State of Utah Mission

To lead the nation as the best performing economy and be recognized as a premier global business destination.

Cultivate solutions for health care reform, public lands, and immigration.

Objective 1: Become the healthiest people in the nation through innovation, market principles and health care reform.

Utah Children with Special Health Care Needs Mission

To improve the health and quality of life for children with special health care needs, and their families, through early screening and detection, data integration, care coordination, education, intervention, and life transitions.

Utah Department of Health Mission

The Utah Department of Health’s mission is to protect the public’s health through preventing avoidable illness, injury, disability, and premature death; assuring access to affordable, quality health care; and promoting healthy lifestyles.
Utah Department of Health and
Utah Children with Special Health Care Needs

**Our Vision**
Our vision is for Utah to be a place where all people can enjoy the best health possible, where all can live and thrive in healthy and safe communities.

**Values**

**Respect** - we show respect to all individuals with whom we interact. We provide quality customer service. We create a workplace culture where we value, honor, and care for each other. We value differing opinions as part of a healthy dialogue.

**Integrity** - Our actions reflect an absolute commitment to ethical and honest behavior. We are straightforward and transparent with each other, our partners, and the people of Utah.

**Collaboration** - We engage each other, our partners, and the people of Utah in decision making, planning, and integrated effort. We strive to work effectively with others. We recognize the value of input and opinions gleaned from diverse populations and people.

**Evidence-based** - We provide health programs that benefit the people of Utah. We make innovative, insightful, and effective decisions based on good science and current, accurate data. We are efficient and timely in making decisions and taking actions. Within program guidelines and budget, we do the right things in order to produce the greatest benefit and the greatest return on the public’s investment.
C SHCN Strategic Priorities 

Priority #1 
Family, Professional and Stakeholder Partnerships 
Families, professionals and stakeholders will partner in decision making at all levels. 
- Ensure family and customer satisfaction. 
- Collaborate with families, professionals and stakeholders to strengthen relationships and receive input on services. 
- Increase partnerships with families and key stakeholders.

Priority #2 
Access to Services 
Provide Services and Supports. Services will be accessible and organized in a manner which supports family-centered care. 
- Increase public awareness of CSHCN Bureau Programs. 
- Maintain the CSHCN Bureau website to effectively guide and assist the public.
- Inform the public on key CSHCN health issues, efforts and successes. 
- Screen children early, appropriately and follow up in a timely manner. 
- Educate and support CSHCN families on private and public insurance options. 
- Educate families and partners on systems of care for children to receive services in a well-functioning, timely and organized manner. 
- Utilize and link health data to improve health outcomes.

Priority #3 
Medical Home, Care Coordination and Life Transitions 
Align families with a medical home, coordination of care, and transition education. 
- Increase communication, resources and awareness of service options within a medical home. 
- Coordinate care to assist families in navigating the healthcare system. 
- Focus on high risk populations. 
- Provide children and youth with special health care needs the opportunity to receive the services necessary to transition through all aspects of life. 
- Encourage awareness and education for healthcare, education, leisure, work, housing and independence. 
- Utilize and link health data to coordinate care, treatment and improve health outcomes. 
- Integrate CSHCN programs and services optimizing collaborative care networks.

Priority #4 
Cultural and Program Competence 
Promote Environments of Cultural and Program Competence. 
Children with Special Health Care Needs and their families will receive culturally and linguistically appropriate services (CLAS). 
- Provide CLAS services which consider race, ethnicity, religion, and language. 
- Develop and utilize performance measures and objectives specific to each program mission. 
- Ensure programs align with the UDOH Strategic Plan and budget guidelines.

Priority #5 
Staff Development and Quality Assurance 
Promote a positive working environment that supports individual and team development. 
Each employee will be valued and have the opportunity to develop and contribute to quality outcomes. 
- Provide CSHCN Bureau employee orientation with clear expectations, job description, and performance evaluations. 
- Offer frequent praise and feedback to employees. 
- Provide annual Bureau trainings, and monthly program improvement discussions. 
- Implement quality control measures and training to increase accuracy and timeliness in data input into CSHCN Bureau databases. 
- Cultivate an environment of Continuous Quality Improvement (CQI).
CSHCN Programs

Autism System Development

**Mission:**
The Autism Systems Development Program seeks to advance, educate and empower the lives of individuals affected by Autism Spectrum Disorder (ASD) in Utah by monitoring occurrence, reducing the age at first diagnosis, referring to services, facilitating research, and providing education and outreach.

**Measures:**
I. ASD prevalence and its dissemination to the public.
II. The median age of children diagnosed with an ASD.
III. The number of individuals with ASD that are referred to appropriate services.
IV. The number of research projects investigating risk factors that cause ASD.
V. The number of stakeholders accessing ASD resources from CSHCN.

Baby Watch Early Intervention Program (BWEIP)

**Mission:**
The purpose of the Baby Watch Early Intervention Program is to enhance early growth and development in infants and toddlers, who have developmental delays or disabilities or both, by providing individualized support and services to the child and their family.

**Measures:**
I. Eligible children who receive entry and exit outcome scores.
II. Improve accuracy and understanding of financial reports.
III. Statewide Early Intervention (EI) program compliance.
**Child Health Advanced Records Management (CHARM)**

**Mission:**
CHARM provides integrated data through a secure electronic system to health care providers to coordinate care, and improve efficiency and the health outcomes of the children and families they serve.

**Measures:**
I. The number of healthcare database/programs connected with CHARM.
II. The percentage of PII records that match between the systems connected to CHARM.
III. The number of healthcare providers accessing/using the CHARM web Interface.
IV. Product Usefulness and Customer Benefits of CHARM Web
V. Interface (CWI).

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**Children’s Hearing Aid Program (CHAP)**

**Mission:**
To optimize early communication and learning potentials for deaf/hard of hearing (DHH) infants and children by providing access to hearing aids to financially eligible families.

**Measures:**
I. The number of children fit with hearing aids provided by CHAP.
II. The number of eligible children on the waiting list to receive hearing aids from CHAP.

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**Cytomegalovirus (CMV) Public Education and Testing**

**(CMV Public Health Initiative)**

**Mission:**
The Early Hearing Detection and Intervention (EHDI) Program provides oversight to healthcare practitioners to ensure all newborns receive early screening, diagnosis and intervention for hearing loss.

**Measures:**
I. The number of children identified with cCMV.
II. Number of women aware of CMV.
III. The percentage of eligible children tested for cCMV.
**Early Hearing Detection and Intervention (EHDI)**

**Mission:**
The Early Hearing Detection and Intervention (EHDI) Program provides oversight to healthcare practitioners to ensure all newborns receive early screening, diagnosis and intervention for hearing loss.

**Measures:**
I. The percentage of newborns who are screened for hearing loss.
II. The percentage of diagnosed infants that have a confirmed diagnosis before 3 months of age.
III. The percentage of newborns and infants with a confirmed hearing loss who are enrolled in early intervention services prior to 6 months of age.

**Fostering Healthy Children Program (FHCP)**

**Mission:**
To facilitate and advocate for excellence in medical, dental, mental health and overall well-being in Utah’s foster care system.

**Measures:**
I. The completion rate of medical, dental, mental health (ASQ for kids up to 60 months of age), and HSOM assessments.
II. The percentage of complete and accurate medication profile line item entries in SAFE.

**Kurt Oscarson Children’s Organ Transplant Fund**

**Mission:**
To provide financial assistance to children under the age of 18 for initial organ transplant medical expenses through an interest-free loan.

**Measures:**
I. Contributions from State Income Tax Form
Utah Psychotropic Oversight Program (UPOP)

Mission:
The purpose of the Utah Psychotropic Oversight Program is to improve the well being of children and adolescents in foster care, receiving psychiatric treatment, by promoting safe, evidence-based, trauma-informed treatment, consistent with their mental health needs.

Measures:
I. Percentage of children in foster care that qualify for UPOP review.
II. Distribution of UPOP children in the risk categories low, intermediate and complex.
III. Percentage of UPOP children who require monitoring and receive it, according to the standard psychotropic medication guidelines¹.

Utah Birth Defects Network (UDBN)

Mission:
The Utah Birth Defect Network (UBDN) seeks to prevent birth defects and secondary disabilities by monitoring occurrence, referring to services, facilitating research, and providing education and outreach.

Performance Measures:
I. Percent of eligible UBDN cases that are completed within 2 years of being reported to the UBDN.
II. Newborns screened for Critical Congenital Heart Defects (CCHD) by pulse oximetry (unless non-pulse oximetry criteria met).
III. Infants with specific birth defects will be referred to Early intervention.
IV. Percentage of women ages 18-44 taking Folic acid (BRFSS).

Technology Dependent Waiver Program

Mission:
The Technology Dependent Waiver program is responsible for the Medicaid delegated administrative activities for children and families served under the home and community-based waiver program to ensure services and supports are available to safely care for participants at home.

Measures:
I. Number of individuals on the waiting list by technology and date of referral.
II. Number of admissions, disenrollments (including the reasons), and the age of those on the list.
III. Impact and effectiveness of the services and supports offered by the waiver program to the child and their family.
Organ Donation

Mission:
The mission of the Organ Donation Contribution Fund is to promote and support organ donation, assist in maintaining and operating a statewide organ donation registry, and provide donor awareness education.

Measures:
I. The percentage of organ donations from the Division of Motor Vehicles and the Driver License Division.
II. The percentage of donor registrants statewide.
III. The number of organizations educated on organ donation.