MCH TA Webinar
Child and Adolescent Health
Life Course

For Assistance:
Please contact Jessica Teel at Jteel@amchp.org
Overview of Technology

Mute your line by using the mute function on your phone or by using *6 to mute/un-mute

Asking a Question

You can type your questions into the chat box (shown right)

Raise your hand. Using the icon at the top of your screen (example shown right)

Active Participation = 😊

For technical problems, please contact Jessica Teel at Jteel@amchp.org

June 2, 2015
Overview of Technology

Downloading Files

1. Files
2. Name
   Participant Homework.docx
   1019 KB
3. Click to Download
4. Save to My Computer
   Participant Homework...
Overview of Technology

• Today’s webinar will be recorded

• The recording will be available on the AMCHP website at

http://www.amchp.org/AboutTitleV/Resources/Pages/State-Action-Plan.aspx

• Please complete the survey to be shared and emailed at the conclusion of the webinar
Poll

• What are your vacation plans for this summer?
  – Staycation
  – North
  – Midwest
  – South
  – West
  – Overseas
Objectives

• Share TA resources to support states’/jurisdictions’ action planning
• Facilitate peer-to-peer learning about approaches being taken in response to the transformed MCH Services Block Grant guidance
• Identify and help to solve challenges states/jurisdictions face as they complete their action planning
Poll

• Which of the new narrative features do you feel has most helped you to tell your Title V story?
  – Executive Summary
  – Needs Assessment Summary
  – State Action Plan by Population Domain
  – Other
Agenda

• Introductions and Overview
  • MCHB Resources
    – Michele Lawler, Acting Director, Division of State & Community Health
    – Elizabeth “Beth” Edgerton, MD, MPH, Director, Division of Child and Adolescent Health
    – Carlos Cano, MD, MPM, Division of Home Visiting and Early Childhood Services
    – Sylvia Sosa, MSc, Office of Policy and Coordination
    – Lauren Raskin Ramos, MPH, Acting Director, Division of MCH Workforce Development
  • Strengthen the Evidence-Based Project Activities
    – Cynthia Minkovitz, MD, MPP, Johns Hopkins University
  • Examples of DRAFT Preliminary State Action Plan Table
    – Marcus Johnson-Miller, Director, Title V, Iowa Department of Public Health
  • Open Discussion and Q&A
Maternal and Child Health
Town Hall

*Transforming the Title V Block Grant*
*Child and Adolescent Health Through the Life Course*

Michele Lawler, Acting Director
Division of State and Community Health
Maternal & Child Health Bureau
Health Resources & Services Administration
U.S. Department of Health & Human Services

MLawler@hrsa.gov
• **Purpose** – support States in their action planning for the fiscal year (FY) 2016 Title V MCH Services Block Grant Application/FY 2014 Annual Report

• **3 Webinars**

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<thead>
<tr>
<th>DATE</th>
<th>TIME</th>
<th>DOMAIN</th>
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</thead>
<tbody>
<tr>
<td>Tuesday, May 19</td>
<td>3:00 – 4:30 pm ET</td>
<td>CYSHCN and Family/Consumer Partnerships*</td>
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<tr>
<td>Tuesday, May 26</td>
<td>3:00 – 4:30 pm ET</td>
<td>Women’s/Maternal and Perinatal/Infant Health</td>
</tr>
<tr>
<td>Tuesday, June 2</td>
<td>3:00 – 4:30 pm ET</td>
<td>Child and Adolescent Health</td>
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Population Health
Child & Adolescent Health
Health Through the Life Course

Presenters:
Elizabeth “Beth” Edgerton, MD, MPH: Director, Division of Child and Adolescent Health
Carlos Cano, MD, MPM: Division of Home Visiting and Early Childhood Services
Sylvia Sosa, MSc: Office of Policy and Coordination
Lauren Raskin Ramos, MPH: Acting Director, Division of MCH Workforce Development

Maternal and Child Health Bureau
• **6: Developmental screening**
  – (percentage of children, ages 9 through 71 months, receiving a developmental screening using a parent-completed screening tool)

• **7: Child injury**
  – (rate of injury-related hospital admissions per population aged 0-19)

• **8: Physical activity**
  – (percent of children ages 6-11 and adolescents age 12-17 who are physically active at least 60 mins/day)

• **9: Bullying**
  – (percent of adolescents, 12-17, who are bullied)

• **10: Adolescent well-visit**
  – (percent of adolescents with a preventive services visit in the last year)
National Performance Measures: Child & Adolescent Health

- **13: Oral health**
  - A. Percent of women who had a dental visit during pregnancy and
  - B. percent of infants and children, ages 1 to 17 years, who had a preventive dental visit in the last year

- **14: Smoking during pregnancy and household smoking**
  - A. Percent of women who smoke during pregnancy and
  - B. percent of children who live in households where someone smokes

- **15: Adequate insurance coverage**
  - (percent of children 0-17 who are adequately insured)
NPM: Percent of children receiving a developmental screening using a parent-completed screening tool

- HV CoIIN: Time-limited learning activity with 36 teams from local home visiting agencies across 10 states, two tribal entities, and one non-profit grantee. Based on breakthrough series collaborative model
- Cooperative agreement between MCHB and the Education Development Center (EDC)
- Topics for improvement include promotion of child development, early detection and linkage to services

Process and Outcome Aims

- Example: Increase by 25% from baseline the % of children with developmental or behavioral concerns receiving identified services in a timely manner

Key activities:

- First national HV improvement collaborative utilizing rapid tests of change (Plan-Do-Study-Act cycles) to adapt evidence-based practices recommended by the faculty to the local context
- The collaborative tracks progress using a set of indicators per topic (e.g., children screened, surveillance by home visitor of child’s development, behavior or learning)
- Each agency reports data on measures monthly as they test and adapt changes
- After 7 months home visitors are asking families about concerns with their child’s development, allowing for early detection and implementation of support services at more than 80% of the visits

Contact information:

- EDC: Mary Mackrain, HV CoIIN Project Director, mmackrain@edc.org
- MCHB: Carlos Cano, Project Officer, ccano@hrsa.gov
Bright Futures

https://brightfutures.aap.org/Pages/default.aspx

• Bright Futures Guidelines and NPM

• Community and Relationships and Resources
• National EMSC Data Analysis Resource Center
  – All-Things-Data
  – State EMS Reassessment
  – PedsReady Assessment
  – www.nedarc.org

• EMSC National Resource Center
  – Guidance on available tools and resources
  – Resource development
  – Product dissemination
  – Educational resources and web-based training
  – www.emscnrc.org
National Action Partnership to Promote Safe Sleep

- **Domains:** Perinatal/Infant Health
- **National Performance Measure #5:** Safe sleep
  - **Goal:** Increase the adoption of safe infant sleep behaviors among infant caregivers through the integration of effective programs and policies within service delivery systems that intersect with families.
  - **Key activities:**
    1. Identify and convene multi-disciplinary stakeholders to form a national coalition
    2. Facilitate the coalition’s development of a strategic plan to unify and augment the safe sleep message across systems that reach infant caregivers based on evidence-based recommendations
    3. Leverage partnerships to advance the recommended organizational policies and practices outlined in the strategic plan, including the tracking of systems changes at the national, state, and local levels.
    4. Coordinate the development of resources such as training modules, model policy templates or health promotion materials, to facilitate the attainment of goals related to safe infant sleep promotion at the national, state, and local levels.

- **Contact information:** Georgetown University NAPPSS Team at mchgroup@georgetown.edu
- **URL:** www.nappss.org
• Domains: Child Health, Adolescent Health, Women/ Maternal Health, Perinatal/ Infant Health
  – National Performance Measures: Safe sleep, child injury, bullying, and others relevant to older adolescents such as perinatal regionalization, breastfeeding, well-woman visit
  – Outcome Measures: Infant mortality, child mortality, adolescent mortality, maternal mortality, low birth weight, preterm birth rate, maternal morbidity, and others
• Goal: Improve and strengthen state and local capacity to perform complete and accurate fetal, infant and child death reviews in order to prevent future deaths of children
• Key activities:
  1. Expand and support standardized data collection and data quality improvement.
  2. Provide leadership, training, and technical support to the FIMR and CDR programs.
  3. Develop a centralized national network to coordinate and disseminate information and findings related to FIMR and CDR.
  4. Facilitate the translation of recommendations from CDR and FIMR programs into action and practice.

• Contact information: National Center for Fetal, Infant and Child Death Review
  info@childdeathreview.org

• URLS: https://www.childdeathreview.org and www.nfimr.org
Children’s Safety Network Program

- **Domains: Child Health/ Adolescent Health**
- **National Performance Measures: Safe sleep, bullying, injury-related hospitalizations**
  - Goal: reduce fatal and serious injuries among infants, children and youth by 100,000 over the next three (3) years by increasing the adoption of effective child safety interventions at the national, state and local levels.
  - **Key activities:**
    - **Three Components of Activity**
      - National Coordinated Child Safety Initiative
      - Child Safety Collaborative Innovation and Improvement Network (COIIN)
      - Child Safety Promotion Capacity Building

- **Contact information:** Education Development Center, Inc. Team at csninfo@edc.org
- **URL:** [http://www.childrenssafetynetwork.org/](http://www.childrenssafetynetwork.org/)
Nutrition and Physical Activity

• Domains: Child and Adolescent Health

• MCH Nutrition Training Program
  – 6 Centers of Excellence in MCH Nutrition focused on promoting the healthy nutrition of the mother, child and family
  – Support Title V agencies in public health, pediatric and maternal nutrition

• Pediatric Obesity Mini CoIIN
  – Focus on policies and practices in early care and education settings that support healthy weight behaviors
  – 4 states (AR, LA, OH, WI)

Contact Information:
http://www.mchb.hrsa.gov/training
Meredith Morrissette – mmorrissette@hrsa.gov
HRSA’s Bullying Prevention Initiative

- **Domains:** Adolescent Health
- **National Performance Measures:** Safe sleep, bullying, injury-related hospitalizations
  - **Goal:** Increase the adoption of best practices in bullying prevention and response in state and local communities across the country.
  - **Activities**
    - Train community leaders on (a) research about bullying and best practices in prevention and (b) tactics for further educating and activating community stakeholders to improve policies and practices.
    - Increase the reach and resonance of high quality bullying prevention content and resources.
    - Ensure quality of federal Bullying Prevention products and services
    - Provide support to state MCH programs taking an active role in bullying prevention.

- **Contact information:** HRSA’s Bullying Prevention Initiative: bullyingtraining@hrsa.gov
- **URL:** [http://www.stopbullying.gov/training](http://www.stopbullying.gov/training)
HRSA’s
Bullying Prevention Initiative

StopBullying.gov Training Center
• Training module
• “Misdirections” video
• Community action toolkit
• User guides
• Infographic
• Feedback forms
• **Goal:** Promote adolescent and young adult health by strengthening the abilities of State Title V MCH Programs, and their public health and clinical partners, to better serve these populations (ages 10-25).

• **Activities:**
  – Uses 5 goal areas to frame its efforts: Access, quality improvement, service integration, equity of outcomes, and performance accountability to the transformed MCH Block Grant.
  – Facilitates the Adolescent and Young Adult Health Collaborative Improvement and Innovation Network (CoIIN) for 2 sets of State MCH programs and national experts to identify and implement evidence-based (EB) strategies for increasing AYA access to preventive health care and improving the quality of services.
  – Supports State MCH programs adopting the adolescent well-visit National Performance Measure.
  – Provides intensive support for integrating health care delivery for AYAs with other community systems.
  – Identifies and disseminates up-to-date EB practices relevant to AYA health care.
  – Supports implementation of EB practices through training and technical assistance.

• **URL:** [http://nahic.ucsf.edu/resources/resource_center](http://nahic.ucsf.edu/resources/resource_center)
Purpose

• The resource center supports health professionals working in states and communities with the goal of improving oral health for infants, children, adolescents, pregnant women, and their families. The resource center gathers, develops, and shares high-quality and valued information and materials.

Activities

• Maintains a digital library of materials such as standards, guidelines, curricula, teaching guides, manuals, policies, and reports.
• Hosts website that offers access to the digital library, access to resource center-produced materials, and descriptions of MCHB-funded oral health projects.
• Responds to information requests on topics such as early childhood caries, dental sealants, fluoride varnish, and oral health care during pregnancy.
• Produces materials such as fact sheets, tip sheets, briefs, resource guides, manuals, conference proceedings, and curricula.
• Administers e-mail lists to facilitate information sharing.

Strategies and Tools

http://www.mchoralhealth.org
The Catalyst Center: National Center for Health Insurance and Financing for Children and Youth with Special Health Care Needs

Purpose:

- To collaborate with national, state and community stakeholders to develop and spread innovative strategies and policies to facilitate access to health insurance and other financing to pay for needed health and health-related services for children and youth with special health care needs (CYSHCN).

- Website: [http://www.hdwg.org/catalyst/](http://www.hdwg.org/catalyst/)

- MCHB PO: LT Leticia Manning [LManning@hrsa.gov](mailto:LManning@hrsa.gov)

- Center PI: Meg Comeau [MComeau@bu.edu](mailto:MComeau@bu.edu)
Purpose: To expand access to care for the maternal and child health populations through the following program focus areas:

(1) Ensuring continuity of coverage and care for pregnant women and children;
(2) improving systems of care for children with special health care needs; and
(3) promoting the use of Bright Futures Guidelines for all children.

A few key activities:
– Raise awareness about insurance coverage options available for MCH populations; Support the implementation of evidence-based strategies and best practices; Identify, document and disseminate best practices; Promote state-level, cross-agency, public-private partnerships and collaboration among health care and public health leaders; Educate public and private health leaders, including decision makers, agency staff, organizational leadership, academic leaders, and others, about best practices; Demonstrate success in improving health systems for MCH populations in the focus areas.

Grantees: AMCHP, AAP, ASTHO, NGA, NASHP, NCSL, Altarum
MCHB Training Programs

- Leadership Education in Neurodevelopmental and Related Disabilities (LEND) programs
- Developmental Behavioral Pediatrics (DBP) Program
- Leadership Education in Adolescent Health (LEAH)
- Centers of Excellence in MCH Education, Science and Practice (Schools of Public Health)
- MCH Workforce Development Center

http://www.mchb.hrsa.gov/training
STRENGTHEN THE EVIDENCE BASE FOR MCH PROGRAMS

Cynthia Minkovitz, MD, MPP
Spring 2015

A collaborative activity of the Women’s and Children’s Health Policy Center at Johns Hopkins University, the Health Resources and Services Administration, Welch Medical Library at Johns Hopkins University, and the Association of Maternal and Child Health Programs.

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U02MC28257, MCH Advanced Education Policy, $1.65 M. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.
Goal

- To provide support and resources to assist State Title V Maternal and Child Health (MCH) programs in developing evidence-based or evidence-informed State Action Plans and in responding to the National Outcomes Measures, National Performance Measures, State Performance Measures and state-initiated Structural/Process Measures.
6 Objectives

1) Convene a Team of Experts with specialty background and experience related to the performance measures

2) Provide reports including a critical review of the evidence of effectiveness of possible strategies to address National Outcome Measures, National Performance Measures, State Performance Measures and state-initiated Structural/Process Measures via the Team of Experts

3) Provide ongoing consultation to State Title V MCH programs through the Team of Experts to support the State’s development of evidence-based or evidence-informed State Action Plans

4) Develop web-based supports and resources for State Title V programs

5) Establish an online platform for sharing best practices via a “Community of Practice” and to facilitate communication and information sharing on topics about the emerging needs of Title V state and discretionary grantees for implementing the Title V MCH Block Grant Transformation Process

6) Maintain and enhance an MCH digital library including the historical collection
Organization

HRSA

Women’s and Children’s Health Policy Center

Welch Medical Library

Consortium of 21 Maternal and Child Health Research Experts

Association of Maternal and Child Health Programs

Title V State and Discretionary Grantees

Exercise

Title II State and Discretionary Grantees

Welch Medical Library

Consortium of 21 Maternal and Child Health Research Experts

Association of Maternal and Child Health Programs
Key Players

• **Management Team**
  - Women’s and Children’s Health Policy Center (WCHPC): Cynthia Minkovitz (PI), Donna Strobino, and Holly Grason
  - Association of Maternal and Child Health Programs: Lacy Fehrenbach
  - Welch Medical Library: Claire Twose.

• **Team of Experts**
  - 6 WCHPC Core Faculty (Michele Decker, Pam Donohue, Holly Grason, Cynthia Minkovitz, Donna Strobino, Peter van Dyck)
  - 8 Other Hopkins Faculty (Christina Bethell, Robert Blum, Tina Cheng, Joanna Cohen, Andrea Gielen, Susan Gross, Phil Leaf, Keshia Pollack)
  - 7 Faculty from other Universities (Burton Edelstein, Arden Handler, Colleen Huebner, Marie McCormick, Cheri Pies, William Sappenfield, Judith Shaw)
TA Related to Performance Measures and State Strategies

• “No wrong door” approach
• Complement ongoing HRSA investments and expertise among discretionary grantees
• *Strengthen the Evidence* team focused on TA related to evidence to inform strategies to achieve progress on state identified priorities
  - Varying levels of TA intensity
  - Recognize continuum of available evidence
  - Individual vs. groupings of states depending on needs
  - Sample activities-- In depth evidence reviews, connect states with expert MCH consultants, work collaboratively to provide communities of practice
Comments or questions?

Please contact Cynthia Minkovitz, cmink@jhu.edu

THANK YOU!!!
SPHARC is a comprehensive web-based resource center intended to provide ongoing technical assistance and facilitate cross-state learning to increase the capacity of states, particularly Title V programs, in developing and implementing systems of care for children and youth with autism spectrum disorders and other developmental disabilities (ASD/DD) through resource development, technical assistance, and peer learning. SPHARC is designed to establish an ongoing peer-to-peer network, and exchange of resources and information.

State Autism Planning & Implementation Grantees
September 2014
Poll

• Among the 6 population domains, for which has it been most difficult to engage stakeholders with subject matter expertise?
  – Women’s/Maternal Health
  – Perinatal/Infant Health
  – Child Health
  – Adolescent Health
  – CYSHCN
  – Life Course/ Cross Cutting
State Example: Iowa

Marcus Johnson-Miller
Iowa Department of Public Health
Open Discussion/Q&A
Thank You!