GRANT ANALYSIS FORM OPERATING & CAPITAL GRANT PROJECTS/PROGRAMS

Department/Division: Health/Public Health Services Contact Person & Phone No: Clarice Hall-Moore, #8804	
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Category of Request	
□ New Grant	
Grant Continuation	Previous Council File No. 001302
☐ Change in Previously Approved Grant	Previous Council File No.
Project/Program Title: Women, Infants and Children's Grant	
Grantor Agency: U.S. Department of Agriculture through the State of Wisconsin Division of Health and Family Service	es
Grant Application Date: N/A Continuing	Anticipated Award Date: January 1, 2001
Please provide the following information:	
Description of Grant Project/Program (Include Target Locations and Popular)	ulations):
	ms and to improve the health status of low income, at-risk pregnant or breast feeding aston Community Health Center, Northwest Health Center and the Keenan Health
2. Relationship to City-wide Strategic Goals and Departmental Objectives:	
birth weight and infant mortality. Good prenatal care is effective in lov	e health and safety of women and children. Specifically, this program addresses low wering these risk factors as well as other risks of adverse pregnancy outcomes consume inadequate amounts of key nutrients needed during pregnancy, during
3. Need for Grant Funds and Impact on Other Departmental Operations (Ap	plies only to Programs):
In addition to the nutrition services, children attending WIC clinics were Children with lead elevations were provided follow-up.	e screened for lead poisoning and give immunizations referrals when necessary

This program currently funds 19 positions and provides funding for program activities.

4. Results Measurement/Progress Report (Applies only to Programs):

The grant period is January 1, 2002 through December 31, 2002.

5. Grant Period, Timetable and Program Phase-out Plan:

7. If Possible, Complete Grant Budget Form and Attach to Back.

See attached.

6. Provide a List of Subgrantees:

N/À