GRANT ANALYSIS FORM OPERATING & CAPITAL GRANT PROJECTS/PROGRAMS

Depart	tment/Div	rision:	Health Departme	ent/Family and Community	/ Health Division		
Contac	ct Person	& Phone	e No: Sarah [DeSmidt (Program Manag	er) x6732, Rosamaria Martinez (FCH Direc	tor) x6629
Cate	egory of R	Request					
		New G	rant				
		Grant	Continuation		Previous Council	File No.	
		Chang	e in Previously Ap	proved Grant	Previous Council	File No.	250359
Projec	t/Progran	n Title:	2025 WIC Brea	astfeeding Peer Counselo	Program Grant		
Granto	or Agency	/ :	US Depa	rtment of Agriculture throu	gh the State of Wisconsin Divisi	on of Healt	h and Family Services
Grant .	Grant Application Date:		N/A continuing		Anticipated Av	vard Date:	January 1, 2025
1.	The pur enrolled (Souths continue regular	pose of the Waller Health Heal	his grant is to prov /IC program. Supp th Center, Northwe the postpartum b k, but also at nigh	port will be provided either est Health Center, and Ke preastfeeding period. This t and on weekends; and t	en and families related to breastf via telephone or in-person at or enan Health Center). Initial cont grant has unique flexibility for pe he option to meet families in the	ne of our the act will be it ers to have	is grant supports participants currently ree Milwaukee Health Department WIC sites nitiated during pregnancy and support will a participant contact not only during the their homes.
2.	This pro program unfortur shown t	ogram rel n provide nately ma to increas	ates to the Health s breastfeeding su any families lack th se breastfeeding ir	upport to low income familine support they need to in	vision of promoting the health of ies. Breastfeeding has been sho tiate breastfeeding or meet their	wn to be the breastfeed	hildren, and families. Specifically, this ne optimal first food for infants but ding goals. Having peer support has been apport with a peer counselor and receive
3.	This pro	ogram wil his grant	I mostly be funded is intended to sup	d through the grant, with soport 3-4 breastfeeding pe	er counselors in addition to a sn	neral WIC	grant as needed. There will be no direct City of funding to be allocated to the WIC Health
4.	This pro	ogram ha onitor pro tion. Qua	s been funded to s gram progress rel	d to support 3-4 breastfeeding peer counselors in addition to a small portion of funding to be allocated to the WIC Health for program support, oversight and evaluation. gress Report (Applies only to Programs): ded to support approximately 1,316 pregnant and postpartum participants annually. There are quarterly reports in place to ress related to breastfeeding initiation/duration, breastfeeding rates by race/ethnicity, and reasons for breastfeeding urformance of the work of the breastfeeding peers will also be monitored annually, or more frequently during onboarding or			
5.	Grant Period, Timetable and Program Phase-Out Plan: The grant period is from Jan 1, 2025 – Dec 31, 2025 with the option to renew annually.						
6.	Provide	a list of	Subgrantees:				
7	If Possil	ble, com	olete Grant Budge	t Form and attach to back			

If Possible, complete Grant Budget Form and attach to back.