<p>\$290,358</p>	<p>\$826,847</p>	<p>2000 (D) 2,500(I)</p>	<p>\$65 per individual</p>								
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<p>92</p>	<p>Nevada Health Centers Perinatal Services for Clark & Elko</p>	<p>101</p>	<p>\$315,855</p>	<p>\$1,464,549</p>	<p>1,010 (D)</p>	<p>\$313 per individual</p>								
<p>98</p>	<p>UMC Prenatal Prenatal care for uninsured</p>	<p>77.5</p>	<p>\$225,650</p>	<p>\$146,160</p>	<p>1,920 (D)</p>	<p>\$118 per individual</p>								
<p>97</p>	<p>UMC Family Resource Center Pediatric Medical Home</p>	<p>77</p>	<p>\$166,864</p>	<p>\$185,400</p>	<p>750-900 (D)</p>	<p>\$185 per child</p>								

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Children's Health

<p><u>Sub-category: Oral Health</u></p> <p><u>Priority: First Tier Priority (+15 pts.)</u></p> <p><u>Primary Service Gaps:</u> Oral Health Education Dental Sealants Increased Dental Services</p>		<p><u>Nevada Statistics from the Fund For A Healthy Nevada Needs Assessment, 2003</u> Nevada ranks last in the nation in the ratio of dentists per capita 13 of 14 rural and frontier counties are federally desinated dental underserved areas Only 1/3 of Nevada's children have dental sealants</p> <p><u>Funding Sources for State Fiscal Year 2003-2004</u> FFHN \$2,877,475</p>				
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62	Community College of So. NV Miles For Smiles Dental Program	107	\$1,128,417	\$1,049,277	2,700 (D)	\$418 per child
73	St. Mary's Foundation Dental screenings and treatment	99.5	\$392,882	\$58,000	4,123 (D)	\$95 per child
74	St. Rose Dominican Health Foundation No cost medical & dental care for children	96	\$459,426	\$414,306	410-566 (D)	\$812 per child
66	EOB Community Action Partnership Head Start Dental Care Program	71.5	\$291,600	\$21,912,904	270 (D)	\$1,080 per child
	<u>Applicant: (new applicants)</u>	<u>Av. Score</u>	<u>05-06 Request</u>	<u>Other Funding*</u>	<u>Pop. Served/#</u>	<u>FFHV AV. Unit cost**</u>
101	UNRSOM - Elko AHEC Rural Children's Dental Care	106	\$421,017	\$2,286,362	700 - 1,500 (D)	\$281 per child
86	Churchill County School District Dental screenings and care for grades K-8	87.5	\$225,450	\$92,560	3,500 (D)	\$64 per child
87	Community Services Agency Head Start Siblings Dental Care	51	\$200,000	0	90 (D)	\$2,222 per child

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Children's Health

	<p><u>Sub-category: Oral Health/Access</u></p> <p><u>Priority: First/Second Tier Priority (+12.5 pts.)</u></p> <p><u>Primary Service Gaps:</u> Oral Health Education Dental Sealants Increased Dental Services Increased Dental Services For Seniors</p>	<p><u>Nevada Statistics from the Fund For A Healthy Nevada Needs Assessment, 2003</u> Nevada ranks last in the nation in the ratio of dentists per capita 13 of 14 rural and frontier counties are federally designated dental underserved areas Only 1/3 of Nevada's children have dental sealants</p> <p><u>Funding Sources for State Fiscal Year 2003-2004</u></p> <table border="0"> <tr> <td>FFHN Access</td> <td>\$5,258,832</td> </tr> <tr> <td>FFHN Oral Health</td> <td>\$2,877,475</td> </tr> </table>					FFHN Access	\$5,258,832	FFHN Oral Health	\$2,877,475
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<p>70</p>	<p>Great Basin Primary Care Increase access to primary&oral health</p>	<p>97</p>	<p>\$2,188,444</p>	<p>\$5,030,586</p>	<p>21,919 (D)</p>	<p>\$100 per youth</p>				
<p>68</p>	<p>Family Resource Ctrs. Of NE Nevada Increased access to oral & health care</p>	<p>96.5</p>	<p>\$173,120</p>	<p>\$35,188</p>	<p>700(D) 1500(I)</p>	<p>\$79 per individual</p>				
<p>72</p>	<p>St. Mary's Foundation Expansion of Kid's Korner Program</p>	<p>93.5</p>	<p>\$744,640</p>	<p>\$1,343,210</p>	<p>6,000 (D)</p>	<p>\$124 per child</p>				
<p>75</p>	<p>United Way of So. Nevada Expansion of Making Access Possible</p>	<p>88</p>	<p>\$2,398,912</p>	<p>\$219,972</p>	<p>15,000 (D)</p>	<p>\$160 per child</p>				
<p>77</p>	<p>White Pine County School District Expansion of Student Health Initiative</p>	<p>81.5</p>	<p>\$662,246</p>	<p>\$181,166</p>	<p>1600 youth (D)</p>	<p>\$414 per youth</p>				

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Children's Health

	<p><u>Sub-category: Substance Abuse</u></p> <p><u>Priority: First Tier Priority (+15 pts.)</u></p> <p><u>Primary Service Gaps:</u> Prevention Programs Treatment Services for Youth Treatment Options for Women Treatment Services</p>	<p><u>Nevada Statistics from the Fund For A Healthy Nevada Needs Assessment, 2003</u> 13% of Nevada's population needs substance abuse counseling. Age-adjusted rate of drug-induced deaths is almost double national rate 31,010 drug & alcohol related arrests in 2001</p> <p><u>Funding Sources for State Fiscal Year 2003-2004</u> BADA \$38,890,990 FFHN \$1,032,823 (29% increase in BADA treatment & prevention funding over SFY2001-2)</p>																																																
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* Other funding includes secured or pending funds identified in the budget for this project.

** FFHV average unit cost reflects requested funds divided by number directly and indirectly served.

American Society of Addiction Medicine - Patient Placement Criteria for Adolescent Substance Abuse Disorders*

ASAM LEVEL I: OUTPATIENT

SERVICES FOR ADOLESCENTS – INDIVIDUAL COUNSELING

Non-residential specialized services on a scheduled basis for individuals between the ages of 13 and 18 with substance abuse problems. The program must provide but is not limited to professionally directed evaluation, group counseling, education, skill building, case management and individual counseling. A minimum of one individual counseling session must be offered to the client monthly. A unit is a minimum of 50 minutes of one-to-one, face-to-face counseling services.

ASAM LEVEL I: OUTPATIENT

SERVICES FOR ADOLESCENTS – GROUP COUNSELING

Non-residential specialized services on a scheduled basis for individuals with substance abuse problems that are between 13 and 18 years of age. The program must provide but is not limited to professionally directed evaluation, group counseling, education, skill building, case management and individual counseling. Group counseling should include therapy as well as process groups. A unit consists of a minimum of 50 minutes of group counseling

ASAM Level III.5 ADOLESCENTS

CLINICALLY MANAGED MEDIUM/HIGH INTENSITY RESIDENTIAL TREATMENT FOR ADOLESCENTS

A clinically managed high intensity residential program that provides a highly structured recovery environment for patients who suffer from impairment in functioning because of alcohol and/or other drug dependency or abuse and are between 13 and 18 years of age. The program must provide full-time supervision with at least one employee of the program present 24 hours a day. In addition to treatment services, the program must provide but is not limited to professionally directed evaluation, education, skill building, case management and supportive services. A unit consists of one day (24 hour period).*

ADOLESCENT

CPC/DETOXIFICATION (NON-ASAM) *Program provides 24-hour residential supervision to adolescents remanded to the custody of the program by law enforcement personnel due to intoxication. For those clients who exhibit symptoms of withdrawal, detoxification services are provided. All clients are provided referrals and coordination of care as clinically indicated. A unit consists of up to one day (24 hour period).*

* The criteria for Adolescent CPC/ Detoxification was created by the Nevada Bureau of Alcohol and Drug Abuse – there is no social detoxification category for adolescents in ASAM.