GRANT ANALYSIS FORM OPERATING & CAPITAL GRANT PROJECTS/PROGRAMS

Depai	rtment/Division: Health Department	
Contact Person & Phone No: Dr. Geof Swain x8172		
Cate	egory of Request	
	New Grant	
\boxtimes	Grant Continuation	Previous Council File No. 081098
	Change in Previously Approved Grant	Previous Council File No.
Proje	ct/Program Title: Milwaukee Intensive Nurse-Family P	artnership Program
Grant	or Agency: Columbia St. Mary's Hospital System	
Grant	Application Date: September 2006	Anticipated Award Date: March 30, 2009
Pleas	e provide the following information:	
1. De	scription of Grant Project/Program (Include Target Lo	cations and Populations):
St US	The Milwaukee Nurse-Family Partnership Program is an intensive home visiting program in which Public Health Nurses provide education, resources, a support to first time pregnant women and their children who reside in Zip codes 53204 and 53212. Nurse-Family Partnership (NFP) is an evidenced prograused in 290 municipalities in 22 other states. Research conducted on the NFP service delivery model, are improved health, well-being and self-sufficiency at-risk low income parents and their children.	
2. Re	Relationship to City-wide Strategic Goals and Departmental Objectives:	
This program meets the strategic goal of addressing disparity in birth outcomes and also the reduction of infant mortality.		y in birth outcomes and also the reduction of infant mortality.
3. Ne	eed for Grant Funds and Impact on Other Departmenta	l Operations (Applies only to Programs):
Ti	This grant will help address disparity in birth outcomes and also the reduction of infant mortality.	
4. Results Measurement/Progress Report (Applies only to Programs):		Programs):
Aı	Annual reports will be generated for birth outcomes, infant mortality, health and well-being of the clients served.	
5. Gra	ant Period, Timetable and Program Phase-out Plan:	
Ja	anuary 1, 2016 – December 31, 2016	
6. Pro	ovide a List of Subgrantees:	
	N/A	

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