



JUNE 6, 2008

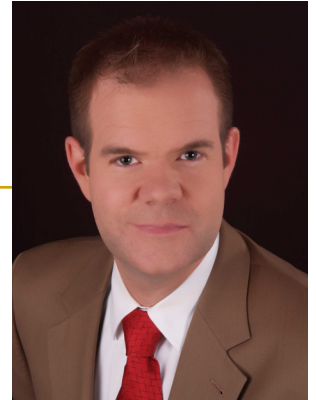
ASSOCIATION OF MATERNAL AND CHILD HEALTH PROGRAMS

# member Briefs

## MANAGEMENT MINUTE

### *Strategic Planning: Road Tripping with a Map*

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



Mention the words “strategic planning” and most people have one of two reactions: they either run away screaming or they roll their eyes and say, “Please, not again, I beg you!” In my 10 or so years of strategic planning work I have yet to see someone jump up and down and exclaim, “Great! When do we start?” Why such negative reactions? Maybe it’s because many strategic planning efforts involve painfully complicated processes that take on a life of their own, a life far removed from the actual realities the plan is supposed to inform. Maybe it’s because strategic planning processes become exercises in inclusion with a large group of stakeholders positioning themselves to ensure that their issues get included in the plan—no matter what—and the resulting plan is one giant compromise with which no one is satisfied. Maybe it’s because many strategic plans end up as nicely framed dust collectors on the walls of our conference rooms, or in binders on bookshelves that haven’t seen the light of day in years. And, honestly, maybe it’s because some strategic planning exercises are just plain bad: they lack inspiration, they are poorly facilitated, and everyone leaves the room a lot more confused than when they arrived.

Negative reactions to strategic planning have spurred a trend in organizational development that I find extremely troubling: some groups are forgoing strategic planning entirely. One association leader proudly told *Associations Now* magazine that he has stopped all strategic planning efforts because they were a waste of time, they constrain organizations by focusing on planning instead of results, and since no one can foresee the future it is an exercise in futility to try. Wow! This strategic planning stuff really does raise the ire of many! And I must admit there is something attractive about the thought of never having to do strategic planning again—ever!

Yet I’m convinced that a strategic plan is absolutely essential to organizational effectiveness. I use a “road-trip” analogy to describe the importance of strategic planning. Let’s say you want to go on a road trip. Do you just get in the car and drive? Or, do you think about where you want to go, how you want to get there, and draw a map so you don’t get lost,

figuring out where to stop along the way. Maybe you even plan a few detours to places you’ve always wanted to visit but never found the time to see. Strategic plans are maps: they guide us as we drive toward our goals. In my mind, an organization without a strategic plan is a bunch of people driving around having a good time, and yes, maybe even doing good work, but they are not exactly sure where they are going and at the end of the day they’ve wasted a lot of gas. And gas is getting expensive these days!

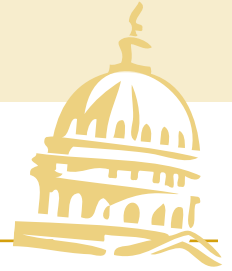
At its core, strategic planning is about setting organizational goals, defining objectives to reach those goals, and implementing strategies to obtain each objective. If you don’t want to call the process of organizational goal setting “strategic planning,” that’s fine. But if you define your goals and describe how you are going to reach them—well, that’s strategic planning to me. We all need maps to help us find our way. The process of putting these maps together should clarify why our organizations exist (we are we taking this trip, anyway?), what is important to us (the route we are taking), and yes, even tell us when we reach our destination (“are we there yet?”).

AMCHP’s Board of Directors will meet next week to review our 2005-2009 Strategic Plan, refresh it, and think about how to develop a new strategic plan for the future. While we won’t be entirely revising the plan, we will be thinking about how our environment has changed since our last strategic planning process and what that means for the goals and strategies in our current plan. In 2009 we will be revisiting our 2005-2009 Strategic Plan and crafting a 2009-2014 Strategic Plan. I welcome your input, ideas, and imagination as we think about where AMCHP should be to meet your needs. Let’s consider the future and collectively develop a plan to get where we need to go—together.



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## LEGISLATIVE CORNER



## Final Budget Resolution Retains Recommendation to Increase Title V

The Senate on Wednesday gave final approval to the fiscal year 2009 budget resolution conference report. AMCHP is thrilled to report that the provision included in the previously passed Senate resolution recommending an increase for the Title V Maternal and Child Health (MCH) Services Block Grant was retained in this final conference agreement between the House and the Senate. This provision was added to the resolution through an amendment sponsored by Sen. Dodd (D-CT) and Sen. Hatch (R-UT) that passed unanimously during the Senate's budget debate in March. AMCHP sent a letter to Congressional leaders supporting the resolution, available [here](#).

This five-year fiscal plan represents the agreement between the previously passed House and Senate budget resolutions. It lays out plans to balance the budget while making needed investments in priority areas. The final conference agreement was adopted by the Senate on a bipartisan vote of 48-45. With an affirmative House vote expected at press time on Thursday, this would mark the first time Congress has adopted a budget during an election year since 2000.

Again, the budget resolution is important because it provides general directions to the Appropriations committee, but because the resolution is non-binding it is critical that AMCHP members and friends continue to advocate for the recommendation to be actually included in the Labor, HHS and Education Appropriations Bills expected later this year. For more information on AMCHP's key appropriations message, click [here](#) or contact Brent Ewig or Josh Brown at (202) 775-0436.

## Exploring Policy Solutions for the Childhood Obesity and Chronic Disease Epidemics

AMCHP continues to collaborate with key partners in support of approaches that address the childhood obesity and chronic disease epidemics. This week AMCHP joined the Partnership to Fight Chronic Disease (PFCD) in releasing a new resource for policymakers titled *Keeping America Healthy: A Guide To Successful Programs*. The publication, which was compiled

by the PFCD with support from its members, showcases public and private programs from across the country that have proven successful in promoting healthy behaviors and reducing the burden of disease. AMCHP has prioritized action against chronic disease as part of our legislative agenda, and is actively engaged in the fight against chronic disease as a member of the PFCD and other coalitions.

Keeping America Healthy examines programs across four settings—workplaces, schools, communities and health systems—and identifies nine “essential elements” for success. It also includes a catalog that can serve as examples of ways to change individual behavior, maintain or improve health and manage the staggering health care costs associated with chronic diseases. This new resource is available on the PFCD Web site at [www.fightchronicdisease.org/promisingpractices](http://www.fightchronicdisease.org/promisingpractices).

Additionally, on May 28 we participated in a Web conference convened by The National Initiative for Children's Healthcare Quality (NICHQ) to discuss advocacy strategies for addressing obesity. NICHQ set an **advocacy framework** with four goals to: foster best available evidence and clinical and preventive recommendations; model and support healthy living at all levels; increase the availability of evidence, measures and data, and; enhance healthcare professionals' advocacy and role in the policy process.

AMCHP will continue to work on this key policy issue. Specific obesity facts for your state can be found at: <http://childhealthdata.org/content/ObesityReportCards.aspx>.

## Medicaid Regulations Moratoria Still Attached To Unfinished War Supplemental

House and Senate leaders are still debating what to include in the Iraq war spending bill that currently includes a moratoria on the series of CMS Medicaid Regulations. At press time there were reports that three regulations—including the Targeted Case Management regulation—could be stripped from the bill at the insistence of the White House. AMCHP is advocating with key Congressional leaders to counter this demand with insistence that the Targeted Case Management regulation not be excluded.



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## LEGISLATIVE CORNER CONT.

Before a final bill is sent to the President, some members of Congress are attempting to come up with a bill that limits discretionary spending to only what has been requested for the war. Additional items, such as the Medicaid moratoria, may increase the chance that the administration would veto the bill, although it appears Congress has the votes to override any veto. The outcome is still fluid and uncertain, but Congress hopes to have a bill on the floor for a vote on Friday, June 6th. AMCHP will continue to work with coalitions supporting the regulatory moratoria on all seven regs and push for final passage as soon as possible.

## GET INVOLVED



AMCHP, in partnership with the CDC, DRH, and MCHB, will conduct four data training workshops on December 8-9, 2008, in Atlanta, GA. The trainings serve as precursors to the 14th Annual CDC MCH EPI Conference scheduled for December 10-12, 2008 at the Crowne Plaza Hotel Atlanta-Ravinia. All four of the following courses will be two-day comprehensive and hands-on data trainings:

1. State Title V Program MCH Needs Assessment Practice
2. Scientific Writing: Communicating Research Investigation Effectively to Expedite Publication, Programmatic and Policy in Public Health
3. Time Trend Analysis for MCH Outcomes in Large and Small Populations
4. Using the Population Attributable Fraction (PAF) to Assess MCH Population Outcomes

Registration and course descriptions will be available online via the [AMCHP website](#) beginning **Monday, June 30**. Space is limited. For more information, please contact Henry Maingi ([hmaingi@amchp.org](mailto:hmaingi@amchp.org)) or Brynn Rubinstein ([brubinstein@amchp.org](mailto:brubinstein@amchp.org)).

## PUBLICATIONS & RESOURCES



### *Children's Health*

#### **Health Care Needs of Foster Care Children**

Children who have been abused or neglected often have greater physical and mental health needs and developmental delays than other high-risk populations. In fact, studies suggest that nearly 60 percent of children in foster care experience a chronic medical condition, and one-quarter suffer from three or more. This [First Focus policy brief](#) analyzes some of the key health care issues facing foster care children.

#### **Ranking the States on Children's Health Care**

The first-ever state-by-state health system "scorecard" to focus on children's health care finds wide differences across the country in the quality of care delivered, as well as disparities in access to services, insurance costs, and health outcomes. According to The Commonwealth Fund report, [U.S. Variations in Child Health System Performance: A State Scorecard](#), millions more children would have insurance and adequate health care, and would avoid developmental delays, if all states performed as well as the top states. Leading the state rankings are Iowa, Vermont, Maine, Massachusetts, and New Hampshire. States are ranked on 13 indicators of access, quality, costs, equity, and healthy outcomes.

#### **American Academy of Pediatrics Online Version of Bright Futures Guidelines**

Bright Futures Guidelines for Health Supervision of Infants, Children, and Adolescents—Third Edition provides information on the changes in families, communities, and society that impact infant, child, and adolescent health. The guidelines and reference information are available at [http://brightfutures.aap.org/3rd\\_Edition\\_Guidelines\\_and\\_Pocket\\_Guide.html](http://brightfutures.aap.org/3rd_Edition_Guidelines_and_Pocket_Guide.html).

#### **C-Sections Identified as Critical Factor in Preterm Birth Increase**

About 92% of premature single births were delivered by c-section, according to an analysis of nine years of national birth data. To read more on this story, visit [http://www.marchofdimes.com/aboutus/22684\\_30185.asp](http://www.marchofdimes.com/aboutus/22684_30185.asp).



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PUBLICATIONS &amp; RESOURCES CONT.

## *Children's Health cont.*

### **The Impact of Nurse Home Visitation on Birth Outcomes in African-American Women**

A [study](#) recently published in the Journal of the National Medical Association examines the effect of nurse home visitation on whether black women gave birth prematurely or to low-birthweight infants. Researchers looked at existing data from 109 women participating in the Black Babies Start More Infants Living Equally Healthy program in Montgomery County, MD. The program provides no-cost nurse case management and home visitation before and after pregnant women give birth. Researchers found that women who received the visits were 63% less likely to deliver preterm than women who had not received the home visits.

### **Report on Child Maltreatment 2006**

An estimated 905,000 children in the 50 states, DC and Puerto Rico were determined to be victims of abuse or neglect in 2006, according to this major [report](#) from the Children's Bureau.

### **Webinar on Child Abuse Prevention Programs**

June 11, 3:00 – 4:30 PM EST

The FRIENDS National Resource Center for Community-Based Child Abuse Prevention offers a webinar that demonstrates one organization's experience in implementing a variety of evidence-based and promising practices in a community of color. The presenter is Vickie Ybarra, Director of Planning and Development for Yakima Valley Farm Workers Clinic. To register, visit

<https://www2.gotomeeting.com/register/957219389>.

### **Playing Games to Improve Health**

A recent conference supported by the Robert Wood Johnson Foundation focused on Games and Health, bringing together more than 300 researchers, medical professionals, health care companies and game developers to share the latest approaches and research on how games and game technologies are making a difference in health and health care. To learn more about the conference, click [here](#).

### **Issue Brief on Using Multi-Sector Partnerships to Enhance Child Health**

An issue brief from Grantmakers for Children, Youth and Families (GCYF), [The Successful Integration of Health and Health Care into Broader Early Childhood Initiatives](#), focuses on the collaboration between health care and other child and family services. The brief offers a series of recommendations for practitioners, policymakers and funders to use in promoting effective multi-sector partnerships to enhance child development.

## *Adolescent Health*

### **Report on Why Young Adults Become Uninsured and Policies that Can Help**

A recently-updated [report](#) from the Commonwealth Fund looks at policies to increase the number of young adults with health coverage in the United States. The number of uninsured young adults in the U.S. rose to 13.7 million in 2006—an increase from 13.3 million in 2005—making the 19-to-29 age group one of the largest and fastest-growing segments of the population without health insurance.

### **Study on Teen Pregnancy as Linked to Gang Exposure**

Teenage girls with boyfriends who are affiliated with gangs are twice as likely as girls whose boyfriends are not gang members to become pregnant, according to a [study](#) published in the American Journal of Epidemiology, United Press International reports.

### **Fact Sheet on Adolescent Reproductive Health**

A Child Trends fact sheet reviews evaluated programs that focus on adolescent reproductive health. Among other findings, the fact sheet explores which types of programs have been shown to positively affect reproductive health outcomes. To view the full fact sheet, visit [http://www.childtrends.org/Files/Child\\_Trends-2008\\_05\\_20\\_FS\\_WhatWorksRepro.pdf](http://www.childtrends.org/Files/Child_Trends-2008_05_20_FS_WhatWorksRepro.pdf).



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**PUBLICATIONS & RESOURCES CONT.***Adolescent Health cont.***Fact Sheet on Preventing and Stopping Substance Use in Adolescents**

This Child Trends fact sheet reviews evaluated programs that focus on adolescent substance use. It explores whether both prevention and cessation programs work for adolescents, whether multi-component programs generally work, and whether programs that address all forms of drug use in combination generally work. To view the full fact sheet, visit [http://www.childtrends.org/Files/Child\\_Trends-2008\\_05\\_20\\_FS\\_WhatWorksSub.pdf](http://www.childtrends.org/Files/Child_Trends-2008_05_20_FS_WhatWorksSub.pdf).

**Report on Programs Proven to Affect Sexual Health Outcomes of Young People**

Science and Success: Sex Education and Other Programs That Work to Prevent Teen Pregnancy, HIV and Sexually Transmitted Infections identifies effective programs to help young people reduce their risk for pregnancy and sexually transmitted infections (STIs), including HIV. The second edition, recently published by Advocates for Youth, describes 26 programs that met rigorous criteria for inclusion and strongly affected the behaviors or sexual health outcomes of young people. The full report is available at <http://www.advocatesforyouth.org/programsthatwork/toc.htm>.

*Women's Health***Information on the Use of Prescription Drugs and Biological Products during Pregnancy and Breast-Feeding**

The U.S. Food and Drug Administration has proposed major revisions to the physician labeling for prescription drugs (including biological products) to provide better information about the effects of medicines used during pregnancy and breast-feeding. For more information, visit <http://www.fda.gov/bbs/topics/NEWS/2008/NEW01841.html>.

**Recommendations on the Prevention of Pertussis, Tetanus, and Diphtheria among Pregnant Women and their Infants**

A recent CDC report reviews available evidence on pertussis vaccination during pregnancy as a strategy to prevent infant pertussis. Additionally, this report summarizes Tetanus, Diphtheria, and Pertussis (Tdap) vaccination policy in the U.S. and presents recommendations for use of tetanus and diphtheria toxoids (Td) and Tdap vaccines among pregnant and postpartum women. For more information, visit [http://www.cdc.gov/mmwr/preview/mmwrhtml/rr57e0514a1.htm?s\\_cid=rr57e0514a1\\_e](http://www.cdc.gov/mmwr/preview/mmwrhtml/rr57e0514a1.htm?s_cid=rr57e0514a1_e).

**Review of Evidence on the Impact of Weight Gain among Women During Pregnancy**

Outcomes of Maternal Weight Gain presents findings from a systematic literature review focusing on evidence for the influence of gestational weight gain on birth, infant health, and maternal health outcomes. The report, published by the Agency for Healthcare Research and Quality, provides background information on weight gain recommendations and gestational weight gain patterns in the United States. The abstract and full report are available online at: <http://www.ahrq.gov/clinic/tp/admattp.htm>.

**Issue Brief on Recommendations for Improving Contraceptive Use and Provision**

Improving Contraceptive Use in the United States suggests the need for new strategies to improve women's contraceptive use and better protect them from unintended pregnancy. The issue brief, published by the Guttmacher Institute, is based on findings from two nationally representative surveys to investigate women's contraceptive experiences and clinicians' delivery of relevant care. The brief is available at <http://www.guttmacher.org/pubs/2008/05/09/ImprovingContraceptiveUse.pdf>.



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**FUNDING****First-Time Motherhood / New Parents Initiative**

This program will fund up to 10 awards to State Title V agencies to develop, implement, evaluate and disseminate novel social-marketing approaches that concurrently increase awareness of existing preconception/interconception, prenatal care, and parenting services/programs and address the relationship between such services and health/birth outcomes and a healthy first year of life. Approximately \$ 4,868,784.00 is available. The application deadline is June 30. The full announcement is available online at: <https://grants.hrsa.gov/webExternal/SFO.asp?ID=233F65AD-FBDA-4DFD-AAC0-6E624BAD80B5>.

**Support for Community-based Doula Programs**

This program will fund six demonstration programs to urban and rural community-based organizations to support community-based Doula activities to improve infant health, strengthen families and provide support to ensure family success. Funding for the rural portion of the demonstration should focus on the best ways of delivering supportive services, including delivery outside the hospital setting both before and after the birth of the child. Priority will be given to applications that emphasize breastfeeding initiation and retention. One award will be made to an organization with expertise in replicating community-based Doula programs, to offer outreach, training, technical assistance and evaluation services to Doula grantees in order to maximize project effectiveness and quality care across all projects. Approximately \$1,495,583.00 is available. The application deadline is July 1. The full announcement is available online at: <https://grants.hrsa.gov/webExternal/SFO.asp?ID=7377D502-C932-4F06-9571-9A3089C4B4F5>.

The Division of Healthy Start and Perinatal Services will have a technical assistance conference call to answer questions regarding HRSA 08-126 The Community Based Doula Program application process. The conference call will be Thursday June 12, 2008 at 1:00pm.

To participate in the conference call please call into 1-888-566-7679. The pass code for this conference call is 33199.

**Support for Home Visiting Programs to Prevent Child Maltreatment**

The Administration on Children, Youth and Families, Children's Bureau announces the availability of funds under the "Supporting Evidence-Based Home Visiting Programs to Prevent Child Maltreatment" program. These funds will support competitive grants to States, Tribes, and other eligible entities to support the infrastructure needed for the widespread adoption, implementation and sustaining of evidence-based home visitation programs. Funds will be used for efforts to expand and enhance home visitation programs based on proven effective models. Applications are due July 21, 2008. Approximately 21 awards of up to \$500,000 are available. The announcement is available online at: <http://www.acf.hhs.gov/grants/open/HHS-2008-ACF-ACYF-CA-0130.html>.

**Active Living Research and Healthy Eating Research Rapid-Response Grants**

A recent call for proposals from the Robert Wood Johnson Foundation supports time-sensitive, opportunistic studies to evaluate changes in policies or environments with the potential to reach children who are at highest risk for obesity, including African-American, Latino, Native American, Asian American and Pacific Islander children (ages 3 to 18) who live in low-income communities or communities with limited access to affordable healthy foods and/or safe opportunities for physical activity. Deadline for letter of intent: Open. More information is available online: <http://www.rwjf.org/applications/solicited/cfp.jsp?ID=20361&c=EMC-FA138>.

**Webcast on Developing A Statement of Need for Proposals**

The National Association of County and City Health Officials (NACCHO) has released "Developing Your Statement of Need: Using Data," a live webcast and discussion archive. The 90-minute webcast will equip participants with the skills they need utilize relevant data in order to craft compelling statements of need for proposal requests. To access the free archived webcast, visit: <http://webcasts.naccho.org/session-archived.php?id=1238>.



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## CALENDAR



### **Creating Currents of Change**

Ovarian Cancer National Alliance  
July 8-10  
Washington, DC

### **Summer Institute on Adolescent Health**

Sexual Health for All Young People: Are We There Yet?  
July 28-30  
St. Paul, Minnesota

### **2nd Annual National Conference on Health Communication, Marketing and Media**

Engage and Deliver  
August 12-14  
Atlanta, GA

### **Becoming the Healthiest Nation in a Healthier World**

ASTHO-NACCHO  
September 9-12  
Sacramento, CA

### **Reproductive Health 2008**

Association of Reproductive Health Professionals  
September 17-20  
Washington, DC

### **A Lifecourse Perspective: Pathways for Improving Practice in Urban MCH**

CityMatCH  
Sept 20-23  
Albuquerque, NM

### **Safe Kids Worldwide 2008 Child Injury Prevention Conference**

October 15-18  
Washington, DC

### **The National Rural School-Based Health Symposium**

Bassett Healthcare  
October 17-18  
Cooperstown, NY

### **The 2008 Nemours Conference on Child Health Promotion**

Advocacy, Policy, and Progress in the Fight against Childhood Obesity  
October 23-24  
Wilmington, DE

### **National Perinatal Association 2008 Annual Conference**

November 19-21  
Loma Linda, CA

*It's Never too Early to Save the Date!*

### **AMCHP 2009**

Feb 22-25, 2009  
Washington DC

## **AMCHP Conference Webcasts**

Webcasts from our 2008 and 2007 conferences are now available on the AMCHP website at [www.amchp.org/events/](http://www.amchp.org/events/).

If you have questions or comments about the webcasts, please contact Helen Cedeno at [hcedeno@amchp.org](mailto:hcedeno@amchp.org).