Rhode Island

Maternal and Child Health Block Grant 2015

The Maternal and Child Health Services Block Grant, Title V of the Social Security Act, is the only federal program devoted to improving the health of all women, children and families. Title V provides funding to state maternal and child health (MCH) programs, which serve 42 million women and children in the U.S. To learn more about Title V, visit www.amchp.org.

MCH Block Grant Funds to Rhode Island

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<th>FY 2013</th>
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<td>$1,554,264</td>
<td>$1,555,974</td>
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Title V Administrative Agency:
Division of Community Family Health & Equity, Rhode Island Department of Health

*States must provide a three dollar match for every four Federal dollars allocated.

Protecting and Improving the Health of Rhode Island’s Families

Screening to Succeed: The Screening to Succeed program helps primary care practices, who see children between the ages of 0 and 3 years, implement a system of electronic, standardized developmental screening at the required ages of 9, 18, and 30 months. Participating practices receive one year subscriptions to use an electronic screening system and tablets for the patients to complete electronic screens in the office. In addition, practices receive both technical assistance and incentives aimed at increasing developmental screening rates. The Screening to Succeed program also offers staff support to refer and link patients and families to appropriate covered services that are available and accessible.

Newborn Screening - The MCH program provides universal screening and follow-up for 30 conditions, including hearing loss and an assessment for developmental risk. All infants are screened because babies with these serious disorders often appear healthy at birth. Early detection, diagnosis, and intervention can prevent death or disability and enable children to reach their full potential. Ensuring screening and follow is a high priority for the Newborn Screening Program.

Peer Resource Specialists – Rhode Island has pioneered the use of parents, peers, and youth in developing programs, policies, and quality improvement initiatives. There are more than 250 current and former Peer Specialists, who were recruited from MCH and CYSHCN programs, trained and supported to improve outreach, quality, and performance of our programs and the entire system of care in RI.

Positive Youth Development – The OSHCN coordinates positive leadership development initiatives for youth with special needs throughout the state. Initiatives are designed to provide opportunities for youth to develop leadership, gain self-determination skills, participate in vocational and employment experiences, and then practice acquired skills at a peer to peer Dare to Dream Conference.

Home Visiting — This program provides developmental screening, home assessments, connection to community services, and help with child development for about one third of all families with new babies each year and implements evidence-based services through the Federal Maternal, Infant and Early Childhood Home Visiting Program. The program provides nurses, social workers and trained family visitors to help expectant mothers and serve as the follow-up staff for newborn screening, early intervention, lead poisoning and immunization programs.

HEALTH Information Line — The MCH program supports a statewide toll-free telephone resource for all families in Rhode Island. Bilingual information specialists answer families’ questions on a wide variety of topics and refer them to appropriate community resources. The program also distributes culturally and linguistically appropriate consumer materials.

Infant Mortality - In April 2014, Rhode Island was selected to participate in the Infant Mortality Collaborative Improvement and Innovation Network (CoIIN). The initiative is a state-driven multi-sectorial collaboration to reduce infant mortality and disparities in birth outcomes.
by using the process of quality improvement, collaborative learning, and innovations to share and implement effective evidence-based approaches. RI has assembled a state team which includes key leaders, community based organizations, and providers who have committed to and have shared responsibility to assess data and develop strategies to reduce the state’s infant mortality rate. The goal of this effort is to “Give all RI babies an equal opportunity to develop into healthy productive adults by ensuring an equal healthy start.”

**Neonatal Abstinence Syndrome (NAS)** - With the increase in drug overdose deaths, the Governor has convened the Task Force on Drug Overdose, which includes the creation of the NAS Task Force. The NAS Task Force which seeks to reduce the number of Rhode Island babies that are born exposed to substances and to improve a coordinated system for early identification and support of impacted mothers, children and families. The NAS Task Force will report findings to the Governor’s Task Force on Drug Overdose, make recommendations for action and request resources, policy changes and guidance.

**MCH Workforce Development** - Rhode Island is working with the National MCH Workforce Development Center on a peer support workforce initiative. The goal of this initiative is to support RI’s growing peer support workforce through the development of core competencies, a standardized curriculum, certification process, and establishing pathways to reimbursement for provision of services. There has been a significant movement in the state of Rhode Island for the inclusion of peer supported services throughout the healthcare delivery system. Partners include RI’s various state agencies and community partners.

**People Served by the Rhode Island MCH Program**

Title V population-based preventive and systems building services benefit all women and children in the state. In addition, the MCH Block Grant provided direct services to the following individuals:

- 8,250 pregnant women
- 11,507 infants under one
- 34,676 children and adolescents
- 13,997 children with special health care needs
- 15,968 others
- 84,398 total served

*2013 State/Jurisdiction Annual Reports Submitted to the Maternal and Child Health Bureau

**Health Needs in Rhode Island**

- Increase the percentage of adolescents who have a preventive “well care” visit each year.
- Reduce tobacco initiation among middle school students.
- Increase the social and emotional health of children and youth with special health care needs.
- Increase the percentage of women who have a preventive care visit in the last year.
- Initiate prenatal home visiting program.
- Expand capacity and access to parent education and family support programs.
- Promote use of evidence based programs to support parents and families.
- Adopt the social determinants of health into public health practice.

**For more information, contact:**

**Maternal & Child Health**

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**Children with Special Health Care Needs**

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**Grants to Rhode Island**

**STATE SYSTEMS DEVELOPMENT INITIATIVE (SSDI)**

HEALTH, RHODE ISLAND DEPARTMENT OF

Providence, RI

$100,000

(State Systems Development Initiative)

**Developmental-Behavioral Pediatrics Training Program**

RHODE ISLAND HOSPITAL

PROVIDENCE, RI

$177,163

(Developmental-Behavioral Pediatrics Training Program)

*These grants were awarded in FY 2013. For a complete list of Title V Grantees: https://mchdata.hrsa.gov/tvisreports/Snapshot/SnapShotMenu.aspx