

Member Briefs



Jan. 23, 2013



THE ASSOCIATION OF MATERNAL & CHILD HEALTH PROGRAMS



MANAGEMENT MINUTE



Time to Put the 12 Absolutes of Leadership into Practice!

By Michael R. Fraser, PhD, CAE, Chief Executive Officer, AMCHP

Happy New Year! Or, should I say, Happy New Year?

This New Year definitely promises to be a challenging time for maternal and child health (MCH) programs. The uncertainty surrounding federal funding for the Title V MCH Services Block Grant is just one of our challenges; clearly there are a lot of other challenges and changes going on in our field. What will the future hold for MCH? See my upcoming column in the January/February issue of AMCHP *Pulse* for a more detailed prediction of what's in store for 2013. But what I can share is this: now more than ever, we have a pressing need for maternal and child health leadership.

What is leadership in MCH? Broadly stated, MCH leaders set a vision for the future and motivate others to rally around that vision to make positive change in the lives of women, children and families. MCH leadership is about vision setting, inspiration and motivation. Vision setting and inspiration can seem hard to accomplish in this climate of cuts, the demoralization of the governmental public health workforce, and the politicization of MCH issues. But we as MCH leaders must share our vision of the future and motivate others to share in that work – if not us, who? If not now, when? Our very future is being challenged by both friends and foes. Take, for example, the recent discussion around the continued need for the Title V MCH Services Block Grant in light of the expansion of publically financed health care in the Affordable Care Act? What's our vision for state MCH given that many misinterpret our programs as no longer necessary

because coverage has been expanded, or are programs no longer relevant because the work of MCH is mistakenly seen as duplicative of other public health programs? What does it mean to articulate a vision for state MCH and then get those around us to support it given these views of Title V? How can we make the case for continued support for, and expansion of Title V, given these questions about our work? That's what our New Year brings. That is why MCH leadership is so essential.

Last year, I spent several months writing about Gary Burnison's book the *Twelve Absolutes of Leadership*. All twelve absolutes are important – critical – to our work as MCH leaders. I'll state them here as a review:

Lead
Purpose
Strategy
People
Measure
Empower
Reward
Anticipate
Navigate
Communicate
Listen
Learn

You can revisit my columns online for more detail on each, but of these 12, where do you think we have the most urgent need to focus as a leader? Which of these 12 absolutes are places of strength for you and your colleagues as MCH leaders, and where do you need to improve as MCH leaders? The 12 absolutes comprise a

framework for you to assess your leadership. Put them in practice this year and I know that even in these challenging times you will indeed be successful.

As we tackle the challenges and changes that confront us this New Year, consider Burnison's wisdom and your own leadership assets. Now more than ever you will be called on to establish a vision for MCH programs in your state and community. And you will need these leadership absolutes to move forward. I look forward to listening to your assessment of these absolutes, and your creative and innovative responses to our challenging times. Please share how you are approaching this New Year – we stand ready to support you in your work and share your successes this year, and always!

LEGISLATIVE & POLICY CORNER



Save the Date – AMCHP to Convene National All-Member Teleconference on Friday, Feb. 1 at 3 p.m. EST

Please mark your calendar now for an all-member teleconference to be held Friday, Feb. 1 at 3 p.m. EST. The agenda will provide updates on the current fiscal outlook affecting state MCH programs and dialogue about the Jan. 7 *Federal Register* notice issued by the Maternal and Child Health Bureau (MCHB) announcing the opportunity to comment on a proposed data collection process to analyze Title V programs in the context of the Affordable Care Act. To RSVP for the call, please [click here](#).

Budget Update: Fiscal Cliff(s)

During the next two months, Congress will be hard at work making decisions on a host of issues that will have broad implications regarding future funding of the federal government. Specifically, four events are scheduled to occur concurrently:

- **Mid February Raising the debt ceiling:** Congress needs to vote on raising the debt ceiling. However, in order to do so, many members of Congress are arguing that raising the limit should result in deeper cuts. As a reminder, two years ago Congress battled

over this same issue and that gave birth to the super committee, then the super failure of the super committee to come up with a plan to reduce the deficit, sequestration and the budget control act caps on discretionary spending. AMCHP is deeply concerned that any deal to raise the debt ceiling could result in significant cuts in both entitlements and discretionary spending. According to one analyst, sequestration will seem like a cream puff compared to the potential cuts resulting from the debt ceiling negotiations.

- **March 1 Sequestration:** The American Taxpayer Relief Act postponed sequestration until Mar. 1. If sequestration occurs, federal agencies and states should expect across the board cuts in the range of 5 -12 percent for all discretionary and nonexempt mandatory programs, including home visiting and Personal Responsibility Education Program (PREP).
- **Mid March President Obama FY 2014 Budget Proposal:** The president's budget may include a proposal to significantly reduce funding in fiscal year 2014 for the Title V MCH Services Block Grant because of the perceived duplication between Block Grant and the Affordable Care Act.
- **Mar. 27 Expiring CR:** The federal government is currently operating under a continuing resolution (CR) through Mar. 27, 2013. Congress will either need to approve an appropriations bill or another continuing resolution for the remainder of the fiscal year. Many member of Congress indicated that this may be another way to further reduce federal spending.

At this juncture, AMCHP continues to actively monitor, engage and analyze proposals as they are put forward by Congress and the administration. We will continue to advocate on the behalf of our members and maternal and child health programs by urging for sustained funding of the Block Grant, but now more than ever we will need your help. Please plan on participating in the AMCHP conference hill day, held in conjunction with our annual conference. [Click here](#) to learn more or contact Carolyn Mullen cmullen@amchp.org for additional information.

Sequestration Update

According to current law, sequestration is scheduled to occur on Mar. 1. The administration and Congress have yet to engage in discussions on how to avert

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sequester. Last week, the Office of Management and Budget (OMB) issued a [memo](#) to federal agencies entitled, “Planning for Uncertainty with Respect to Fiscal Year 2012 Budgetary Resources.” It is important to note that OMB is urging agencies to step up their planning for the potential cuts; however, at this time they should not make any reductions specifically in response to sequester. The memo provides the following guiding principles that federal agencies should use in preparing plans to operate with reduced budgetary resources in the event that sequestration occurs:

- Use any available flexibility to reduce operational risks and minimize impacts on the agency core mission
- Identify and address operational challenges that could potentially have a significant deleterious effect on the agency mission
- Identify the most appropriate means to reduce civilian workforce costs where necessary this may include imposing hiring freezes, releasing temporary employees or not renewing term or contract hires, authorizing voluntary separation incentives and voluntary early retirements or implementing administrative furloughs
- Review grants and contracts to determine where cost savings may be achieved in a manner that is consistent with the applicable terms and conditions
- Take into account funding flexibilities including the availability of reprogramming and transfer authority
- Be cognizant of the requirements of the Worker Adjustment and Retraining Notification

AMCHP continues to work with broad coalitions urging Congress to address the deficit through a balanced approach that does not further reduce discretionary spending.

CMS Issues a Mega-Rule

On Jan. 14, the Centers for Medicare & Medicaid Services (CMS) issued [a rule](#) on all things Medicaid, Children’s Health Insurance Program, exchanges, alternative benefits plans, appeals processes in a more than 400 page document. AMCHP, in collaboration with other Washington, DC children’s organizations will analyze the rule. Stay tuned for more information. CMS also provided [a fact sheet](#), which is much shorter.

CMS Issues Letters to State Medicaid and Health Officers on Health Homes

On Jan. 15, CMS issued [a letter](#) in regards to Health Home Quality Core Measures. “While CMS is not requiring states to use these measures until the regulations are promulgated, states requested that we share these measures in advance of rulemaking. In keeping with the collaborative process on the health home provision, CMS is sharing the core set to help states as they consider the design and implementation of their health home programs. This advance notice will also give states time to share information with their health care providers, which is important, since health home providers will be required to report health care quality measures in order to receive payment.” The recommended health home core measures are: 1) adult



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body mass index (BMI) assessment; 2) ambulatory care – sensitive condition admission; 3) care transition – transition record transmitted to health care professional; 4) follow-up after hospitalization for mental illness; 5) plan – all cause readmission; 6) screening for clinical depression and follow-up plan; 7) initiation and engagement of alcohol and other drug dependence treatment; and 8) controlling high blood pressure.

In Connection with the President's Announcement in Response to the Sandy Hook Tragedy

On Jan. 16, CMS released a [state health official letter](#) on the application of the Mental Health Parity and Addiction Equity Act to Medicaid managed care organizations, the Children's Health Insurance Program (CHIP), and alternative benefit (benchmark) plans.

HHS Relaunches HealthCare.gov Website and Social Media Tools

The U.S. Department of Health and Human Services (HHS) recently updated HealthCare.gov in anticipation to many of the pieces of the Affordable Care Act that will come into place in 2013 and beyond, notably, the health insurance exchanges. New features, such as e-mail and text message updates for consumers have been added. Consumers can find resources in many places including [HealthCare.gov](#), [The Secretary's Blog](#), [Twitter](#) and [Facebook](#). Please direct any questions about these tools to HHSIEA@hhs.gov.



GET INVOLVED

AMCHP February Board Meeting

All members are invited to attend the AMCHP Board meeting, which will be held during our Annual Conference, on Saturday, Feb. 9, beginning at 7:30 a.m. EST. The meeting will be held at the Omni Shoreham Hotel. Members who will be attending should RSVP to [Nora Lam](#) or call (202) 775-0436.

AMCHP Business Meeting

All members are invited to attend the AMCHP Business Meeting, held during our Annual Conference, on Tuesday, Feb. 12, beginning at 7:45 a.m. EST. The meeting will be held at the Omni Shoreham Hotel.

GET INVOLVED CONT.

AMCHP Board Elections Closing Soon

AMCHP delegates are entitled to participate in the 2013 AMCHP Board of Directors election. Participation will ensure that you are part of selecting AMCHP's next cohort of leaders. To view the list of Board candidates please visit the AMCHP 2013 Board of Directors election Web page [here](#). Voting closes at 5 p.m. EST on Friday, Feb. 8 to ensure that the results are tabulated in time to share at the 2013 AMCHP Conference. Delegates, watch your e-mail for a link to the voting! If you have any questions about the election or how to vote, please contact [Julio Arguello](#), Online Media & Information Technology Manager. If you have questions about your membership eligibility, please contact [Laura Goodwin](#), Publications and Member Services Manager.

Individual Professional Coaching at AMCHP 2103

Join us at the 2013 AMCHP Annual Conference and get access to individual professional coaching sessions as part of your full conference registration. Coaching is a relationship between a coach and a client to help their individual goals. Need a career boost, time to reflect on what's next, or an opportunity to work on your own professional development? Are you ready for change? Conference attendees will have an opportunity to take advantage of individual, private 40-minute coaching sessions Sunday Feb. 10 through Tuesday Feb. 12, by registering in advance or by registering on site. Space is limited and available on a first-come, first-serve basis. To find out more about coaching at the conference or to register for an individual session, please contact [Kate Howe](#) or call (202) 266-3056.

AMCHP 2013 is Just Around the Corner – Register Today!

The AMCHP 2013 Annual Conference is just a few weeks away, Feb. 9-12, at the Omni Shoreham Hotel in Washington, DC. Register today to be a part of the largest gathering of MCH professional nationwide! To register, visit regonline.com/amchp2013.

NGA Child Health Disparities Webinar

The National Governors Association (NGA) Center for Best Practices will be conducting a webinar regarding policies and strategies states can adopt to decrease child health disparities, with a focus on infant mortality. According to the 2010 Census, more than one-third of

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the U.S. population identified themselves as members of racial or ethnic minority groups and by 2050, it is projected that these groups will account for almost half of the U.S. population. As a result, over the next few decades health disparities will be a critical issue as we try to achieve equity among such a diverse population. Accordingly, Healthy People 2020 expanded its previous overarching goal about disparities to “achieve health equity, eliminate disparities, and improve the health of all groups.” This includes children, who will experience many health disparities throughout their lives. This webinar will address the issues of data, challenges and opportunities with regard to child health disparities and will have an emphasis on infant mortality. The webinar will take place on Jan. 30 at 2 p.m. EST. For more information, [click here](#).



Do you have a successful program that is related to data and assessment?

Consider sharing your program in [Innovation Station](#), AMCHP’s searchable database of emerging, promising and best practices in maternal and child health. You’ll have a chance to:

- Share successes with your peers
- Enhance the MCH field
- Contribute to program replication
- Get expert feedback from the Review Panel
- Receive national recognition

The online submission process is simple and applications are accepted on a rolling basis. For more information, contact [Kate Howe](#) at (202) 266-3056 or visit amchp.org/bestpractices.

You can also [click here](#) to refer an innovative MCH program that we should know about!

Webinar: Effective Strategies for Promoting Preconception Health

The Centers for Disease Control and Prevention (CDC) and partners will present a webinar to learn more about how to improve the health of women of childbearing age, focusing on research and practice. Panelists include three contributors to the January Special Preconception Health Issue of the American Journal of Health Promotion and Dr. Sarah Verbiest, CDC Senior Advisor to the National Preconception Health and Health Care Initiative. The webinar will take place on Jan. 30 at 1 p.m. EST. For more information and to register, [click here](#).

Perinatal Care Policies, Programs, and Quality Improvement Initiatives: Influencing Life Course Trajectories Webcast

The Alabama Public Health Training Center, in collaboration with the Maternal and Child Health Leadership, Education Training Programs at the University of Alabama at Birmingham, the University of South Florida, Tulane University, and the Alabama Department of Public Health, will present a webcast titled, *Perinatal Care Policies, Programs, and Quality Improvement Initiatives: Influencing Life Course Trajectories*. The goals of the webcast are as follows: 1) describe appropriate metrics for evaluating perinatal policies and programs; 2) discuss quality improvement practices in perinatal programs and provide examples of integration into real-world situation; 3) discuss the roles of public health, clinical care, and health care systems in promoting perinatal quality improvement; and 4) summarize how perinatal policies and practice can have major influences on life course trajectories. The webcast will take place on Jan. 31 at 10 a.m. CST. For more information, [click here](#).

CES4Health.info Online Peer-Review and Publishing Webinar

[CES4Health.info](#) is a mechanism for peer-reviewing, publishing, and disseminating products of health-related community-engaged scholarship. This webinar will describe how CES4Health was developed, how to submit articles, and general information about the peer review process. Find out about actual products published and evaluation findings in this webinar presented by Cathy Jordan, Editor of CES4Health and faculty with the University of Minnesota Clinical & Translational Science

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Awards. The webinar will be presented on Feb. 1 at 12 p.m. CST. To register, [click here](#).

Deadline Approaching for MCH PHLI Applications!

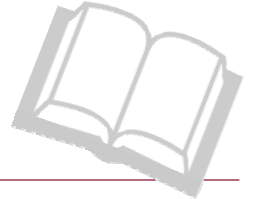
The deadline for Maternal and Child Health-Public Health Leadership Institute (MCH PHLI) applications for Cohort IV is Feb. 1. This year-long leadership development program for the MCH workforce is designed to significantly expand self-awareness and quickly build practical skills for effectively leading, managing people, and building partnerships, to advocate for and create the MCH systems of tomorrow. This unique program improves leadership capacity, teaching tools for creating the kind of culture that engages and motivates others. The program consists of three residential executive-style retreats (10 days of experiential-based training) coupled with a robust and customizable distance-based program. All tuition and lodging charges for this program are grant supported. For more information and to apply, please [click here](#).

IOM-NRC Workshop on Research Issues in the Assessment of Birth Settings

The Committee on Research Issues in the Assessment of Birth Settings will hold a public workshop on Mar. 6-7 to review updates to the 1982 Institutes of Medicine-National Research Council (IOM-NRC) report *Research Issues in the Assessment of Birth Settings*. The workshop will feature invited presentations and discussions highlighting research findings that advance our understanding of the effects, on maternal labor, clinical and other birth procedures, and birth outcomes, of maternal care services in different types of birth settings, including conventional hospital labor and delivery wards, alternative birth settings that may be

hospital-affiliated or free-standing, and home births. The workshop topics will consider research on different organizational models of care delivery, workforce requirements, patient and provider satisfaction levels, and birth outcomes. For more information, [click here](#).

PUBLICATIONS & RESOURCES



General Maternal and Child Health

MCHB *Getting Ready for Quality Improvement Quick Guide*

This compilation of resources was prepared by the Maternal and Child Health Bureau (MCHB) Division of MCH Workforce Development and Office of Policy Coordination to support the MCH community in becoming better acquainted with quality improvement. They identified resources for those with extremely limited time for exploring the concepts and skills, as well as for those who can allocate larger blocks of time to learn about quality improvement. In addition, this MCH Navigator “Spotlight” was prepared so that those who learn better through reading, viewing presentations, or through Web tutorials, can find materials and methods with which they are most comfortable. [Links](#) to information resources are provided in seven categories: 1) Quick References on Methods and Tools; 2) Quick Study YouTube Videos; 3) Short Web Tutorials; 4) Links to Resource Organizations; 5) Journal Articles and White Papers; 6) Presentations/Trainings; and 7) Selected Examples of QI in Practice. The AMCHP Annual Conference also will offer a number of sessions on quality improvement. To learn more about these sessions, [click here](#).

IPEC Launches Interprofessional Education (IPE) Portal

High-quality, peer-reviewed, competency-based learning modules for interprofessional health education are now available through a new innovative online portal launched by the Interprofessional Education Collaborative (IPEC). The materials are designed to provide tools to prepare tomorrow’s health professions workforce for

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PUBLICATIONS CONT.

interprofessional, team-based, patient-centered, and community- and population-oriented care. The IPE PORTAL collection is open for submissions. To view the portal, [click here](#).

Child and Adolescent Health

HHS Resources on Expanding ECE Services for Homeless Children

More than 1.6 million children in the United States live on the streets or in homeless shelters. Forty-two percent of these children are under the age of six. The numbers of homeless children are even higher when also counting families who are temporarily doubling up with others, living in campgrounds or otherwise without a stable home. A family's housing circumstances can change very suddenly as evidenced when natural disasters cause families to be at least temporarily homeless. Research shows that children who experience homelessness also experience higher rates of chronic illness, developmental delays, anxiety and depression than children who live in stable homes. The HHS Administration for Children and Families (ACF) has released a package of resources focusing on expanding early childhood education (ECE) services for this population. Included are [federal policies and procedures](#) on increasing access to ECE services, [strategies](#) for increasing ECE for homeless children and a [resource list](#). For more information, [click here](#).

Autism Identification in Latino Children Podcast

This edition of the MCH Research Program Research Dialogue Podcasts is an interview with Bruno Anthony, PhD on improving the early identification of autism in Latino children. The program focuses on Dr. Anthony's project to develop and test methods to increase the number of Latino children who are screened in primary care at an early age for autism and other developmental delays, using evidence-based measures. The podcast covers the importance of community involvement in autism awareness and outreach, the role of family navigators, and ensuring that programs are sustainable. For more information, [click here](#)

Women's and Infant Health

CityMatCH Article on Neonatal Abstinence Syndrome

CityMatCH has published an article on Neonatal Abstinence Syndrome (NAS) in the National Institute for Health Care Management Foundation's Health Update: Women, Children, and Adolescents. Over the past 18 months, CityMatCH has been working with six local public health departments to prevent substance-exposed pregnancies. Many CityMatCH member health departments have reported an increase in the misuse of prescription painkillers – mostly oxycodone and oxycontin – and a notable increase in the incidence of NAS in local hospital NICUs. To read the article, [click here](#).

CDC Report Finds Binge Drinking Among Women is Under-Recognized

In the January issue of *Vital Signs*, the CDC reported that nearly 14 million U.S. women binge drink roughly three times a month, and consume an average of six drinks per binge. Drinking behavior data was collected in the 2011 [Behavioral Risk Factor Surveillance System](#) (BRFSS) from approximately 278,000 U.S. women aged 18 and older and for approximately 7,500 U.S. high school girls from the 2011 [Youth Risk Behavior Surveillance System](#) (YRBSS). Binge drinking is defined as consuming four or more drinks on an occasion for women and girls. Drinking too much, including binge drinking, causes about 23,000 deaths among women and girls in the United States each year. It puts women at increased risk for many health problems, such as breast cancer, sexually transmitted diseases, heart disease and unintended pregnancy. Pregnant women who binge drink expose a developing baby to high levels of alcohol, which can lead to fetal alcohol spectrum disorders and sudden infant death syndrome. The report also highlights the [Guide to Community Preventive Services](#) (*Community Guide*), which recommends effective policies to prevent binge drinking. To read the report, [click here](#).

ON YOUR BEHALF

AMCHP Working On Your Behalf

- In December of 2012, an article on the State Infant Mortality Collaborative, *Developing a Standard Approach to Examine Infant Mortality: Findings from the State Infant Mortality Collaborative (SIMC)*, co-authored by AMCHP staff Caroline Stampfel, was published in the Maternal Child Health Journal Supplement, *Using Data, Science, and Partnerships: Promoting Innovation and Collaboration to Strengthen the Field of Maternal and Child Health Epidemiology*.
- On Jan. 9-11, AMCHP CEO Mike Fraser, delivered remarks for the Partnership to Eliminate Disparities in Infant Mortality (PEDIM) Action Learning Collaborative (ALC) final meeting in New Orleans, LA. AMCHP staff Piia Hanson also was in attendance and helped to organize the two and a half day meeting that brought together teams from Ft. Worth, TX, New Orleans, LA, New Haven, CT, Boston, MA and various cities throughout the state of MI to develop sustainability plans around their work to address the impact of racism on infant mortality.
- On Jan. 15-16, AMCHP CEO Mike Fraser and AMCHP staff Piia Hanson, attended the Best Babies Zone (BBZ) meeting in Oakland, CA. This meeting also was attended by various national partners and travel team representatives from the Oakland, CA, New Orleans, LA, and Cincinnati, OH project sites. The mission of BBZ is to give every baby born in a BBZ the best chance in life. This meeting brought participants together to describe strategies and approaches for zone-based work across four community sectors and to learn how collective impact can be used to frame and facilitate the BBZ work and potential changes at the zonal level.

CAREER OPPORTUNITIES

AMCHP Opening: Women's and Infant Health Intern

The Women's and Infant Health Team seeks a graduate student intern for Spring 2013. The intern will work on a variety of projects and initiatives, and will also have an opportunity to work with other AMCHP program and policy staff on various crosscutting issues. The intern will

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support a variety of projects including the *Optimizing Health Reform to Improve Birth Outcomes Action Learning Collaborative (ALC)*, Life Metrics Course Project, MCH Innovation Station, and a national scan of state level programs and policies addressing preconception health, among other initiatives. Responsibilities for these projects may include: maintaining files and archiving project records; supporting meetings and conferences; coordinating distance learning opportunities such as webinars; supporting data collection, analysis and reporting activities; attending meetings and conferences on behalf of AMCHP and maintaining relationships with our partners and members. For more information, [click here](#).

AMCHP Opening: Organizational Performance & Member Services Intern

As a member of the Organizational Performance and Member Services team, the intern supports our member services and communications activities. The intern will assume responsibility for a wide range of projects and functions, requiring professionalism and task orientation. Principle duties include: compiling information on events and new publications for the member newsletter; layout of electronic newsletters using Microsoft Publisher and Adobe InDesign; updating newsletter web content and other as needed; working with the member services manager on membership campaigns, including dues renewals and member retention programs; assisting in managing the AMCHP member database, including updating AMCHP member information; and supporting member services, track new and retiring members, and coordinate production of member welcome packets, including membership cards. For more information, [click here](#).

AMCHP CAREER CENTER

The Career Center is the premiere online job board for individuals seeking employment in Maternal and Child Health programs. Whether you are looking for an entry-level position or are a more seasoned professional looking for new opportunities, AMCHP's Career Center has great openings for great people! Searching our database is free and open to all job-seekers. AMCHP members receive a discount on job-postings - so [sign up](#) today!

CAREERS CONT.

NFP Seeks Chief Operating Officer

The Nurse-Family Partnership (NFP) is an evidence-based program that helps first-time mothers living in poverty achieve better birth outcomes, better child development, and greater self-sufficiency by partnering them with nurse home visitors through their children's second birthdays. The Chief Operating Officer (COO) reports to the CEO, is a key member of the NFP leadership team, and leads the Operations group, which consists of program development, nursing, program quality and information technology. The COO works collaboratively with leadership of all NFP departments and the NFP Board of Directors to steadily and rapidly bring the NFP program to more eligible families. This position is envisioned as critical to CEO succession planning. For more information, [click here](#).

FUNDING



HUD Strong Cities, Strong Communities National Resource Network Grant

Deadline: *Jan. 28*

This Department of Housing and Urban Development (HUD) will fund the development of the SC2 National Resource Network, which will align federal resources and coordinate distinct and wide-ranging technical assistance programs to help communities make more effective local investments. For more information, [click here](#).

Medical Home Implementation for Children with Special Health Care Needs Grant

Deadline: *Jan. 28*

This announcement solicits applications for a National Center for Medical Home Implementation. The purpose of this activity is to: 1) support a national resource and technical assistance effort to implement and spread the medical home model to all children and youth, particularly children with special health care needs (CSHCN), children who are vulnerable and/or medically underserved, and pediatric populations served by state public health programs, MCHB and HRSA; and 2) support activities of the Healthy Tomorrows Partnership for Children Program (HTPCP) grantees to improve children's health through innovative community-based

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efforts, and community and statewide partnerships among professionals in health, education, social services, government, and business. For more information, [click here](#).

CDC Birth Defect Study to Evaluate Pregnancy Exposures (BD-STEPS) Grant

Deadline: *Application due Feb. 8, Letter of intent due Jan. 8*

The purpose of this funding opportunity announcement is to identify modifiable maternal exposures in early pregnancy that may increase the risk for having a pregnancy affected by certain major, structural birth defects. The CDC mission is "to promote health and quality of life by preventing and controlling disease, injury, and disability." This program is most closely aligned with the CDC Health Protection Goal of "Healthy People in Every Stage of Life." Quantifiable and measurable outcomes will be measured against the Government Performance and Results Act (GPRA) performance goal to find causes and risk factors for birth defects in order to develop prevention strategies. Nine grants will be awarded ranging in amounts from \$125,000 to \$400,000. For more information, [click here](#).

Lucille Packard Foundation for Children's Health CSHCN Learning Collaborative Grant

Deadline: *Feb. 8*

The Lucille Packard Foundation for Children's Health seeks proposals from community-based, multiagency coalitions in California with an interest in improving local systems of care coordination for CSHCN. Grants of up to \$40,000 will be awarded, and grantees will be required to participate in a multi-site learning collaborative with other community coalitions. Proposals must address care coordination needs of CSHCN and their families in a geographically defined community, county, or region within California. At a minimum, coalitions should include the following key stakeholders as active participants: families of CSHCN, primary care professional association representative (e.g., American Academy of Pediatrics), California Children's Services, Regional Centers, and family resource and support providers. An informational webinar for applicants will be held on Jan. 10 at 1 p.m. PST. For more information, [click here](#).

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Bureau of Educational and Cultural Affairs American Youth Leadership Program Disability Component Grant

Deadline: *Feb. 11*

The Office of Citizen Exchanges, Youth Programs Division, of the Bureau of Educational and Cultural Affairs announces an open competition for an American Youth Leadership Program Disability Component. The award recipients will recruit and select 15-25 youth and one to three adult participants from the United States and provide them with a three- to four-week exchange program in select countries abroad focused on dialogue and debate, leadership development, and community service. Applicant organizations must make every effort to actively recruit and include individuals with sensory impairments, intellectual and physical disabilities, or cross-disabilities in the program. Upon returning home, the participants will apply what they have learned to serve their schools and communities. It is the intent of the Bureau to award one cooperative agreement of \$200,000. For more information, [click here](#).

CDC National Undergraduate Student Program to Increase Student Interest in Public Health

Deadline: *Feb. 11*

The primary purpose of this funding opportunity is to create a national program for the exposure of undergraduate students, including those from underrepresented racial and ethnic minority populations, to public health and biomedical sciences. Eligible organizations include nonprofit with 501c(3) IRS status (other than institution of higher education), Universities/Colleges (including community-colleges), National, Regional and Community-based organizations Faith-based organizations, Federally recognized or state-recognized American Indian/Alaska Native Tribal governments, American Indian/Alaska Native Tribally designated organizations and Alaska Native health corporations Urban Indian health organizations Tribal Epidemiology Centers. For more information, [click here](#).

RWJF Nurse Faculty Scholars

Deadline: *Feb. 12 at 3:00 p.m. EST*

The goal of the Robert Wood Johnson Foundation (RWJF) Nurse Faculty Scholars (NFS) program is to develop the next generation of national leaders in academic nursing through career development awards

for outstanding junior nursing faculty. The program aims to strengthen the academic productivity and overall excellence of nursing schools by providing mentorship, leadership training, and salary and research support to young faculty. Up to 12 awards of up to \$350,000 each over three years will be available in this round of funding. For more information, [click here](#).

HRSA Integrating Newborn Screening Long-Term Follow-up into Primary Care Provider Practices Demonstration Grant

Deadline: *Feb. 19*

This funding opportunity announcement solicits applications for a newborn screening demonstration program in which applicants will investigate the feasibility of implementing the long-term follow-up responsibilities outlined in the 2011 report, *“What Questions Should Newborn Screening Long-term Follow-up Be Able to Answer? A statement of the US Secretary of Health and Human Services’ Advisory Committee on Heritable Disorders in Newborns and Children (SACHDNC)”* and will utilize grantee networks to contribute to the long-term follow-up information collection on patients identified by newborn screening. Successful applicants will demonstrate the capacity to link primary care practices to state newborn screening follow-up programs in a functional manner in order to facilitate seamless follow-up of infants identified with NBS conditions and demonstrate a plan for assessing the feasibility of establishing long-term follow-up in a primary care setting. For more information, [click here](#).

CMS Connecting Kids to Coverage Outreach and Enrollment Grant

Deadline: *Feb. 21*

Connecting Kids to Coverage Outreach and Enrollment (Cycle III) grants will support outreach strategies similar to those conducted in previous grant cycles. These grants, funded under the Affordable Care Act, will continue efforts to find and enroll eligible children in Medicaid and CHIP by making a total of \$32 million available for states, local governments, community-based and non-profit organizations. Indian health care providers and tribal entities also are eligible to apply. Successful applicants will receive grants ranging from \$250,000 to \$1 million for a two-year period, beginning

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Jun. 1, 2013 and ending May 31, 2015 to execute outreach activities to find and enroll eligible children in Medicaid and CHIP. For more information, [click here](#).

CDC Building Healthcare Practitioner Capacity Around HPV Vaccine Communication Grant

Deadline: *Feb. 25*

This funding opportunity announcement seeks to build on prior research concerning communication around vaccines recommended for adolescents in general, and HPV vaccine in particular, in order to identify and test interventions that demonstrate effectiveness in improving provider-level communication and recommendation of these vaccines. Two grants of \$300,000 each will be awarded. For more information, [click here](#).

RWJF Clinical Scholars

Deadline: *Feb. 28 at 5:00 p.m. EST*

RWJF and the U.S. Department of Veterans Affairs (VA) are collaborating to foster the development of physicians who will lead the transformation of Americans' health and health care through the Robert Wood Johnson Foundation Clinical Scholars program. These future leaders will conduct innovative research and work with communities, organizations, practitioners and policymakers to address issues essential to the health and well-being of all Americans. Up to 20 eligible physicians will be selected in 2013 for appointments beginning Jul. 1, 2014. First year scholar stipend is \$67,000 with an increase the second year. In some cases, VA stipends may be higher. Additional financial support is provided for research projects and professional travel. For more information and to apply, [click here](#).

SAMHSA 2013 National Suicide Prevention Lifeline Crisis Center Cooperative Agreements

Deadline: *Mar. 1*

The Substance Abuse and Mental Health Services Administration (SAMHSA) accepting applications for fiscal year (FY) 2013 Cooperative Agreements for the National Suicide Prevention Lifeline Crisis Center Follow Up. The purpose of this program is to promote systematic follow up of suicidal persons who call the National Suicide Prevention Lifeline, suicidal persons discharged from emergency departments, and those who

are being followed by the National Suicide Prevention Lifeline Crisis Centers. This initiative also supports the National Strategy for Suicide Prevention (NSSP). This grant program supports SAMHSA's Prevention of Substance Abuse and Mental Illness Strategic Initiative through its focus on the prevention and reduction of mental illness and substance abuse across the lifespan. Eligible applicants are members of the National Suicide Prevention Lifeline Crisis Center Network who provide 24-hour coverage and meet the additional eligibility requirements described in Section III-3.2. Eligibility to the National Suicide Prevention Lifeline Crisis Center Network is limited to crisis centers participating in the National Suicide Prevention Lifeline because they are the only crisis centers that are able to obtain the required consents from Lifeline callers for follow up activities. For more information, [click here](#).

SAMHSA Planning Grants for Expansion of the Comprehensive Community Mental Health Services for Children and Their Families

Deadline: *Mar. 1*

The SAMHSA Center for Mental Health Services is accepting applications for fiscal year 2013 for Planning Grants for Expansion of the Comprehensive Community Mental Health Services for Children and their Families (System of Care Expansion Planning Grants). The purpose of these grants is to develop a comprehensive strategic plan for improving and expanding services provided by systems of care for children and youth with serious emotional disturbances and their families. For more information, [click here](#).

University of Arizona Graduate Certificate Program in MCH Epidemiology Scholarship

Deadline: *Mar. 1*

The Mel and Enid Zuckerman College of Public Health is offering 10-15 scholarships to MCH professionals working with American Indian and underserved communities nationally. These scholarships valued at \$11,685 each, will be awarded for the year 2013/14. The University of Arizona's Graduate Certificate in MCH Epidemiology is offered entirely online with no requirements for travel. The deadline to apply for applications to the program is Mar. 1, 2013. For more information and to apply, [click here](#).

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CDC Medicaid Expansion and Reproductive Health Care for Women Grant

Deadline: *Application due Mar. 4, Letter of Intent due Feb. 4*

The intent of this funding opportunity announcement is to study the use of medical services and health outcomes among low-income women of reproductive age (15-44 years), before and after expansion of Medicaid eligibility. This research will require linkage of state Medicaid data with other key maternal and child health datasets including, but not limited to, birth certificates, death certificates, and hospital discharge data. One grant of approximately \$250,000 will be awarded, including both direct and indirect costs, in fiscal year 2013 to fund one applicant for the first 12-month budget period. For more information, [click here](#).

CDC Cost-Benefit of Incentive-Based Smoking Cessation for Pregnant Women Grant

Deadline: *Application due Mar. 4, Letter of Intent due Feb. 4*

The intent of this grant is for a study to assess the cost-benefit of a smoking cessation intervention that targets pregnant smokers. The intent is to evaluate a high intensity and low intensity contingency management (CM) intervention on prenatal smoking cessation. The suggested approach is a three-arm randomized controlled trial to assess smoking abstinence at end of pregnancy and cost-benefit of different intensity levels of CM on prenatal smoking cessation. The 3 arms would include: 1) a high intensity CM intervention for smoking cessation during pregnancy; 2) a low intensity CM intervention for smoking cessation during pregnancy, and 3) standard of care. One grant of \$560,000 will be awarded. For more information, [click here](#).

HHS ACL University Centers for Excellence in Developmental Disabilities Grant

Deadline: *Mar. 6*

Individuals with developmental disabilities and their families are the primary decision makers regarding the services and support such individuals and their families receive, and play decision making roles in policies and programs that affect the lives of such individuals and their families. Toward these ends, the Administration for Community Living (ACL) seeks to support and accomplish the following: Support the increasing ability of individuals with developmental disabilities to exercise

greater choice and self-determination and to engage in leadership activities in their communities; Enhance the capabilities of families in assisting individuals with developmental disabilities to achieve their maximum potential; Promote systemic change activities that ensure the active and meaningful engagement and participation of individuals with developmental disabilities in community-based programs and services; Promote the active involvement of individuals with developmental disabilities and families in all aspects of grantee programs, activities and services; and Ensure the protection of the legal and human rights of individuals with developmental disabilities. Seventeen expected grants of \$554,000 will be awarded. For more information, [click here](#).

HHS, CDC Quantifying Social Contact Rates and Mixing Patterns in the U.S. Population Grant

Deadline: *Mar. 7*

The purpose of this funding opportunity is to facilitate research to describe social contact and mixing patterns in the U.S. population. Results from this research will improve contact rate estimation and parameterization for infectious disease transmission models that can be used to evaluate infectious disease prevention and control strategies. Estimated total funding available including direct and indirect costs for first year (12 month budget period) is \$1,000,000. For more information, [click here](#).

CDC Monitoring Cause-Specific School Absenteeism Linked to Influenza Transmission Grant

Deadline: *Mar. 7*

Influenza transmission among school-aged children and young adults is frequently predictive of subsequent community transmission. Early recognition of school-based transmission of influenza, therefore, could contribute to the timely implementation of mitigation efforts to reduce morbidity and mortality in the wider community. Due to variability, more studies are needed to assess the utility of cause-specific school absentee data during future pandemics as well as during outbreaks of severe seasonal influenza. This funding opportunity is aimed at facilitating research to develop a school-based absentee monitoring system that could serve as means to rapidly detect influenza circulation in the wider community spread. Estimated total funding available including direct and indirect costs for first year is

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\$500,000 Estimated total funding available including direct and indirect costs for entire project period (3 year project period) is \$1,500,000. For more information, [click here](#).

SAMHSA Statewide Family Network Program

Deadline: *Mar. 7*

The purpose of this program is to enhance state capacity and infrastructure to be more oriented to the needs of children and adolescents with serious emotional disturbances and their families. These grants will provide information, referrals, and support to families who have a child with a serious emotional disturbance and create a mechanism for families to participate in state and local mental health services planning and policy development. The Statewide Family Network Program builds on the work of the SAMHSA Center for Mental Health Services, which helped to establish a child and family focus in programs serving children and adolescents with serious emotional disturbances around the country. Thirty awards of \$60,000 will be awarded. For more information, [click here](#).

Nursing Workforce Diversity Program Grant

Deadline: *Mar. 8*

Nursing Workforce Diversity (NWD) grants are awarded to increase nursing education opportunities for individuals who are from disadvantaged backgrounds (including racial and ethnic minorities under-represented among registered nurses) by providing the following: (1) student scholarships or stipends for diploma or associate degree nurses to enter a bridge or degree completion program; and (2) student scholarships or stipends for accelerated nursing degree programs, pre-entry preparation, advanced education preparation, and retention activities. These goals are consistent with the statutory authority provided in Title VIII to support projects that assist underrepresented students throughout the educational pipeline to become registered nurses, facilitate diploma or associate degree registered nurses becoming baccalaureate-prepared registered nurses, and prepare practicing registered nurses for advanced nursing education. Sixteen expected awards of \$350,000 will be awarded. For more information, [click here](#).

MCHB Life Course Research Network Grant

Deadline: *Mar. 11*

The Maternal and Child Health Bureau will award a cooperative agreement to support a Life Course Research Network (LCRN) focused on improving the understanding of the socio-environmental determinants of health experienced at different life course stages for the MCH population through engagement of researchers, practitioners, policymakers and consumers in a collaborative, innovative, and multidisciplinary research project. The LCRN is designed to accelerate the translation of the life course theory to MCH practice and policy and foster its rapid adoption into clinical and public health practice through systems integration and collaboration with entities that have a common goal of improving MCH outcomes (e.g., Title V programs, state and local health departments, community safety net programs and other public health programs serving underserved communities). One grant of \$150,000 will be awarded to support this initiative. For more information, [click here](#).

CMS Indoor Environment of Low-Income Renovated Multifamily Housing in the Western Region of the United States Grant

Deadline: *Mar. 13*

The purpose of the program is to evaluate housing factors that are energy efficient and have the potential to mitigate the negative health outcomes of low income children with asthma. This program addresses the "Healthy People 2020" focus areas of homes and communities and respiratory diseases. The award for the first year of funding will not exceed \$200,000. The second year of funding will not exceed \$300,000. For more information, [click here](#).

NCIPC Preventing Violence and Violence Related Injury Research Grants

Deadline: *Mar. 26, Letter of Intent Due. Feb. 26*

The purposes of the CDC National Center for Injury Prevention and Control (NCIPC) extramural violence prevention research program are to: 1) Build the scientific base for the prevention of violence by helping to expand and advance our understanding of the primary prevention of interpersonal and self-directed violence; 2) Encourage professionals from a wide spectrum of disciplines of epidemiology, behavioral and social sciences, medicine,

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biostatistics, public health, health economics, law, and criminal justice to perform research in order to prevent violence more effectively; and 3) Encourage investigators to propose research that involves the development and testing of primary prevention strategies as well as research on methods to enhance the adoption and maintenance of effective strategies among individuals, organizations, or communities. Three grants of \$350,000 will be awarded. For more information, [click here](#).

HRSA Oral Health Workforce Grant

Deadline: *Apr. 3*

This announcement solicits applications for the *Grants to States to Support Oral Health Workforce Activities Program*. The purpose of this program is to help states develop and implement innovative programs to address the dental workforce needs of designated dental health professional shortage areas in a manner that is appropriate to the states' individual needs. Applications for this program should describe innovative approaches to addressing and measuring oral health workforce needs at the state level. For more information, [click here](#).

Emergency Medical Services for Children Targeted Issues Demonstration Projects

Deadline: *Apr. 9*

The funding opportunity announcement for the Targeted Issues grants is intended to invite applications that will improve the care provided by Emergency Medical Services (EMS) providers for critically ill and injured children. Applicants should address specific needs in the field of pre-hospital pediatric emergency care that transcend State boundaries. There will be two categories of grants (see details below). Category I projects will demonstrate the establishment of an infrastructure for pediatric Prehospital research. Category II projects will improve pediatric pre-hospital research. Objectives must meet a demonstrable need in the prehospital care of children, and methodologies and strategies for achieving the objectives must be realistic, appropriate and scientifically sound. One award of \$300,000 will be awarded. For more information, [click here](#).

RWJF Executive Nurses Fellows

Deadline: *Jan. 15, 2014 at 3 p.m. EST*

RWJF Executive Nurse Fellows program is a three-year advanced leadership program for nurses who aspire to lead and shape health care locally and nationally. Fellows strengthen and improve their leadership abilities related to improving health and health care. Awards are open to registered nurses who hold senior leadership positions in health services, scientific and academic organizations, public health and community-based organizations or systems, or national professional, governmental and policy organizations. For more information, [click here](#).

CMS Cooperative Agreement to Support Establishment of Health Insurance Exchanges

Deadline: *Oct. 15, 2014*

Through this cooperative agreement, CMS will provide states, the District of Columbia, and consortia of states, with financial assistance for the establishment of exchanges. These awards will provide funds for the state to complete activities for achieving approval in accordance with Section 1321 of the Affordable Care Act and the requirements as established through the rulemaking process. For more information, [click here](#).

NIH Initiative to Maximize Research Education in Genomics Diversity Action Plan

Deadline: *Sep. 6, 2016*

The National Institutes of Health (NIH) present this funding opportunity to facilitate the training of individuals at all careers levels (the undergraduate, graduate, post baccalaureate, postdoctoral and faculty levels) from diverse backgrounds underrepresented in scientific disciplines relevant to genomics to enable them to pursue genomics research that spans all areas of interest to NHGRI later in their careers. For more information, [click here](#).

CALENDAR

AMCHP Board Meeting

Feb. 8-9
Washington, DC

AMCHP Events

[AMCHP 2013 Annual Conference](#)

Feb. 9-12
Washington, DC

MCH Events

[National Conference on Bullying](#)

Feb. 27-Mar. 1
Orlando, FL

[SAHM Annual Meeting: Achieving Healthy Equity for Adolescents & Young Adults](#)

Mar. 13-16
Atlanta, GA

[National Council for Behavioral Health Conference](#)

Apr. 8-10
Las Vegas, NV

[14th Annual National Healthy Start Association Spring Conference](#)

Apr. 6-9
Washington, DC

[SOPHE 64th Annual Meeting](#)

Apr. 17-19
Orlando, FL

[Third Annual Teen Pregnancy Prevention Grantee Conference](#)

May 20-22
National Harbor, MD

[Third National Cribs for Kids Conference](#)

June 25-28
Pittsburgh, PA

[NACCHO Annual 2013](#)

Jul. 10-12
Dallas, TX

[87th Annual American School Health Association Conference](#)

Oct. 9 - 12
Myrtle Beach, SC

[2013 American Public Health Association Annual Meeting](#)

Nov. 2-6
Boston, MA



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