



National **MCH** Workforce
Development Center
Advancing Health Transformation

Invitation to Apply - Cohort 2017

Implementing the transformed Title V Block Grant is no easy task; from state action plans to ESMs, there are numerous new challenges to navigate. Do you have a particular problem or challenge that could benefit from an expert eye? Have you been struggling to navigate all of the transformations happening in health and health care? Do you have a “wicked” problem or complex challenge that might benefit from ongoing support? This opportunity provides support for a challenge you’d like to tackle with some guidance and structure.

The National MCH Workforce Development Center invites state/jurisdictional Title V agencies to submit applications for its upcoming Cohort learning opportunity. Accepted teams will participate in an 8-month Cohort with five other state/jurisdictional teams, during which time the Center will support their work on an existing (or planned) health transformation project as a way to increase skills and capacity.

While health transformation projects can be complex, our application process is not! You will submit a two-page project description and identify team members by **January 4 at 5:00 p.m.** We will follow up with a one-hour exploratory telephone call to complete the process.

Interested applicants can attend an optional informational call on December 1 from 3 to 4 p.m. No pre-registration is required. Please dial 888-363-4735, code 6600416.

Please reach out to Amy Mullenix at amy_mullenix@unc.edu or 919-843-4457 if you have questions or would like to talk about your ideas before applying.

National MCH Workforce Development Center Overview

Major transformations in the public health, health care and health financing sectors offer opportunities to improve public health systems, state/jurisdiction and community health care delivery, and ultimately, key health outcomes for MCH populations. Title V programs are uniquely positioned to help lead and influence major health system reform initiatives as they affect children, youth, women and families. The MCH Workforce Development Center offers a range of tools and resources to strengthen MCH capacity and skills in **three key areas**:

Systems Integration: “Wicked problems” such as persistent disparities in breastfeeding and infant mortality rates are particularly challenging. They are system-level problems that: a) cannot be solved by breaking the system into components; b) are often resistant to change, with efforts sometimes backfiring; c) are not necessarily seen as a problem by all relevant stakeholders; and d) often have a social, political, moral, and/or spiritual dimension that further complicate them. They require cross-sector collaboration and leaders skilled in assessing complex systems. Title V leaders and staff are well positioned to convene the diverse stakeholders and can leverage health transformation to promote intentional, collaborative work across disciplines and sectors, opening new possibilities for addressing wicked problems. This work can be supported by the Center’s Systems Integration experts, who offer practical systems thinking methods such as system mapping to increase family involvement and help solve complex transformation challenges.

Change Management & Adaptive Leadership: Title V needs nimble MCH leaders who are able to keep a clear view of the big picture while managing change effectively across boundaries. Adaptive leadership skills, for all levels of the Title V workforce, are the key to leading systems integration and guiding programs to results. Adaptive challenges are by definition difficult to define, therefore requiring a discrete set of adaptive leadership skills that must be applied time and time again to identify, frame and manage new challenges as they arise. The Center’s Change Management experts offer practical, hands-on support for Title V leaders and staff in real time, based on their own challenges in the areas of adaptive leadership, authentic leadership, workforce development for teams, leading teams, and population health and finance transformation.

Evidence-Based Decision Making: Over the past decade, identifying and using evidence to inform decision making has emerged as a critical public health priority. This opportunity brings with it the significant challenge of managing and maximizing resources to drive and sustain improvement. For Title V leaders and staff, the ability to use critical thinking skills to select appropriate programs and policies is essential as Title V programs are held accountable for National Performance Measures (NPMs) in the midst of health transformation. Evidence-based decision making experts at the Center offer tangible tools and support in the areas of results-based accountability, needs assessment, evidence appraisal and program selection, active implementation and quality improvement, performance management and program evaluation, and communicating and disseminating results.

In addition to these three core areas, the Center actively assists states/jurisdictions in promoting authentic family engagement and the intentional application of health equity in their projects.

Health Transformation Definition

The Center's definition of health transformation is reflected throughout Center activities, including the Cohort. All projects should address at least one component of health transformation as defined below.

Health transformation:

- Shifts the emphasis of health care from disease management to prevention and population health management, while improving access to affordable health care
- Develops an interprofessional/interdisciplinary approach to health care
- Integrates primary care, specialty care and public health
- Develops efficient health systems that better incorporate ongoing quality improvement, and
- Drives partnerships across sectors to optimize the well-being of maternal and child health populations.

For additional information about the Center, please visit the [Center's webpage](#).

Benefits of Working with the Center

Previous cohort participants report that this experience helps them to participate in health transformation activities such as engaging new partners, developing and implementing block grant activities, or continuing CoIIN work. Past participants also report that the Cohort experience has increased cross-sector collaborations that extend beyond the formal engagement with the Center; the knowledge and skills gained continue to be applied in their daily work. For example, some states continue to use system support mapping to promote family engagement by empowering family members to map and describe complex systems of care for their children. [Click here](#) to hear about previous state projects and impact. In addition to enhanced workforce skills and progress on their own projects, Cohort participants can also expect additional benefits:

- Individual leadership coaching for team co-leads
- Peer and Center support for consumers/family members
- Assistance in thinking about the health equity implications of the selected project
- Contact hours for team members participating in any of the Center's in-person or webinar-based Cohort trainings
- Relevant webinars and other resources to support your team's project
- National recognition and opportunities to present at national events such as the AMCHP annual conference
- Access to digital library resources such as peer-reviewed journal articles
- Liaison/alignment services from the Center on behalf of the state/jurisdiction with other national Centers, such as the Strengthen the Evidence Base Center at Johns Hopkins University, GotTransition, and many others

All Center training and consultation services are free of charge, including travel to an in-person Cohort training for five team members as well as a 2-4 day in-state consultation with relevant transformation experts at your location.

What to Expect when Working with the Center

Cohort participants should plan to be actively pursuing their project goals with support from the Center according to the timeline below. The timeline has been intentionally designed to support the Block Grant Action Plan cycle, although projects not related to Action Plans are also welcome. Each team that is accepted into the Cohort will be assigned a Center Coach who will serve as the primary liaison with the Center and a broker of all Center trainings, tools, and peer mentors. Opportunities to connect with other states/jurisdictions to share knowledge, ideas and problem-solve will be provided during and after active engagement with the Center. The Center is also able to actively assist states/jurisdictions in promoting authentic family engagement and the intentional application of health equity in their projects.

Timeline

Applicants should carefully review the timeline below and prepare to commit to each of the components.

December 1, 2016 3-4 p.m. EST	Informational Call for Potential Applicants - Optional 888-363-4735 code 6600416
January 4, 2017 at 5 p.m.	Applications due via email to: Alice Wertheimer, Project Coordinator, at alicew@unc.edu
January 5-6, 2017	All Applicants will participate in a one hour exploratory call with the Center
January 9, 2017	Accepted teams notified
January 25, 2017 3-4 p.m. EST	Welcome Webinar for all selected teams
January-February 2017	Selected teams will work with Center staff to prepare for in-person training <ul style="list-style-type: none"> • Clarification of project goals & team members • Full-team meeting to clarify project goals with all participants & prepare travel team with any needed information for Cohort training • Pre-training assessment
February 12 th @ 5:30 p.m. – February 15 th @3 p.m. EST	Cohort In-Person training for Travel Teams in Chapel Hill, NC
February – August 2017	Teams work with Center Coach to advance project goals
Monthly training webinars for full state/jurisdictional teams: March 22, April 26, May 24, June 28, July 26 2017. All held from 3-4 p.m. EST	
May-July 2017	In-state consultation (2-4 day visit) with Coach & relevant experts
August 30, 2017, 3-5 p.m. EST	Teams present results to date on celebration webinar

Application Guidance

Eligibility

A state/jurisdictional Title V program must be the lead applicant and assemble a cross-sector team of partners (usually 5-15 members). Only one application per state/jurisdiction will be considered. All states and jurisdictions are eligible and encouraged to apply, even if they have participated in a previous Cohort or received assistance from the Center in the past.

Participation Requirements

The key element of the application process is the description of a project that the applicant would like to work on in collaboration with the Center. The project described in the application will serve as a “practice laboratory” in which to apply the workforce skills provided by the Center. The project should address an existing real-world challenge from the Block Grant Action Plan or other MCH policy/programmatic plans. Many states take advantage of the Cohort opportunity to receive support as they begin a new phase of activities related to Block Grant Action Plans or other transformational efforts within their MCH programs. Adaptive, “wicked” or complex challenges that might benefit from ongoing support and adaptive assistance are welcome. The project should be linked to health transformation (as defined above) and benefit from increased capacity in the three key areas. Long-term project goals must be related to the improvement of population health outcomes for women and children.

Title V programs should select team members with a strong interest in learning and the ability to support change. At least half of the team members must be Title V/Children & Youth with Special Health Care Needs (CYSHCN) staff members. All teams should reflect the diverse populations they serve, and must include at least one consumer (e.g., family member, youth, advocate, affected individual). Other team members should be those most likely to provide active support to the project as it moves forward, such as colleagues in other State agencies (e.g., Medicaid), relevant technical experts, academic partners, local health department leaders, etc. A unique feature of the Center cohort experience is our support for cross-sector teams that can effectively advance complex health transformation efforts.

There are four levels of team participation required. Please indicate each team member’s anticipated role on the team in your application.

- **Team co-leads:** These two individuals will be the driving force behind the implementation of the project. They are responsible for providing leadership for the state/jurisdictional team, convening team meetings, responding to Center requests for project updates, etc. The co-leads can share these duties per their preferences. Each co-lead will receive individualized coaching from a Center change management expert throughout the course of the project. Time commitment: 2-3 hours per week per individual.
- **Full team:** Title V does not engage in health transformation activities on its own; therefore we require cross-sector partnerships to apply the workforce skills learned. This is the multi-sector team needed to move the proposed project forward, and may require up to 20 individuals for complex projects. At least 50 percent of the full team must be Title V staff members and include at least one consumer. All members of the full team are expected to meet regularly and participate in as many Center training activities as possible (except the in-person training). The composition of the full team may change

over time as the team makes progress on the project, but please attempt to name all individuals who will complete Center trainings and meet on a regular basis to work toward project deliverables. Time commitment: 2-3 hours per month per individual.

- Travel team: These five individuals are a subset of the full team, and should include the team co-leads plus the three additional individuals who are most critical to a successful launch of the project. All five Travel Team members must be able to fully commit to arranging travel in time to participate in the Cohort training held in February. Time commitment: 2-3 hours per month per individual as member of the full team (as described above), plus three full days at the Cohort training in February in Chapel Hill.
- Senior leader or Sponsor: The Sponsor is the team member(s) responsible for supporting the work of the team, “clearing the path,” removing administrative obstacles to change, and providing consultation to the team. (The Sponsor can also serve as a co-team lead if desired.) The senior leader/sponsor should be the Title V director and/or his/her supervisor, or a senior leader most relevant to the implementation of the state project. The senior leader/sponsor will receive regular reports from the team co-leads as well as participate in 1-2 webinars. Time commitment: 1-2 hours per month.

Application Process

Engagement with the Center is customized to the workforce development needs of the teams participating in Cohort 2017; the Center does not provide “cookie-cutter” services. In order to assess the readiness of potential applicants to enroll in Cohort 2017, the Center will use a two-part process.

Step 1: Submit your Statement of Interest & Intent to Support

Applicants should complete and submit the Statement of Interest and Intent to Support sections below by January 4 at 5 p.m. to Alice Wertheimer, Project Coordinator, at alicew@unc.edu. This portion of the process is intended to help you clarify your project goals and identify team members. It should be short and clear so that reviewers can begin to develop plans to support your team if accepted into Cohort 2017.

Step 2: Exploratory Telephone Conversation

Applicants will participate in a one-hour exploratory conversation with Center staff members on January 5 or 6. No additional in-depth preparation will be expected on the part of the Applicant prior to the telephone conversation. In addition to answering Applicant questions, the following topics will be discussed: 1) state/jurisdiction’s current health transformation landscape and context for the project, 2) state/jurisdiction’s self-assessment of workforce status and goals for the three key areas, 3) strategies for authentic consumer/family engagement, and 4) opportunities for advancing health equity within the project. Accepted applicants will be notified on January 9.

Please include the following two sections in your application by cutting and pasting the forms provided below into a new document.

1. Statement of Interest

I. Contact Information

State/Jurisdiction Name:	
Primary Contact's Name:	
Primary Contact's Position/Title:	
Primary Contact's Agency Name:	
Primary Contact's Phone Number(s):	
Primary Contact's Email Address:	
Primary Contact's Mailing Address:	

II. Team Table (Please insert additional rows as necessary)

Please provide a list of team members based on how you currently understand your project. Additional team members may be identified later in the process and roles may shift as the project gets underway.

Name	Title	Agency	Email & phone	Role Title V/CYSHCN staff, Consumer/family representative, Partner agency	Level of involvement (indicate all that apply) Co-lead, Full team, Travel team, Senior leader/sponsor

Have any of these team members worked with the Center in the past?

If so, please provide the name of the individual and briefly describe their Center-related activities.

III. Project Description

This section of the Application should describe your project and follow the guiding questions below. The types of projects that are ideal for this Cohort format are described in the guidance sections above. Please use 1-inch margins, a 12-point font, and use no more than two pages for this section (approximately 1-2 paragraphs per question listed below). Include any other relevant information that will help the Center team understand the context of your project.

1. **What current or planned project do you propose to use as a “practice laboratory”?** The project should be small enough to be able to implement some components within 6-9 months, but large enough to have long-term goals related to internal program and/or policy changes, systems-level changes and population health outcomes.
2. **What will success look like for the project?** (i.e. What will change for your workforce? What outcomes will be achieved? What is the “desired state” if you are successful in addressing this challenge?)
Please describe project success in the short-term (6 months-2 years) as well as your vision of how this work will impact internal and/or external capacity in the long term.
3. **How will consumer/family involvement be leveraged to further the goals of the proposed project?**
4. **How will the team benefit from training and support in the following areas: change management/adaptive leadership, systems integration, and/or evidence-based decision making?**

Please indicate at least 5 possible times for your exploratory telephone conversation, and hold your selected times in the calendars of your team co-leads (or any other team members who can represent your team’s application). You will be notified of your timeslot by the morning of January 6.

- | | |
|--|-----------------------|
| <input type="checkbox"/> Thursday, January 6 | 9 - 10 a.m. EST |
| <input type="checkbox"/> Thursday, January 6 | 10 - 11 a.m. EST |
| <input type="checkbox"/> Thursday, January 6 | 11 a.m. - 12 p.m. EST |
| <input type="checkbox"/> Thursday, January 6 | 12 - 1 p.m. EST |
| <input type="checkbox"/> Thursday, January 6 | 1 - 2 p.m. EST |
| <input type="checkbox"/> Thursday, January 6 | 2 -3 p.m. EST |
| <input type="checkbox"/> Thursday, January 6 | 3 - 4 p.m. EST |
| <input type="checkbox"/> Thursday, January 6 | 4 - 5 p.m. EST |
| <input type="checkbox"/> Friday, January 7 | 9 - 10 a.m. EST |
| <input type="checkbox"/> Friday, January 7 | 10 - 11 a.m. EST |
| <input type="checkbox"/> Friday, January 7 | 11 a.m. - 12 p.m. EST |
| <input type="checkbox"/> Friday, January 7 | 12 - 1 p.m. EST |
| <input type="checkbox"/> Friday, January 7 | 1 - 2 p.m. EST |
| <input type="checkbox"/> Friday, January 7 | 2 -3 p.m. EST |
| <input type="checkbox"/> Friday, January 7 | 3 - 4 p.m. EST |
| <input type="checkbox"/> Friday, January 7 | 4 - 5 p.m. EST |

2. Intent to Support

Please ensure all potential team members are aware of their participation in the project. The Center requires documentation of support from key project team members as well as senior leaders who can help “clear the path” for the project to move ahead. We ask the following individuals sign below to indicate their support:

- 1) Title V and/or CHSCHN Director
- 2) Any additional senior leaders who will be key to supporting the work
- 3) Team co-leads
- 4) At least one proposed team member from each agency involved in the project
- 5) Consumer/family representatives if they have already been identified

By agreeing to have my name, title and organization listed below, I confirm that:

1. I have participated in the development and/or careful review of this Application,
2. I agree with the content of this Application,
3. If selected, my organization will make a good faith effort to participate fully in all Cohort activities with the National MCH Workforce Development Center, including:
 - a. Webinar trainings, including those held specifically for senior leaders/sponsors
 - b. In-state consultation visits
 - c. Center evaluation activities throughout the Cohort experience
 - d. Peer mentoring opportunities as appropriate
4. If selected, my organization will make a good faith effort to meet our agreed upon goals.

Organization Name	Agency Representative Name	Agency Representative Title	Agency Representative Signature