

Member Briefs



May 17, 2016



THE ASSOCIATION OF MATERNAL & CHILD HEALTH PROGRAMS



MANAGEMENT MINUTE

If it doesn't challenge you, it doesn't change you. ~ Fred DeVito

It seems like a long time since I was able to write a Management Minute actually focused on management! In fact, when I last wrote in late February, we were very focused on the rescheduled Annual Conference and I promised to return to the theme of perseverance and resilience and talk about a term from the education and psychology field that I both admire and believe in. The term is "grit".

You might recall from the February column that grit means having a long-term tenacity and drive – over the course of sometimes years or decades – to achieve goals. Grit also implies the strong presence of other key human characteristics including courage, conscientiousness, endurance and follow-through, resilience and excellence.

Some of the characteristics of grit are rather easy to identify ourselves with because we recognize that successful endeavors often embody the need for courage, commitment and ability to overcome challenges. But some have argued, and I would agree, that there's much more to this idea of grit than these adjectives. It has to do with going after things you want to achieve even if failure is a likely option. It is knowing, even in failure, that the experience is the reward itself, the mere effort teaches you something you never knew and your life experience is enhanced only if for the sake of the attempt itself. It means that when setbacks are imminent, you push because the passion you feel for the endeavor far outweighs any recognition you may ever receive. It's a mindset and not based on intrinsic talent, skill or ability but rather on belief in your own potential for

growth and the joy that comes from simply experiencing something just for the pure love of it. In fact, some describe it as falling in love with a passion and staying in love with that passion over a long time. When you have real grit, I'm not sure you give a lot of thought to what you are doing or over-rationalize why you are doing it. Rather, you are entrenched with your work ethic, self-awareness and the ability to see yourself and other outcomes in a future that looks different than today.

When speaking to students, sometimes I get the question about how I arrived at this point in my career and what steps I took to get there. I kept going back through my career and could not really identify truly defining moments. But when I contemplated things that happened in my life, my upbringing and other exposures as a kid growing up in a blue collar family with both parents working split shifts in factory settings and raising five kids, the answer became more apparent. Part of why I am who I am is because of grit. I set my sights on things that were outrageously impossible and pursued them, sometimes with wild abandon. Even when I had self-doubt, I ignored it. This mindset has contributed to my life over and over again and, never once, have I regretted a pursuit even if I could not ultimately count it as a success

If you subscribe to the theory of grit, you can also see how it could be transformational in terms of raising up those who may not be exposed to the same advantages in terms of income, education and other social determinants. So, there could be something to teaching the value of grit to our kids. In fact, in California, there are schools that are now actually grading kids (and their schools) on grit.

From a management perspective, it's also our responsibility to recognize and reward grit in our staff.

MANAGEMENT MINUTE CONT.

When I read countless résumés and interview dozens of potential employees, I look for grit. It's easier to recognize than you might imagine. I'm often as interested in learning about people's backgrounds as I am in their education and work experience. How those things come together can really provide an interesting perspective on the candidate and how they respond to diversity, change, opportunities and challenges, and working with others.

It's a great attribute to explore in a new recruit. Can you think of some of your own experiences when you got your grit on or how it has served you in your own life? Your comments, counter-points, suggestions or thoughts are always welcomed. Email me at freeman@amchp.org.

LEGISLATIVE AND POLICY CORNER



House Passes Bills to Address Opioid Epidemic

The House of Representatives during the week of May 10 passed several bills addressing the opioid epidemic that had previously cleared the House Energy & Commerce Committee. The bills were then combined into a single package to be attached to a bill already passed by the Senate. AMCHP continues to monitor these bills as they move and will share any analysis of opportunities for engagement by state Title V programs.

Senators Seek Stronger Pediatric Services in Essential Health Benefits Package

On May 5, U.S. Senators Schatz, Cardin, Casey, Brown, Gillibrand, Murphy, Warren, Blumenthal, Markey, Nelson and Boxer circulated a "dear colleague" letter to Department of Health and Human Services (HHS) Secretary Sylvia Burwell about strengthening the pediatric services category of the [Essential Health Benefits](#) (EHB). Under the current law, states are allowed to benchmark their pediatric benefits based on the benefits of a typical private plan. The letter argues that structuring the benefits in this way does not target the specific needs of children and youth and does not ensure that they receive adequate benefits. The letter argues that HHS should create a national standard definition of

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the pediatric services benefit in an effort to better support children's health and development. The [American Academy of Pediatrics](#) has developed a robust set of [recommendations](#) to create this national standard.

Health Reform Implementation

Arizona Adds Health Insurance Program for Children

Arizona Gov. Doug Ducey on May 6 [signed into law](#) a bill that aims to help working families who earn too much to qualify for Medicaid but who cannot afford private health insurance. Arizona had opted out of the federal [Children's Health Insurance Program](#) in 2010 due to budget concerns. To qualify for the new [KidsCare](#) program, a family of four must earn between \$33,000 and \$49,000 annually. It is estimated that this program will serve about 30,000 children.

New Report Finds 47 States and D.C. Reimburse for Telehealth

47 states and the District of Columbia currently provide fee-for-service reimbursement for medical services delivered via some form of live video, according to the fourth edition of the "[State Telehealth Laws and Reimbursement Policies](#)". The report, designed for policymakers, health advocates and health care professionals, is the most current summary of telehealth-related policies, laws and regulations.

Continuity of Care Provision Included in 2017 Benefit and Payment Parameters

The recently finalized [2017 Benefit and Payment Parameters](#), which apply to health plans sold in Federally Facilitated Marketplaces (FFMs), includes a continuity of care provision allowing consumers undergoing an active course of treatment to continue seeing their provider after the provider is terminated from a health plan network without cause. On-going care with the provider must continue at in-network cost-sharing rates until the course of treatment is complete, or for 90 days, whichever is shorter. For example, the final rule extends the right to continuity of care for pregnant women through the postpartum period, a change that is consistent with the [National Association of Insurance Commissioners](#) (AIC) [model law](#), as well as with 29 state laws. More information is available [here](#).

POLICY CORNER CONT.

CMS Clarifies Requirements for Managed Care Reimbursement to FQHCs and RHCs

The Centers for Medicare and Medicaid Services (CMS) recently released [guidance](#) clarifying the requirements for states to implement alternative payment methodologies (APMs) under which Medicaid and CHIP-managed care entities directly reimburse federally-qualified health centers (FQHCs) and rural health clinics (RHCs) the full amounts payable to them under the prospective payment system. The guidance notes that states are also required, in all managed care contracts starting on or after July 1, 2017, to include access to at least one FQHC, one RHC and one freestanding birth center, when available.

CMS Encourages States to Facilitate Access to Medicaid for Justice-Involved Populations

CMS recently released [guidance](#) to ensure that states facilitate Medicaid access for justice-involved populations prior to and after a stay in correctional institutions. For the purposes of claiming Federal Financial Participation (FFP), the guidance clarifies the regulatory definition of an "inmate of a public institution" as an individual who is in custody and held involuntarily in a public institution operated by law enforcement authorities. CMS further clarifies that a state may claim FFP for justice-involved populations on parole or probation; residing in a halfway house, under certain conditions; or on home confinement. Reinforcing long-standing CMS policy, the guidance encourages states to suspend, rather than terminate, Medicaid enrollees entering incarceration in

order to ensure better continuity of coverage after their release.

HHS Announces Challenge to Create "A Bill You Can Understand"

Department of Health and Human Services (HHS) Secretary Sylvia Burwell recently [announced](#) a new challenge for health care organizations, designers, developers, digital tech companies and other innovators: Design a medical bill that's simpler, cleaner and easier for patients to understand, and improve patients' experience of the overall medical billing process. The Bill You Can Understand design and innovation challenge is intended to solicit new approaches and draw national attention to a common complaint with the health care system: that medical billing is a source of confusion for patients and families. The challenge will issue two awards: one for the innovator who designs the bill that is easiest to understand and another for the innovator who designs the best transformational approach to improve the medical billing system, focusing on what the patient sees and does throughout the process. Get information [here](#).

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Evidence-Based or -Informed Strategy Measures (ESM) Learning Labs

In follow-up to the State Title V Technical Assistance Meeting that took place in Washington, D.C., on April 5 and 6, the Maternal and Child Health Bureau is hosting several learning labs, each focusing on population health domain. The labs will build on the work at the Technical Assistance Meeting to provide ongoing technical support in the development of Evidence-Based or -Informed Strategy Measures (ESMs) to address each of the National Performance Measures (NPM). Each lab will be scheduled from **3:30-5:00 p.m. ET**. To dial-in, **please call 800-619-3217 (toll-free)** and use **passcode 9245999**. Dial-in and passcode information is the same for all learning labs which have access for 100 callers. Additional information about registration and scheduling is provided below:

- The [Child Health](#) Learning Lab is scheduled for **May 18** and will focus NPM 6, developmental screening and NPM 8, physical activity.

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- The [Cross-Cutting/Lifecourse](#) Lab is scheduled for **May 23** and will discuss NPM 13 (oral health), NPM 14 (smoking) and NPM 15 (adequate insurance).
- The [Women's Maternal Health](#) Lab is scheduled for **May 25** and will focus on NPM 1 (well woman visit) and NPM 2 (low-risk cesarean).
- The [Perinatal/Infant's Health Lab](#) is scheduled for **June 1** and will discuss NPM 3 (risk-appropriate perinatal care), NPM 4 (breastfeeding) and NPM 5 (safe sleep).

Title V Block Grant Webinar

Join us on **May 24 from 2:30-3:30 p.m. ET** for an interactive webinar, "Connecting IM ColIN Efforts to Title V Block Grant." Objectives for this session include sharing methods for leveraging IM ColIN efforts and aligning with the Title V Block Grant, and facilitating state sharing around connecting ColIN efforts to Title V National Performance Measures. This webinar will include time for discussions and Q/A with the presenters. Attendees should come prepared to discuss the following questions:

- How have you successfully leveraged IM ColIN activities with your Title V Block Grant?
- What Title V efforts/activities/work have you been able to innovate, improve or enhance by participating in IM ColIN?
- Where are you struggling to make a connection between your work and Title V Block Grant?
- What new ideas do you have for leveraging your existing activities?
- General questions regarding Title V Framework/ESMs.
- What support or ongoing technical assistance do you need?

To register, [click here](#).

Applications Open for the 2016 MCH Epi Pre-Conference Trainings

AMCHP and CityMatCH will offer four two-day training options Sept. 12-13 for those wishing to build their skills in the areas of Medicaid claims analysis, data communication, spatial thinking and evidence-based public health. A detailed description of each, including learning objectives and MCH leadership competencies addressed, is available through the [AMCHP website](#). To

apply, [click here](#). The deadline to submit an application for "early decision" is **June 1**. The training application will remain open as long as slots are available until **July 1**.

Workforce Development Series Focuses on 'Bench Strength'

AMCHP is pleased to present a new MCH Workforce Development Solutions Series Domain (WSSDOM). This new series will provide a platform for AMCHP members to learn more about successful workforce development solutions to address issues such as staffing, organizational design, accreditation and work process re-design (e.g., due to health transformation), to share innovations and to identify best practices. The WSSDOM series consist of 45-minute live interactive webinars. The next topic is:

• Building Bench Strength

One of the major changes affecting the Title V workforce is the growing number of the staff who are retiring. Because of the changing workforce, states have increasingly worked to build the bench strength of their staff. This webinar will take place on **June 14, from 3:00-4:00 p.m. ET** and will focus on rebranding succession planning on staff development, overcoming the challenge of engagement, and maintaining realistic goals. This webinar will feature guest speakers Steve Orton, Senior Investigator for the North Carolina Department of Health, and Regina Bryde, Division of Family Health Title V Coordinator for the New York State Department of Health. To register, [click here](#).

Free MCH Summer Skills Institute

The National MCH Workforce Development Center is offering a free MCH Summer Skills Institute in August. You can choose either a three-day or five-day schedule to enhance your skills and improve effectiveness. All activities will focus on advancing block grant strategies and outcomes in the health transformation environment. The institute will also include the rescheduled full-day session on Collective Impact in MCH. Hold the dates of **Aug. 22-26** and check out the National MCH Workforce Development Center's [website](#) or AMCHP's Member Briefs/Pulse for registration details. For additional information, [click here](#).

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Stay Informed About Adolescent and Young Adult Health

A new service is on the way to help you stay up-to-date on adolescent and young adult health topics and resources: The Adolescent and Young Adult Health National Resource Center (AYAH Center), funded by HRSA's Maternal and Child Health Bureau (MCHB), recently launched a newsletter -- and Member Briefs subscribers will automatically receive it. The AYAH Center created the newsletter to inform the field about trending adolescent and young adult health topics; provide resources from the AYAH Center, the Collaborative Improvement and Innovation Network (CoIIN) and the MCH community; and promote upcoming events related to adolescent and young adult health. Future issues will include information about AYAH Center activities. For more information about the AYAH Center and its partners -- AMCHP, the National Adolescent and Young Adult Health Information Center (NAHIC), the National Improvement Partnership Network (NIPN) and the State Adolescent Health Resource Center (SAHRC) - [click here](#).

Strengthen the Evidence Base: Communities of Practice (CoP)

Come and join AMCHP's Strengthen the Evidence Base: Communities of Practice (CoP)! The CoPs are grouped by population domain including Child Health, Children and Youth with Special Health Care Needs (CYSHCN), Cross-cutting/Life-course, and Women's/Maternal Health. The purpose of the CoPs is to provide a space for peer sharing and learning, which could include topics ranging from Evidence Based Strategy Measures (ESM) development to implementation of your plan. As a participant, we encourage active contributions within the CoPs by responding to discussion questions, posting your own questions and resources, and engaging with other participants. To sign up, [click here](#). For questions or additional assistance, please contact Krista Granger at kgranger@amchp.org or Sarah Beth McLellan at smclellan@amchp.org.

Text4Baby Users are One in a Million!

As of April 2016, Text4Baby – the largest mobile health initiative in the nation – had enrolled 1 million pregnant women and new mothers, reaching them with important health and safety information. Since the program's launch in 2010, Text4Baby has built and relied on a vast

network of more than 1,400 outreach partners – including hospitals, Medicaid agencies and WIC clinics – to spread the word and aid in enrollment. Text4Baby sends a special “thank you” to the partners who helped reach this milestone. Zero to Three and Voxiva are hosting events around the country to celebrate this achievement. To participate in the next celebration or work in helping Text4Baby reach its next million, send inquiries to info@tex4baby.org.

Latino Children Undercounted in Census

On **May 18, from 2:30-3:30 p.m. ET**, the Child Trends Hispanic Institute and the NALEO Educational Fund will host a webinar highlighting [The Invisible Ones: How Latino Children Are Left Out of Our Nation's Census Count](#), a recent collaborative publication by both organizations that reveals that 400,000 Latino children were unreported in the 2010 Census, which is the biggest undercount of any group in the United States. The webinar will explain why the undercount occurred and what can be done to correct it in time for the 2020 Census. To register, [click here](#).

Reducing Disparities in Teen Birth Rates: A National Snapshot and Examples from the Field

On **May 19, from 1:00-2:00 p.m. ET**, the Centers for Disease Control and Prevention (CDC) will highlight the findings from the *Morbidity and Mortality Weekly Report (MMWR)* that was released April 28 about reductions in teen birth rates and persistent disparities. Program partners in North Carolina and South Carolina will describe efforts to address the social determinants of health through the Office of Adolescent Health/CDC Teen Pregnancy Prevention Community-Wide Initiative (2010-2015) that might have contributed to narrowing of differences in birth rates between white and black teens in targeted communities in their states. A Q&A session will follow. To register, [click here](#).

Child Safety in Tribal Communities

On **May 19, from 2:00-3:30 p.m. ET**, the U.S., Office of Juvenile Justice and Delinquency Prevention, in collaboration with the Fox Valley Technical College AMBER Alert National Training and Technical Assistance Program, will present “Outreach, Prevention, and Intervention Strategies in Tribal Communities: A Focus on Child Safety.” This webinar will discuss child safety

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methods in tribal communities and how to enhance different approaches. Presenters will identify strategies to increase child safety messaging that include partnership and technology. To register, [click here](#).

The State of Reproductive Health Care in 2016: Impact of the Affordable Care Act and Birth Control Coverage Requirement

The American Congress of Obstetricians and Gynecologists (ACOG) will host a free webinar on **May 19, from 3:00-4:00 p.m. ET**, to clarify the legal requirements for coverage of the full range of FDA-approved contraceptive methods, including long-acting reversible contraceptive (LARC) methods. This webinar has been approved for AMA PRA Category 1 credit. To register, [click here](#).

Preventing Bullying and Discrimination of Muslim Youth

The U.S. Office of Juvenile Justice and Delinquency Prevention will present a webinar, "Helping Educators and Counselors Prevent Bullying of and Discrimination Against our Nation's Muslim Youth," on **May 23 from 2:00-3:30 p.m. ET**. The webinar will cover civil rights, bullying and harassment of Muslim youth, basic cultural competence, behavioral health implications of bullying, and available resources. The webinar will be conducted in collaboration with the Office of Community Oriented Policing Services, the Department of Education's Office for Civil Rights and the Department of Health and Human Services' Substance Abuse and Mental Health Services Administration. To register, [click here](#).

Child Abuse Prevention Webinar

On **May 25, from 2:00-3:00 p.m. ET**, the Children's Safety Network will host a webinar, "Preventing Child Abuse and Neglect to Create a World Where Every Child Can Thrive." The webinar will highlight the CDC's Essentials for Childhood framework, which is intended for communities committed to the positive development of children and families, specifically the prevention of child abuse and neglect. The webinar will provide state examples and resources to support the framework. Presenters from the Association of State and Territorial Health Officials will highlight several policy approaches for states to consider when working to create the context for healthy children and families, and will discuss how these approaches can have a positive influence on

children's health, family relationships and opportunities for learning. To register, [click here](#). The webinar capacity is limited.

Making the Connection: Climate Changes Children's Health

The American Public Health Association and ecoAmerica are cosponsoring a webinar series that investigates the health impacts of climate change. This series explores the connection between climate change and key areas of our health, including asthma, health risks in children, mental health and healthy community design as a mitigation approach. The webinar on **May 26, from 1:30-2:30 p.m. ET**, will provide insights on how climate change can influence children's health and well-being. To register, [click here](#).

Disparities in the Health and Well-Being of Children and Youth in Rural Areas of the United States

On **May 31, from 3:00-4:00 p.m. ET**, the Maternal and Child Health Bureau will host the latest installment in the DataSpeak Series. This webinar will present recent data from national surveys and data sets on access, health status, and mortality patterns for children and youth in rural areas, along with resources and information on improving the health of these populations. To register, [click here](#).

Upcoming Webinar Series

Join Child Trends and other partners of the National Center on Early Childhood Quality Assurance for a webinar series focused on evaluating quality initiatives, especially those related to the Child Care and Development Fund. Topics include evaluation basics, data collection and analysis, as well as evaluation timing and reporting.

- Session 3 of the series will take place on **June from 3-4:30 p.m. ET**. This webinar will discuss the timing of data analysis, dissemination strategies and the messaging of evaluating findings, as well as ways to examine the infrastructure needed to support evaluation findings over the long term. [Click here](#) to register.

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Investing in Children's Health and the Pay for Success Approach

The National Institute for Health Care Management Foundation will host a webinar on **June 6, from 1:00-2:30 p.m. ET**, about the Pay for Success (PFS) approach, which invites investors and philanthropies to fund evidence-based social programs, such as home visits, with reimbursement from the government when the programs achieve their objectives. The webinar will cover how PFS works; which partners and programs might benefit from PFS, and the challenges they face; an update on federal efforts on PFS; results from feasibility studies on various state-level PFS proposals; and a \$30 million multi-sector PFS partnership to expand home visiting in South Carolina. To register, [click here](#).

Institute for Equity in Birth Outcomes

City MatCH is accepting applications for the Third Cohort of the Institute for Equity in Birth Outcomes. Seven Teams will gain the opportunity to be a part of this high-visibility, national movement of urban communities instilling a data-driven focus on public health strategies to reduce inequities in birth outcomes. A major focus for this cohort will be on authentic community engagement and engaging in racial healing activities. Approaches will be thoroughly evaluated, with results and impact of local initiatives broadly disseminated. Applications must be received by **June 10 at 11:59 p.m. ET** in order to be considered. Please submit all required application materials to Denise Pecha, City MatCH Director of Programs, at denise.pecha@unmc.edu. For more information, [click here](#).

The ACE Study: Implications for MCH Policy and Practice

Maternal and Child Health Journal is soliciting manuscript submissions based on the ACE (Adverse Childhood Experiences) Study, for an issue dedicated to enhancing knowledge of the study and its implications across the field. Topics of interest include: the aims and findings of the ACE Study; the implications of the study and use of its findings to shape MCH practice in clinical, program and policy settings; the importance of the study in relation to life course theory and social determinants of health; the strengths and limitations of the study as a basis for action to improve MCH outcomes; adoption of a trauma-informed approach on an agency or communitywide basis; and the strengths and limitations

of the study in relation to efforts to eliminate inequality in MCH health outcomes. Submissions received by **July 1** will have a greater likelihood of acceptance. When submitting a manuscript, include a cover letter requesting that it be included in the thematic issue and select "ACE Special Issue" as manuscript type. For submissions and additional instructions, [click here](#).

New Name for Home of Catalyst Center

The name of the group that is home to the Catalyst Center has changed. The Catalyst Center – a national center dedicated to improving health care coverage and financing for children and youth with special health care needs – is run by the **Center for Advancing Health Policy and Practice** (formerly the Health & Disability Working Group) at Boston University School of Public Health. The new name better reflects the group's focus on advancing policies and practices that improve the well-being of vulnerable populations, including children with special health care needs. The Catalyst Center URL will continue to bring you to the [Catalyst Center website](#), which is now part of the new [CAHPP website](#). You can [sign up for the new CAHPP quarterly newsletter](#) to learn about the group's other activities to provide meaningful policy change and support for social change.

PUBLICATIONS & RESOURCES



Zika Corner

Interim Guidance for Zika Virus Testing of Urine

The Center for Disease Control and Prevention's (CDC) *Morbidity and Mortality Weekly Report (MMWR)* released findings that suggest the Zika virus can be detected in urine for at least two weeks after the onset of symptoms. On the basis of the new data, CDC recommends Zika virus rRT-PCR be performed on urine collected less than 14 days after the onset of symptoms in patients with suspected Zika virus disease. To access the report, [click here](#).

RESOURCES CONT.

Zika Action Plan (ZAP) Follow-up Teleconferences

Teleconference presentations archived by the CDC provide information on pregnancy and birth defects, health messaging and communications for response to the Zika virus transmission, and other relevant resources for health officials. For more information, [click here](#).

Workforce Development

Workforce Preparation and Child Outcomes

[This brief](#) discusses the available evidence on the associations between the preparation of infant/toddler teachers and caregivers, and improvements in quality and child outcomes. This brief was published by Child Trends scholars, written under contract with the U.S. Office of Planning, Research, and Evaluation.

Child & Adolescent Health

New CDC Vital Signs on ADHD

The Centers for Disease Control and Prevention (CDC) released an article, “Vital Signs: National and State-Specific Patterns of Attention Deficit/Hyperactivity Disorder Treatment Among Insured Children Aged 2-5 Years – United States, 2008-2014,” as well as a four-page consumer fact sheet that presents a call to action. The CDC urges healthcare providers to refer parents of young children (2 to 5 years old) with attention deficit/hyperactivity disorder (ADHD) for training in behavior therapy before prescribing ADHD medicine to treat the disorder. The report explains why behavior therapy is an important first step for young children with ADHD [and what parents will learn and experience during their training](#). To view Vital Signs, [click here](#) (insert link). To view the fact sheet, [click here](#) (insert link).

New Epilepsy Resources

The American Academy of Pediatrics is the Coordinating Center for Children and Youth with Epilepsy under HRSA’s Maternal and Child Health Bureau. The center provides continuous learning opportunities for MCHB grantees, the program’s advisory committee, as well as other health professionals. New parent articles have been posted to the [Healthy Children’s website](#):

- [Seizure Medications for Children & Teens](#) (Audio)

- [Practical Tips for Parents of Children who Take Seizure Medication](#) (Audio)
- [Talking About Epilepsy with Children, Family and Friends](#) (Audio)

Other articles on the site include:

- [Epilepsy in Children: Diagnosis & Treatment](#)
- [Seizures and Epilepsy in Children](#)
- [How to Support a Child with Epilepsy: Information for Parents](#)
- [Seizures](#)
- [Children with Epilepsy at School](#)
- [Seizure Safety: Tips for Parents](#)

For more information about the center, [click here](#).

Women’s & Infant Health

Maintaining the Downward Trend

Child Trends’ archived video resource explores ways to continue the momentum of teen pregnancy prevention work. This discussion around teen pregnancy prevention research and policy took place during the 2015 Kristin Anderson Moore Lecture. To view this resource, [click here](#).

Reduced Disparities Birth Rates

The CDC recently released a *MMWR* entitled “Reduced Disparities in Birth Rates Among Teens Aged 15-19 Years—United States, 2006-2007, and 2013-2014.” The report highlights that teen birth rates have fallen nearly 50 percent among Hispanic and black teens, dropping the national teen birth rate to an all-time low. To view the resource, [click here](#).

AMCHP CAREER CENTER

The Career Center is the premiere online job board for individuals seeking employment in MCH 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!



Maternal and Child Health Measurement Research Network

Deadline: *May 27, 2016*

The purpose of this funding opportunity from the U.S. Health Resources and Services Administration is to support a forum that will create a national agenda for health measurement research by producing an evolving compendium of available high, quality measures of maternal and child health, and by identifying gaps in existing measures for future development purposes. The goals are to establish a research network composed of interdisciplinary experts who represent the MCH lifespan and who are active in the measurements of health and well-being among MCH populations; to formulate a national research agenda with regard to existing and needed health measurements for MCH populations with high relevance to Maternal and Child Health Bureau programs; to collaborate in the development, validation, and implementation of new MCH health measures that address identified gaps, using external and private funding sources; and to translate and apply network findings into a variety of practices, policies, and processes. For more information, [click here](#).

Newborn Screening Implementation Program Regarding Conditions Added to the Recommended Uniform Screening Panel

Deadline: *May 27, 2016*

The goal of this funding opportunity from the U.S. Health Resources and Services Administration is to increase the number of newborns receiving early treatment for Pompe disease, Mucopolysaccharidosis I (MPS I) and X-linked Adrenoleukodystrophy (X-ALD) by: fostering the integration of and building capacity for newborn screening for these conditions; increasing the number of NBS laboratory scientists and short-term follow-up personnel with knowledge and skill in conducting newborn screening and short-term follow-up for Pompe disease, MPS 1, and X-ALD; providing training, education, and sharing of information via a national meeting for the public health community; supporting primary health care providers through education and resources, with special attention to cases with later onset of symptoms; and engaging families in the development and dissemination of educational materials and support mechanisms that are culturally sensitive and family-centric for families who have an infant identified through NBS. For more information, [click here](#).

Preventing Teen Dating and Youth Violence by Addressing Shared Risk and Protective Factors

Deadline: *June 6, 2016*

The purpose of this funding opportunity from the U.S. Health Resources and Services Administration is to assist in funding local health departments in communities with demonstrated high rates of violence to implement the best available strategies to prevent youth violence and teen dating violence. As a result of the program, communities will decrease the burden of youth violence and teen dating violence, and address shared risk and protective factors for multiple forms of violence. For more information, [click here](#).

Resiliency in Communities After Trauma and Stress

Deadline: *June 7, 2016*

The U.S. Substance Abuse and Mental Health Services Administration's Center for Mental Health Services is accepting applications for fiscal year 2016 Resiliency in Communities After Trauma and Stress (ReCAST Program) grants. This program is designed to assist high-risk youth and families and to promote resilience and equity in communities that have recently faced civil unrest, through implementation of evidence-based, violence prevention and community youth engagement programs, as well as links to trauma-informed behavioral health services. The goal of the ReCAST program is for local community entities to work together in ways that lead to improved behavioral health, empowered community residents, reductions in trauma and sustained community change. For more information, [click here](#).

Ryan White HIV/AIDS Program Building Care and Prevention Capacity: Addressing the HIV Care Continuum in Southern Metropolitan Areas

Deadline: *June 12, 2016*

The Health and Human Resources Administration solicits applications for fiscal year (FY) 2016 to support a single organization that will serve as the Coordination and Technical Assistance Center (CTAC) for a new Secretary's Minority AIDS Initiative Fund (SMAIF) program entitled Ryan White HIV/AIDS Program (RWHAP) Building Care and Prevention Capacity: Addressing the HIV Care Continuum in Southern Metropolitan Areas. The purpose of this program is to implement innovative models of ser-

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of service delivery that result in improvements in RWHAP Part A jurisdictions' HIV care continuum for minority populations. The CTAC will provide technical assistance (TA) and service delivery funding to one sub-recipient in each of four different RWHAP Part A jurisdictions located in the southern United States. For more information, [click here](#).

Public Health Preparedness and Response (PHPR) Cooperative Agreement for All-Hazards Public Health Emergencies: Zika 2016

Deadline: *June 13, 2016*

This funding opportunity announcement outlines CDC guidance, technical, and financial assistance in response to a potential outbreak of Zika virus disease (ZVD) in the continental United States, Hawaii, and U.S. territories and freely associated states. CDC is providing \$25 million in funding to 53 state, territorial, and local health departments based on current Zika virus transmission at the time of this announcement, jurisdictions likely to become affected, and evidence of historical arboviral patterns, to support accelerated public health preparedness planning and operational readiness for responding to Zika. The funding is intended to address planning and operational response gaps for ZVD and to assure state, local, and territorial operational readiness for ZVD. For more information, [click here](#).

New Access Points

Deadline: *June 17, 2016*

The U.S. Health Resources and Services Administration is soliciting applications for New Access Points (NAP) grants under the Health Center Program. The purpose of the Health Center Program grant is to support NAPs for the delivery of comprehensive primary health care services to underserved and vulnerable populations. NAPs will increase access to comprehensive, culturally competent, high-quality primary health care services and improve the health status of underserved and vulnerable populations. Health Center Program grants support a variety of community-based and patient-directed public and private nonprofit organizations that serve an increasing number of the nation's underserved. For more information, [click here](#).

Enhanced State Surveillance of Opioid-Involved Morbidity and Mortality

Deadline: *June 27, 2016*

This funding opportunity is intended to equip states to improve the timeliness of surveillance of opioid-involved morbidity and mortality. The Centers for Disease Control and Prevention's Injury Center intends to support up to 11 state health departments over a three-year project period, with an average award amount \$335,000 each year. A desired outcome of the enhanced surveillance is to provide key stakeholders with more timely data on fatal and nonfatal opioid overdose and more detailed information on risk factors, which can inform prevention and response efforts. Improved quality and timeliness of surveillance data will support and inform ongoing activities to prevent and address prescription drug misuse, abuse and overdose, funded through CDC's existing state programs. For additional information, [click here](#).

Personal Responsibility Education Program Innovative Strategies

Deadline: *June 27, 2016*

The Youth Services Bureau of the U.S. Administration for Children and Families will accept applications from local organizations and entities to develop, implement and test innovative adolescent pregnancy prevention strategies for the Personal Responsibility Education Program Innovative Strategies. This program provides services to high-risk, vulnerable and culturally underrepresented youth populations. This includes youth in foster care, homeless youth, youth with HIV/AIDS, pregnant and parenting women who are under 21 years of age and their partners, youth who have been trafficked and youth residing in high teen birth rate areas. Projects are required to implement at least three of six adulthood preparation subjects: healthy relationships, adolescent development, financial literacy, parent-child communication, educational and career success, and healthy life skills. For more information, [click here](#).

Dissemination and Implementation of Child Health Quality Measures Cooperative Research Grants

Deadline: *June 28, 2016*

The U.S. Department of Health and Human Services and the Agency for Healthcare Research and Quality invite cooperative agreement applications to support the dissemination and implementation of a subset of new child health quality measures developed by the Pediatric

FUNDING CONT.

Quality Measures Program-Centers of Excellence in key pediatric measurement and quality improvement (QI) gap areas through the work of multi-disciplinary partnership teams. These teams include pediatric measure developers, QI and systems experts, state Medicaid/Children's Health insurance Programs, health plans, provider level organizations and key stakeholders. For more information, [click here](#).

NIH Initiative to Maximize Research Education in Genomics Diversity Action Plan

Deadline: *Sept. 6, 2016*

NIH presents this funding opportunity to facilitate the training of individuals at all career levels (undergraduate, graduate, post baccalaureate, postdoctoral and faculty) from diverse backgrounds underrepresented in scientific disciplines relevant to genomics to enable them to pursue genomics research that spans all areas of interest to National Human Genome Research Institute later in their careers. To learn more, [click here](#).

Improving the Coordination and Documentation of Enrollment into Early Intervention for Deaf and Hard of Hearing Children through Parent Engagement

Deadline: *Sept. 30, 2016*

The Disability Research and Dissemination Center is presenting a funding opportunity to help increase parental/public awareness about the importance and benefits of signing a release to share early intervention information (information release) with the state EHDI programs, as well as engaging and supporting families in the intervention process. For more information, [click here](#).

Using Existing Early Intervention Data to Assess Outcomes among Deaf and Hard of Hearing Children

Deadline: *Sept. 30, 2016*

The Disability Research and Dissemination Center is presenting a funding opportunity to assess the outcomes of deaf or hard of hearing (DHH) children identified through state early intervention (EDHI) programs by using existing intervention and educational data sets. For more information, [click here](#).

Exploratory and Developmental Grant to Improve Health Care Quality through HIT

Deadline: *Nov. 16, 2016*

The purpose of this grant is to fund exploratory and developmental research grants that will contribute to the evidence base of how health information technology (HIT) improves health care quality. This funding opportunity supports the use of a wide variety of research designs in order to generate information regarding the design and development, implementation, use, or impact of health IT on quality. For more information, [click here](#)

Reducing Health Disparities among Minority and Underserved Children

Deadline: *Jan. 7, 2017*

This initiative encourages research that targets the reduction of health disparities among children. Specific targeted areas of research include bio behavioral studies that incorporate multiple factors that influence child health disparities such as biological (e.g., genetics, cellular, organ systems), lifestyle, environmental (e.g., physical and family environments) social (e.g., peers), economic, institutional, and cultural and family influences; studies that target the specific health promotion needs of children with a known health condition and/or disability; and studies that test and evaluate the comparative effectiveness of health promotion interventions conducted in traditional and nontraditional settings. For more information, [click here](#) (R01) or [here](#) (R21).

Chronic Illness Self-Management in Children and Adolescents

Deadline: *Jan. 7, 2017*

The purpose of this announcement is to encourage research to improve self-management and quality of life in children and adolescents with chronic conditions. Managing a chronic condition is an unremitting responsibility for children and their families. Children with a chronic condition and their families have a long-term responsibility for self-management. For more information, [click here](#) (R01) or [here](#) (R21).

FUNDING CONT.

Understanding Factors in Infancy and Early Childhood That Influence Obesity Development

Deadline: *Feb. 5, 2017*

This funding announcement invites Research Project Grant (R01) applications from institutions/organizations which propose to characterize or identify factors in early childhood (birth-24 months) that may increase or mitigate risk for obesity and/or excessive weight gain and/or to fill methodological research gaps relevant to the understanding of risk for development of obesity in children. For more information, [click here](#).

Maternal Nutrition and Pre-pregnancy Obesity: Effects on Mothers, Infants and Children

Deadline: *Varies*

This announcement encourages applications to improve health outcomes for women, infants and children, by stimulating interdisciplinary research focused on maternal nutrition and pre-pregnancy obesity. Maternal health significantly impacts not only the mother but also the intrauterine environment, and subsequently fetal development and the health of the newborn. For more information, [click here](#).



CALENDAR

MCH Events

[Building a Healthier Future 2016 Summit](#)

May 18-20, 2016
Washington, DC

[AWHONN 2016 Convention](#)

Jun. 11-15, 2016
Grapevine, TX

[CSTE Annual Conference](#)

Jun. 19-23, 2016
Anchorage, AK

[NACCHO Annual Conference](#)

Jul. 19-21, 2016
Phoenix, AZ

CALENDAR CONT.

[ROSE 5th Annual Breastfeeding Summit](#)

Jul. 28-29, 2016
New Orleans, LA

[Public Health Informatics Conference](#)

Aug. 21-24, 2016
Atlanta, GA

[20th National Conference on Child Abuse and Neglect](#)

Aug. 31-Sept. 2, 2016
Washington, DC

[CityMatCH Leadership and MCH Epidemiology Conference](#)

Sept. 14-16, 2016
Philadelphia, PA

[Congenital Cytomegalovirus Public Health and Policy Conference](#)

Sept. 25-27, 2016
Austin, TX

[Society for Longitudinal and Life Course Studies 2016 Conference](#)

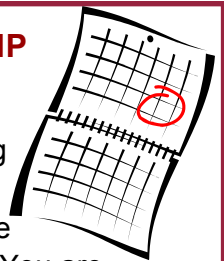
Oct. 5-8, 2016
Bamberg, Germany

[AUCD Conference](#)

Dec. 4-7, 2016
Washington, DC

List Your Event on the AMCHP MCH Events Calendar

Do you want to include your listing on the AMCHP MCH Events Calendar? It's easy! Just complete our easy [online submission form](#). You are welcome to submit MCH conferences, webinars, trainings, webcasts and meetings. Thanks for helping us to build our MCH Events Calendar! If you have any questions, please contact [Karissa Charles](#), Communications and Membership Associate. Please note: All event listings are subject to AMCHP approval.



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