From the President

2010 Annual Conference

By Phyllis J. Sloyer, RN, PhD, FAHM, FAAP

I can’t believe a year has passed since our last Annual Conference and, believe me, a lot has happened! One of my goals as President is to promote the dissemination of best practices among the maternal and child health community and to share innovations that can improve maternal and child health outcomes. I continue to be amazed at the extraordinary talent of our MCH community and it is a talent that needs to be shared. Recently, I had the opportunity to listen to some innovations and was struck by the need to make sure that we catalogue and publicize them. We waste precious time and resources reinventing the same strategy, practice, or policy. So, this Annual Conference is all about promoting our best ideas, practices, and innovations that are applied in the public and private sectors. AMCHP is all about you and I invite you to this exciting event. What better way to meet your colleagues and discuss our future as well as reflect on all of our successes as Title V turns 75!
From the CEO
Seven Reasons Why You Should Attend the Annual Conference!

By Mike R. Fraser, PhD

This is a tough year to plan a conference. With all the fiscal challenges facing states we know there are more barriers than usual to obtaining approvals for out of state travel and participating in professional development activities. And with all the changes to health policy in Washington we also face programmatic challenges as we try to plan a current and relevant program given potentially massive changes to health care and public health that may come just after our final program has been sent to the printer. Given these and other challenges what is a good meeting planner to do? Be flexible! We want to do all we can to get members and partners to the Conference and are working hard to prepare an agenda that allows plenty of space for late breaking news, updates, and sessions that include the latest news from here in Washington and across the country. So, join us – and let us know how we can help get you to AMCHP 2010.

As you get ready for the Conference, here is my list of top seven reasons to attend AMCHP 2010! I hope a few of these make it to your list of reasons to join us in March!

1. **Come for the learning.** We have more than 100 different trainings, workshops, posters and roundtable sessions to choose from facilitated by experts from across the country. Think of all you can learn while you are here in Washington to inform your work back home. Attending in person gives you the chance to efficiently and effectively collect important information – and share it when you get back home… and, speaking of sharing…

2. **Come ready to share.** While we spend a lot of time thinking about what you will learn at the Conference, we are also creating opportunities to make sure that you have time to share what you are doing in your programs with other attendees. Got a best practice? We’d love to know more about it! Have a model that works – let us know by participating in a roundtable, workshop or poster presentation and asking questions and sharing ideas. And all this learning and sharing might lead you too…

3. **Think differently.** When was the last time you thought “Geez, I was wrong about that. I need to try something different?” Too often we try the same thing (that isn’t working) over and over again hoping that if we try harder, we will get it right! Maybe it is time to think differently – and where else can you go to get different, diverse ideas than the largest gathering of governmental MCH professionals in the country? And while you are thinking about that, get more ideas by…

4. **Visiting with our exhibitors.** We have a wide array of sponsors and exhibitors working on the leading edge of MCH practice ready to share their ideas, services and expertise with you at the Conference and afterwards. Come learn more about their work, and how it may help you in yours! And thinking about meeting and working, how about…

5. **Connecting and networking.** AMCHP 2010 is not just all work, we’ve included events where you can meet old friends and catch up and make new colleagues and expand your network. Networking and time to see peers is an important part of
February 2010

Conference. We hope you’ll take advantage of these times to meet, greet and connect. You might even learn about…

6. New funding! What can you bring back to your state or local program after being at AMCHP 2010? How about information on new funding that your state or local program could be eligible for that you heard about first at AMCHP? We anticipate several new programs will be in their initial implementation phases in March of 2010 and you will learn much more about these while you are with us at the Conference! Attending AMCHP is a great investment in potential future funding sources for state and local maternal and child health. Which will give you a great reason to…

7. Celebrate, laugh and enjoy! This year’s AMCHP Conference is a celebration of the rich and important legacy of Title V and all that it has meant to our nation’s women, children and families. We’ll take time to recognize our achievements, applaud our success, and imagine our potential future. And with the Capitol Steps joining us, I am sure we’ll laugh together too!

With these and so many other reasons to attend, I look forward to seeing you at AMCHP 2010 -- join us!

Feature

Making Change Happen – A Conversation with AMCHP Keynote Speaker Dan Heath

By Mike R. Fraser, PhD
AMCHP CEO

Dan Heath
Author, Switch: How to Change Things When Change is Hard

AMCHP is excited to welcome best-selling author Dan Heath to our conference. Dan will be sharing information from his most recent book, Switch: How to Change Things When Change Is Hard, which he co-authored with his brother Chip. Dan and I recently had the chance to talk about his work and what we can learn about change — both for ourselves and our organizations.

Mike: Dan, thanks for taking some time to visit with me. As we get ready to welcome you to AMCHP I was interested in finding out what got you interested in the topic of “change?”

Dan: Thanks Mike, great question. All of us crave some kind of change — we want to change things at home or at work or in society. Not to mention our own self-improvement projects. But when you bring up the concept of “change” with people, they tend to shake their heads and say, “Change is hard.” No one seems to have a sense of HOW you go about changing things. We wanted to provide the “how” — to mine the insights of decades of research in psychology and make it practical for people who are fighting for real change.

Mike: Yes, that “how” part is always elusive, isn’t it. AMCHP members come from a variety of positions in their organizations. Do you think someone has to be in a leadership position to create change? What can rank and file members of an organization do to un-stick their organizations?

Dan: Our focus in Switch is on behavior change, because anyone is capable of creating behavior change. We were frustrated that so many organizational change books seem to be written for CEOs or top executives — the kind of people who have lots of structural power. They can sell off divisions, hire people, fire people, change incentive systems, merge teams, and so on. The rest of us don’t have these tools. Though, admittedly, it’d make life easier if we did: “Son, if you don’t take out the trash tonight, you’re fired.”

Mike: Ha! Tempting to use such techniques at home isn’t it! You mention CEOs and business executives, which I read a lot about in the leadership and management literature. But many of our members work in state government.
Feature cont.
Making Change Happen

What’s different about change in government versus private organizations?

Dan: There are plenty of differences, but to be honest, I see more similarities. For instance, I attended a conference for people who work in injury prevention in state governments. One tool they taught me was the “Haddon Matrix,” which is a way of thinking systematically about preventing injuries. So if you want to reduce car-crash injuries, you can think in three different ways: You can try to prevent accidents from ever happening (think lane markers and ample lights). You can try to prevent an accident from leading to an injury (think air bags). Or you can try to ensure that the harm from an injury, if sustained, is minimal (think quick emergency response). This is an incredibly useful framework for creating change in public safety. But notice that you could use it just as easily in a corporate environment, for example in minimizing data loss from computer crashes: You can prevent crashes, prevent a crash from leading to data loss, or ensure that data loss is as painless as possible. One of the reasons we wrote Switch was because we kept spotting patterns like these — the same tools used to create change in one environment could easily be used in another.

Mike: Dan, what’s the “take home” point about change I should get to all of our members — not just those who will be with us in Washington next month? What do you think is the most important thing a leader can do to implement change in their organization?

Dan: Look for bright spots. Here’s what I mean: Psychology tells us that people are wired to look at the negative. We like to analyze things that aren’t working and then try to fix them. But, in times of change, let’s face it, there are many things that aren’t working. It will feel overwhelming to try to fix everything. So don’t. Instead, ask yourself a question: What’s working well, today, and how can we do more of it? In the book, we tell the story of Jerry Sternin, a man who went to Vietnam to fight child malnutrition. And everyone thought that, to fight malnutrition, you’d have to fight the big, systemic forces responsible: poverty, lack of education, lack of clean water access, etc. But instead Sternin asked himself: What’s working well, today, despite the odds, and how can we do more of it? He went to a village and found the secrets of mothers whose kids were perfectly healthy, despite their poverty. Their secrets were things like serving four small meals per day rather than two big ones and using “non-traditional” foods like sweet potato greens, which added sorely needed vitamins to their kids’ diets. And once Sternin discovered these bright spots, he could scale them, spread them around. This “bright spots” philosophy is one that any change leader, in any domain, can use: What’s working now and how can we do more of it?

Mike: Great example. I think our members can relate to finding those “bright spots.” As we wrap up, what advice would you give for organizations collaboratively to “switch” or create change as coalition partners? Lots of what our members do is work with other groups to “make change happen” for women, children, and families in the states. Any advice?

Dan: Make sure you’re focused on the end goal of behavior change. Who do you want to behave differently, and how specifically should they behave? One mistake that I see a lot of coalitions or movements make is that they do a great job explaining the problem they’re fighting, but they aren’t as clear about the solution. I’ll give you an example of someone who handled this brilliantly: Don Berwick and his team at the Institute for Healthcare Improvement (IHI). Berwick was determined to fight medical errors in hospitals around the country. He set an outlandish goal: To save 100,000 lives in 18 months by eliminating the risky procedures that often led to patient death. The IHI had no ability to make this happen directly — it had a staff of about 75 people. It was only the alliance that could effect change. Berwick did many things right, but one of them was to stay laser-focused on the exact behaviors that hospitals needed to adopt to save lives. For instance, one of his recommendations called for a patient’s head to be elevated between 30 and 45 degrees, so that oral secretions couldn’t get into the windpipe, which was a big source of infection. When you get that clear about the change, you greatly improve your chances of success. And, in fact, Berwick’s 100,000 Lives campaign worked. It was a mind-blowing accomplishment. And it teaches the rest of us something: Often what we mistake for resistance is a lack of clarity.

Mike: Dan, let’s get personal for a second as we conclude our time together. In the book, you discuss personal change — diets, relationships, parenting, etc. We are now at the point in the year when most people are giving up on their New Year’s Resolutions. Any advice for those struggling to live up to their 2010 goals?
Feature cont.
Making Change Happen

Dan: Yeah, sure Mike. Look, if you’ve had some failures, then join the crowd. But before you decide to give up, you should know something: Failure is part of the deal. There’s an ad from the California Tobacco Control program that I love. It says: “It took you years to learn how to smoke. How come you thought you’d be able to quit the first time?” In fact, research shows that most people try to quit smoking five to seven times before they succeed. And if you think about any of the skills and qualities that you are most proud of — cooking, speaking another language, coaching Little League, driving, being a good parent or a good friend — none of them came quickly. You didn’t give up cooking because you incinerated a chicken breast in 1984. So if you’ve slipped on your diet, or your workout plan, or your self-improvement plan, then relax. It took you years to learn how to act the old way. What made you think you could change overnight?

Mike: Great advice Dan. Thanks and we are so glad you will be joining us soon in Washington.

For more information on Dan and Chip’s recent work, Switch, and their prior book Made to Stick, visit www.heathbrothers.com. Copies of both of Dan’s books will be available on site for purchase before and after the Monday morning plenary session.

AMCHP Current Legislative Briefing and Advocacy Training Workshop

By Mike R. Fraser, PhD
AMCHP CEO

With so many great sessions on the conference agenda it may be hard to choose just one during each block of workshops. As we look to the year ahead, it is clear that this year could be a watershed year for Congress in charting the future of state Title V MCH programs. So if you are planning a trip to Capitol Hill in conjunction with your visit to Washington for AMCHP, or you just want to know more about the legislative process and MCH policy making, you’ll want to attend AMCHP’s legislative briefing and advocacy training workshop on Tuesday, March 9. The workshop, co-facilitated by AMCHP’s Director of Policy Brent Ewig and Family Voices’ Policy Team member Brooke Lehmann, will provide information about federal legislation affecting women and children, including what changes will occur with national health reform and the current status of the Title V Maternal and Child Health Block Grant.

A significant part of the workshop will include skills-building on how to be an effective advocate for Title V. While AMCHP’s policy staff is a presence in Washington on behalf of state Title V programs our voice is amplified when policymakers hear from you - their constituents. In this session Brent and Brooke will discuss some of the strategies and tactics they recommend for an effective Hill visit. For example, can you describe the importance of the Block Grant in just a few short sentences? Do you have a story of a successful program or problem solved that relates to Title V that might grab a Congresspersons’ attention and generate interest in your work? Can you describe why increased investment is needed in Title V, even with massive new spending for health care and coverage? Is your Congressperson on a committee with key decision-making control over the Block Grant and other MCH programs?

In addition to advocacy training, Brent and Brooke will discuss other national issues related to children and families, including the Family to Family Information Centers. Both inexperienced and experienced advocates are welcome to join in for what we are sure will be an educational, practical, and enjoyable session providing great background on MCH policy and useful strategies for effective advocacy.

Coaching: A Tool for Moving Forward and Creating Action

By Librada Estrada, MPH, CHES
Associate Director, Workforce & Leadership Development, Family Involvement

Are you ready to make change? A new professional development opportunity for conference attendees at the 2010 AMCHP Annual Conference is coaching.
Feature cont.
Coaching: A Tool for Moving Forward

Coaching is a relationship between a coach and a client to help the client achieve individual professional or professional’s goals. The client is ready for change, to create it and take action—to move forward! Are you ready for change?

Coaching has traditionally been a tool used by individuals in executive or leadership positions. Now, more and more individuals are engaging coaches to work with them to create change and achieve life long dreams. Coaching is a useful tool and resource to help think through what one wants to achieve, how they might do so and keep one focused on their goals. A coach provides a consistent structure, encouragement and an objective perspective based on the client’s agenda. What do you want to achieve as an MCH professional?

In the last year the maternal and child health workforce has been impacted by budget cuts, furloughs, hiring freezes, changes in management and leadership, just as many other fields. In turn, this has led individuals to feel stuck, lacking direction, not knowing what is next for them, thinking that change cannot be made, there are never enough resources, and many similar thoughts. Are these the only perspectives to take? What if with health care reform and budget challenges individuals saw this is an opportunity to reignite their passion for MCH, change jobs, rewrite job descriptions, redefine what Title V does, try new things, or to change how services are delivered? Or, what if one wants to grow as a leader, manager, become more effective in making decisions, develop new skills or engage staff in more effective ways? Sometimes individuals need an objective voice to help them look at things differently and to ask questions that are not getting asked. Coaching is about changing your reality. When you retire from MCH, or go into another field, what do you want to say about the work you did?

Are you ready for coaching? If you are not sure if coaching is for you, this is a great opportunity to find out. A group and individual sessions are available to conference attendees at no cost. If you have been feeling stuck about what to do next, how to develop professionally, or trying to engage yourself and others in work with but are not making much progress, attend the group skills building workshop and/or sign up for a private session with a trained coach.

AMCHP embraces the benefits associated with coaching—becoming clearer in what one wants to achieve, moving forward on those activities, making a major impact, and closing the gap between where one is and where they want to be. For those individuals that have a desire to grow, learn more about coaching or learn more about how it can benefit MCH, group and individual sessions will be available for conference attendees. The group session will take place on Sunday, March 7 as a skills-building session titled, Shifting Paradigms: Reframing Our Leadership Roles in Maternal and Child Health.

Conference attendees will have an opportunity to take advantage of individual, private 40-minute coaching sessions on Monday and Tuesday, March 8 and 9, by registering in advance or by registering on site. Space is limited and available on a first-come, first-serve basis. Kristina Risley, DrPH, Continuing Education Director, University of Illinois at Chicago, and Hanna Cooper, MPH, CPCC, Leadership and Team Coach, will join the 2010 AMCHP Annual Conference. Both are trained and certified coaches through the Coaches Training Institute in San Rafael, California.

To find out more about coaching at the 2010 AMCHP Annual Conference or registering for an individual session, please contact Librada Estrada or call (202) 266-3046.

AMCHP and the March Dimes Team Up to March for Babies

By Lauren Raskin Ramos, MPH
AMCHP Director of Programs

Every day, thousands of babies are born too soon, too small and often very sick. To raise awareness and support of prematurity prevention, AMCHP and the March of Dimes are sponsoring a mini-march for babies during the AMCHP Annual Conference. Join our Team, AMCHP Steps for Babies, to lend your support!

Bring your warm clothes and walking shoes (we plan to walk outside!) and participate in a one mile walk on
March for Babies

Monday, March 8, 2010 following the plenary on improving birth outcomes. Jennifer Howse, President, March of Dimes, the March of Dimes national ambassador family, and AMCHP President, Phyllis Sloyer will lead us in a walk through National Harbor.

If you are not able to walk with us at the conference, please consider joining AMCHP Steps for Babies as a sponsor. All funds that we raise will support the Maryland National Capital Area chapter of the March of Dimes. Visit AMCHP’s March for Babies Team webpage and sign up to walk with us or to donate to our Team. Together we can make a difference!

2010 Family Scholars Program

By Grace Williams
Senior Program Manager, Children With Special Health Care Needs and Family Involvement

The Association of Maternal and Child Health Programs (AMCHP), with support of HRSA’s Maternal and Child Health Bureau (MCHB) and the Centers for Disease Control and Prevention’s National Center on Birth Defects and Developmental Disabilities, awarded 12 scholarships to family leaders to be part of the 2010 Family Scholar Program (FSP) and the Annual Conference. The 12 scholars and three mentors were selected by the Family and Youth Leadership Committee (FYLC) from a large number of highly qualified applicants from several states nominated by their Title V directors. The FYLC members are family leaders, who are past scholars and mentors, family consultants with Title V, a Title V Director, representatives from MCHB, and Family Voices (FV). FV is a national resource center on health care issues for families of children and youth with special health care needs/disabilities and the technical assistance provider to the Family-to-Family Health Information Centers (F2F-HIC). The scholars are from Colorado, Connecticut, Florida, Georgia, Indiana, Iowa, Massachusetts, Oregon, New Jersey, Rhode Island, Vermont and Wisconsin and the mentors are from Maine, Minnesota and Washington. The FSP has been a very popular program among participants, Title V programs, Family Voices and F2F-HIC to strengthen family involvement and family leadership at national, state and local levels.

The 2010 FSP has been revised this year to consist of a 12 month curriculum from January to December 2010, centered on seven of the Maternal and Child Health Leadership Competencies (MCHLC), which were adopted by the AMCHP Board as a framework to use in training and programmatic activities. The FYLC members reviewed the MCHLC, and an associated self assessment, and selected the following seven competencies to provide a framework for family leadership development for AMCHP. The focus of the year-long program will be, in order of preference, 1) Communication, 2) Cultural competency, 3) Family Centered Care 4) Working with communities and systems, 5) Policy and advocacy, 6) MCH knowledge base, and 7) Critical thinking. The curriculum will include monthly webinars, conference calls, required readings, an Individual Development Plan, networking, and a mentoring relationship. Through their participation Family Scholars and Mentors will continue to develop as family leaders as they gain a greater understanding of Title V and how it works in their state or territory; increase their involvement in Title V in an advisory, voluntary or staff capacity; expand their professional network; and increase their understanding of current and emerging issues impacting women, children, families and children and youth with special health care needs.

The scholars and mentors will participate in the 2010 Annual Conference and attend sessions focusing on Family related issues, events, AMCHP committee meetings and network with state Title V staff, other families and parent professionals. They will also make appointments to meet with their legislators in Capitol Hill to educate, share their stories and advocate on behalf of Title V programs in their states.

AMCHP and the Family Youth Leadership Committee are excited about the revised Family Scholar Program to promote family leadership in 2010 and will continue to develop meaningful involvement and leadership opportunities for families.
Member to Member

Why do you come to AMCHP’s Annual Conference?

Pennsylvania

Melita J. Jordan, CNM, MSN, APRN C
Director
Bureau of Family Health
Pennsylvania Department of Health

As a leader in the field of maternal and child health (MCH) with a commitment to improving MCH care in this country, the Annual Conference is an opportunity to learn about innovative approaches to improving MCH care and factors impacting policy issues, networking with colleagues from across the country and sharing best practices.

Texas

Lesa R. Walker, MD, MPH
Title V Children with Special Health Care Needs Director
Manager, Systems Development, Purchased Health Services Unit
Department of State Health Services

I attend AMCHP’s Annual Conference to gain family insights and perspectives, obtain critical national perspectives, stay attuned to the national political environment and learn directly from those who have devoted their careers and lives to serving children and families. The conference general presentations and topical break-out sessions provide invaluable take-home information and the informal face-to-face networking facilitates, strengthens, and supports ongoing interaction and information sharing throughout the year. The state Title V Directors usually capitalize on the opportunity to have Regional face-to-face meetings during the conference. I have found these meetings to be very worthwhile in facilitating Regional activities and planning. During the event I try to synthesize the information and generate specific action steps I can take in follow-up to the conference. Pin-pointing these action steps assists me when I return and helps me experience tangible conference impact and benefit.

And finally, AMCHP provides me with a wonderful boost of energy and support. We need each other to hold ourselves accountable and to motivate us to pursue excellence for our children and their families.

Washington

Maria Nardella
Manager, Children with Special Health Care Needs Program
Washington State Department of Health, Community and Family Health

The annual meeting is THE conference for the most current practice information on MCH issues in the nation. Even before I was the Region X Director and on the AMCHP Board, the conference was a chance to have face-to-face working meetings on cross-state committees and with technical resource centers. Every fall I’m involved in the submission of abstracts to participate in a conference presentation or panel. It’s a great opportunity to showcase the work we have going on in our state and seek suggestions from experienced peers for improvements. I also look forward to the regional breakouts to meet with colleagues from Oregon, Alaska, and Idaho and track the work they are attempting in their state programs. The networking opportunities are endless and so valuable. When my state agency allows it, it’s always exciting to plan and conduct Capitol Hill visits with state
Member to Member CONT.

legislators. In my free time in the DC area, I always try to visit at least one new place, special event or exhibit. Last meeting, it was to participate in a simultaneous worldwide dance to Michael Jackson’s “Thriller” at the Federal Plaza. I had never laughed so hard with AMCHP colleagues! This year I’m hoping to squeeze in a first time visit to the National Geographic Museum to see the Terra Cotta Warriors: Guardians of China’s First Emperor.

View from Washington

Utilizing the AMCHP Annual Conference to Advance Title V Funding

By Brent Ewig, MHS
Director, Public Policy & Government Affairs

As reported, President Obama’s FY 2011 budget released February 1 includes an $11 million proposed increase for the Title V Maternal and Child Health Services Block Grant. Release of the President’s proposed budget marks the beginning of the FY 2011 Appropriations process. The action now moves to Capitol Hill where members of Congress will use this proposal as a blueprint. They need to hear from you during the AMCHP Annual Conference about why this increase is essential to include and build upon in their FY 2011 Labor-HHS Appropriations Bill.

Please see AMCHP’s recent Legislative Alert about setting up meetings with your elected officials during the AMCHP Annual Conference, and other ways you can weigh in to support MCH funding. As a reminder, we will be hosting Title V Advocacy Training Call on Wednesday, February 24 at 3 p.m. (EDT) for all AMCHP members and friends. Register for the general Advocacy Training Call here. Finally, we will conduct an on-site Legislative Briefing at the Annual Conference on Tuesday, March 9 to provide the latest lay of the land and answer any questions you may have prior to your Hill visits. Please contact Joshua Brown or call (202) 775-0436 for questions on AMCHP’s appropriations work.

AMCHP Supports Launch of First Lady’s Initiative on Childhood Obesity

On Friday, February 5, AMCHP was invited to a meeting at the White House to begin a partnership in support of First Lady Michelle Obama’s initiative addressing childhood obesity. Michelle Alletto and Brent Ewig from AMCHP’s policy team had the opportunity to meet with Susan Sher, Chief of Staff to the First Lady and Tina Chen, Director of the Office of Public Engagement and Executive Director of the White House Council on Women and Girls. We learned that Mrs. Obama was scheduled to make an initial announcement launching the initiative on February 9. She focuses on four initial areas. These include providing parents with information to support healthy eating and active living; increasing access to nutritious food in schools; promoting more opportunities for kids to be physically active; and providing more communities with access to affordable, healthful food.

While the initiative has been officially launched, the White House indicated this is the beginning of an ongoing process in which they will continue to seek feedback and suggestions. They described the effort as a public-private partnership that seeks to engage all relevant sectors of society. We got the strong sense that Mrs. Obama’s advisors have a good grasp of the complexities of the issue and understanding of the need to link health education to policy and environmental change. AMCHP’s initial suggestions focused on the opportunities to build on the capacity of state and local public health agencies; expanding the focus on schools to include child care settings; adapting different strategies for children with special health care needs; linking expectations and benchmarks to adequate funding and resources; framing actions to support a lifecourse approach; and involving parents and youth in all phases. On this last point, we also got a strong sense that the White House is keenly aware of the importance of utilizing carefully crafted messages and is taking into account special concerns that support rather
than undermine girls’ perceptions about body image and healthy weight.

AMCHP will share more details as they emerge and continue to advocate for linking this initiative to state MCH and other public health programs. The White House also continues to seek examples of promising practices and success stories, so please continue to pass along anything you would like us to share to Michelle Alletto.

Recognition

AMCHP Awards Recognize Excellence in MCH Practice

A highlight of the AMCHP Conference is our chance to recognize MCH leaders. Please join AMCHP in sharing our congratulations with the following awardees at our 2010 Annual Conference.

Merle McPherson Family Leadership Award
For leadership in promoting family involvement in state MCH programs and/or AMCHP

Awardee: Susan Colburn, State Parent Consultant, Alabama Department of Rehabilitation Services

Presented for the first time in 2008, this award was developed to honor Dr. Merle McPherson. Dr. McPherson retired from MCHB in January 2007, leaving a legacy of leadership and vision for how to create a new model of family-centered health care delivery for children and youth with special health care needs. She also led the way for expanding the family-centered care model for children with special health care needs internationally. Awardees must be a family representative or professional whose efforts have significantly increased family involvement in a state program and/or AMCHP, whose work has changed policy and procedures within a state programs and/or AMCHP to encourage greater family involvement, and who has actively contributed to AMCHP and the organization’s efforts to advance the inclusion of families. This award is administered by the AMCHP Family and Youth Leadership Committee.

John C. MacQueen Lecture Award
For Innovation in the field of Maternal and Child Health

Awardee: Sara Rosenbaum, JD, Hirch Professor and Chair, Department of Health Policy, George Washington University School of Public Health and Health Sciences

This annual lectureship is awarded to honor one of AMCHP’s most distinguished members, Dr. John C. MacQueen, the former director of the Iowa Child Health Specialty Clinics, the state’s program for Children with Special Health Care Needs (CSHCN). A pediatric neurologist, Dr. MacQueen achieved success at state and national levels. As an administrator and clinician, advocate, innovator, and educator, Dr. MacQueen made his presence felt throughout the country through his tireless work on behalf of children with special health care needs. AMCHP takes special pride in those accomplishments that have advanced family health programs. They include 30 years as a CSHCN state director; leadership as vice-chair of the Congressional Select Panel for the Promotion of Child Health; membership on the Advisory Panel on Technology and Child Health, Congressional Office of Technology Assessment; contributions to the Maternal and Child Health Bureau and to the Surgeon’s General workshops; and advocacy for Title V. Criteria for this awardee state that the awardee be a contributor to the field of MCH and an advocate on behalf of the MCH community. Their work must focus on or around the establishment and maintenance of healthy communities. Each year, the awardee is invited to deliver a dynamic and inspirational lecture at the Annual MacQueen Lecture Luncheon during the AMCHP Annual Conference.
Recognition CONT.

AMCHP Awards Recognize MCH Practices

Legislative Champions for Maternal and Child Health Award

Recognizing the efforts of Members of Congress and their staffs to improve the health of mothers, children, and families including children and youth with special health care needs.

Awardees: Senator Max Baucus (D-Montana) and Diedra Henry-Spires, Health Counsel, Senate Committee on Finance; Representative Jesse Jackson, Jr. (D-Illinois’ 2nd District) and Charles Dujon, Legislative Director, Office of Jesse Jackson, Jr.

The goal of the Legislative Champions Award is to celebrate the efforts of Members of Congress and their staffs to improve the health and lives of mothers, children, and families, including children with special health care needs. This award recognizes efforts to support state maternal and child health programs and advocacy on behalf of children, women, and families at the national level. The award is administered by the AMCHP Legislative and Health Care Finance Committee and was awarded for the first time in 2009.

Promising Practice: Rhode Island’s Pediatric Practice Enhancement Project

The National Survey of Children with Special Health Care Needs found that there was a need for Rhode Island to focus particular attention on systems integration through the “medical home” model and for stronger family and professional partnerships when addressing the complex needs of CYSHCN and their families. Rhode Island responded by providing a cost effective model utilizing parents on-site in pediatric primary and specialty care practices to work directly with families identified by the physician as needing assistance with system navigation, resource identification, peer support and education.

Emerging Practice: Alaska’s Medical Emergency Preparedness-Pediatrics

Children are often excluded from disaster planning, their special needs often surfacing as an afterthought or left for future planning. Alaska was awarded one of 11 competitive federal grants by the U.S. Department of Health and Human Services Assistant Secretary for Preparedness in 2008-2009. As a result, the All Alaska Pediatric Partnership, a coalition of Alaskan health care institutions, collaborated on an unprecedented scale to improve the state’s pediatric emergency preparedness response. The project goal was to increase Anchorage’s (Alaska’s largest city and hub for pediatric health care) pediatric surge capacity during emergencies by training healthcare providers.

AMCHP’s Best Practices Awards

Best Practice: Oregon’s Youth Transition Program

The Youth Transition Program is a comprehensive transition program for youth with disabilities implemented by the Oregon Office of Vocational Rehabilitation Services, Oregon Department of Education, University of Oregon, and local school districts statewide in Oregon. The purpose of the program is to prepare youth with disabilities for employment or career related post secondary education or training. The program currently exists in 105 high schools and is funded through a combination of state and local funds. Participants have demonstrated consistently positive educational and employment outcomes.
Who’s New
New Title V Directors

Be sure to look out for new MCH and CYSHCN Directors at the AMCHP Annual Conference! The following individuals are new to MCH or have been promoted to a new leadership position within their organization. If you are a new director of a Title V program, please join us at the New Director Luncheon on Sunday, March 7 from 11:30 a.m. to 1 p.m. Please RSVP by email to Librada Estrada by February 26. If your program has a new Title V Director (in their position three years or less), please inform Librada Estrada.

Darleen Bergeleen
Administrator, Office of Family Health
South Dakota Department of Health

Brian C. Castrucci, MA
Director, Maternal and Child Health Program
Division of Public Health
Georgia Department of Community Health

Thomas Jerkovitz
Director of the Division of Specialized Care for Children (DSCC), A division of the University of Illinois Medical Center at Chicago

Jacqueline Johnson, MPA
Public Health Program Director, Children’s Special Services, Tennessee Department of Health

Kimberly K. Minniear
Director, Children’s Special Health Care Services
Indiana State Department of Health

Himirce Vázquez-Rivera, MD
Director, MCH Division, PR Department of Health

Get Involved

AMCHP March Board Meetings

The next AMCHP Board Meeting will be held during our Annual Conference on Saturday, March 6 from 8 a.m. to 5 p.m. (EDT) and on Wednesday, March 10 from 8 a.m. to Noon (EDT). Additional information will be provided in the coming weeks. Board members who will be attending should RSVP to Nora Lam or call (202) 775-0436.

AMCHP Business Meeting

All members, partners and staff are invited to attend a Business Meeting on Tuesday, March 9 from 8 to 9:15 a.m. (EDT) during our Annual Conference.

Wondering how to get to the Gaylord National Hotel from your point of arrival in Washington?

Click here for comprehensive information about the hotel and how to get there.

Gaylord National Hotel & Convention Center Room Availability Update

At the present time, there are no rooms available at the Gaylord National Hotel or in any of the other hotels in National Harbor for March 5 and 6. AMCHP has arranged an overflow hotel in Old Town Alexandria at the Hotel Monaco Alexandria (480 King Street, Alexandria, VA 22314), which is three blocks from the Alexandria Marina where the water taxi to the Gaylord National Hotel picks up/drops off. Click here for more information on the water taxis. The rate at the Hotel Monaco is $179 a night for a single or double room.

To make a reservation at the Hotel Monaco Alexandria, call 800-368-5047 and reference the “AMCHP OVERFLOW” block. To be placed on the waiting list for rooms at Gaylord, contact Jennifer Leo. Jennifer will maintain a list

AMCHP CEO Michael Fraser, PhD Earns Certified Association Executive Credential

The American Society of Association Executives (ASAE) has announced that AMCHP CEO Michael Fraser, PhD has earned the Certified Association Executive (CAE™) credential. The CAE is the highest professional credential in the association industry. Less than five percent of all association professionals have earned the CAE. Congratulations Mike!
of conference attendees with reservations at the Hotel Monaco Alexandria and will contact those attendees if rooms become available at the National Gaylord Hotel. Thank you for your patience and cooperation!

Don’t Miss the Job Fair at this Year’s Conference

If you have a position to fill or are considering a career move, visit AMCHP’s Job Fair! To post or apply for a job, inquire at the registration desk. Position descriptions will be compiled and interviews will be scheduled. Take this opportunity to meet qualified candidates to join your team or to explore your career development opportunities – come to the conference prepared with your job postings and CVs.

Regional Baskets… An AMCHP Tradition

Once again at AMCHP 2010, baskets representing Regions I through X will be raffled off during events throughout the conference. Don’t forget to bring a treat to add to your region’s basket! Donations can be delivered to the registration desk until 10:00 am on Monday. Raffle tickets will be included in your registration packet. Regardless of when you arrive, just fill it out and drop it in the raffle box at the AMCHP exhibit table. Thank you for sharing your home with us!

Vote for AMCHP’s Board of Directors!

The 2010 election for AMCHP’s open Board positions is now open. All AMCHP delegates whose programs have paid dues for the 2009-2010 membership year are eligible to vote. For information on the candidates, please visit, http://www.amchp.org/elections. Delegates and family delegates that do not vote electronically may vote in-person at the 2010 Annual Conference. If you have any questions, please contact Rachel Arculin or call (202) 266-3051.

REGISTER NOW!

AMCHP’S 2010 ANNUAL CONFERENCE - “Moving Ahead Together: Celebrating the Legacy, Shaping the Future of MCH”

March 6-10, 2010

Gaylord National Convention Center

National Harbor, MD

The 2010 AMCHP Conference will bring together leaders in maternal and child health, public health practitioners and family advocates.

Register online at www.amchp.org.

What's New at this Year's Annual Conference?

• Trainings, workshops and roundtable session start Saturday, March 6
• Mini-Walk for Babies with March of Dimes on Monday, March 8
• All attendee Capitol Hill reception to convene on Tuesday, March 9
• Professional coaching sessions available on Monday and Tuesday, March 8-9
Board of Directors

Executive Committee

President (2009-2011)
Phyllis J. Sloyer, RN, PhD, FAHM, FAAP
Florida

President-Elect (2009-2011)
Stephanie Birch, RNC, MPH, MS, FNP
Alaska

Past President (2009-2011)
Nan Streeter, MS, RN
Utah

Secretary (2008-2010)
Millie Jones, PA, MPH
Wisconsin

Treasurer (2008-2010)
Loretta Fuddy, ACSW, MPH
Hawaii

Board Members

Region I (2007-2010)
Lisa Bujno, ARNP
New Hampshire

Region II (2008-2011)
Linda Jones Hicks, DO, FACOP, FAAP
New Jersey

Region III (2008-2011)
Melita Jordan, CNM, MSN, APRNC
Pennsylvania

Region IV (2009-2012)
Daniel Bender, MHS
Mississippi

Region V (2008-2011)
Kathy Stiffler
Michigan

Region VI (2009-2010)
Suzanna Dooley, MS, ARNP
Oklahoma

Region VII (2008-2011)
Melinda Sanders, MS(N), RN
Missouri

Region VIII (2009-2012)
Karen Trierweiler, MS, CNM
Colorado

Region IX (2007-2010)
Les Newman
California

Board of Directors cont.

Region X (2009-2010)
Maria Nardella, MA, RD, CD
Washington

Director-At-Large I (2009-2012)
Annette Phelps, ARNP, MSN
Florida

Director-At-Large I (2009-2011)
Katherine J. Bradley, PhD, RN
Oregon

Family Representative I (2009-2012)
Eileen Forlenza
Colorado

Family Representative I (2008-2011)
Mary Marin
Michigan

AMCHP Staff

Matt Algee, Accountant

Michelle Alletto, MPA, Senior Manager, Public Policy & Government Affairs

Rachel Arculin, Program Manager, On-line Media & Information Technology

Julio Arguello, Jr., Publications & Member Services Manager

Joshua Brown, Senior Manager, Public Policy & Government Affairs

Treeby Brown, Senior Program Manager, Children and Youth With Special Health Care Needs

Tania Carroll, Office Assistant

Sharron Corle, Associate Director, Adolescent Health

Michael Dugger, Administrative Assistant

Librada Estrada, MPH, CHES, Associate Director, Workforce & Leadership Development, Family Involvement

Brent Ewig, MHS, Director of Public Policy & Government Affairs

Mike Fraser, PhD, Chief Executive Officer
AMCHP Staff CONT.

Jessica Hawkins, MPH, CHES, Program Manager, Women’s and Infant Health
Adriana Houk, Associate Director, Organizational Performance and Membership
Nora Lam, Executive Assistant
Henry Maingi, MA, Senior Program Manager, Data & Assessment
Lissa Pressfield, MHS, Program Manager, Adolescent Health
Lauren Raskin Ramos, MPH, Director of Programs
Vanessa A. White, MPH, Associate Director, Women’s & Infant Health
Darlisha Williams, MPH, Program Manager, Best Practices
Grace Williams, Senior Program Manager, Children With Special Health Care Needs and Family Involvement

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