Rhode Island

Maternal and Child Health Block Grant 2019

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. In FY2017, 86% of all pregnant women, 99% of infants, and 55% of children nationwide benefitted from a Title V-supported service. To learn more about Title V, visit www.amchp.org.

| MCH Block Grant Funds to Rhode Island |
|------------------|------------------|------------------|
| FY 2016          | FY 2017          | FY 2018          |
| $1,636,953       | $1,624,486       | $1,647,805       |

Title V Administrative Agency:
Health Equity Institute, 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

The Rhode Island Department of Health (RIDOH) Health Equity Institute uses Title V Funds to achieve state and national maternal health priorities utilizing the following framework: 1) Address the social determinants of health; 2) Eliminate health disparities and promote health equity; and 3) Ensure access to quality health care for all, especially vulnerable populations. This work is accomplished through close collaboration with many RIDOH programs, community partners, and a wide array of stakeholders. Notable partnerships or initiatives include:

Health Equity Zones (HEZ) – RI Health Equity Zone initiative is an innovative, place-based approach that brings communities together to build the infrastructure needed to achieve healthy, systemic changes at the local level. Through a collaborative, community led process, each HEZ conducts a needs assessment and implements a data-driven plan of action to address the unique social, economic, and environmental factors that prevent people from being as healthy as possible.

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-up is a high priority for the Newborn Screening Program.

KIDSNET – KIDSNET is a population-based, integrated child health information system that facilitates the collection and appropriate sharing of preventive health services data for the provision of timely and appropriate follow-up. The integrated nature of the system supports policy and program data needs for MCH programs that extends beyond what can be provided by individual databases. KIDSNET links data from thirteen different programs (newborn bloodspot, hearing and developmental screening, vital records, home visiting, Head Start, Cedar, immunization, lead screening, WIC, Asthma, Child Outreach, and Early Intervention) as well as having indirect connections with birth defects and foster care data. Medical homes, child health programs, Early Intervention, specialty care providers, Head Start, School Nurse Teachers, home visitors, and other authorized users can access information necessary for case management and tracking of children with who are missing or need follow-up from various preventive health services such as newborn screening, lead screening, and immunization.

Family Home Visiting — Family Home Visiting is a voluntary, home-based service delivered during pregnancy and through the early years of a child’s life. RI offers the short term First Connections program and, with support from the Federal MIECHV program, three long-term evidence-based programs delivered by local, community-based agencies across the state. The programs provide developmental screening, assessments, connection to community services, and help with child development. Program staff, including nurses, social workers and trained family visitors support the complementary efforts of the newborn screening, early intervention, lead poisoning and immunization programs.

Oral Health – the Oral Health Program has a mission of optimal oral health for all Rhode Islanders no matter the zip code, and this starts with promoting good oral health during pregnancy and encouraging the age one dental visit to get children on the right path for great oral health throughout their lifetime. To ensure that children continue to have access to preventive dental care, a school-based sealant program is funded in schools that have 50% or more of their students on Free or Reduced School Meals.
Infant Mortality – Since 2014, Rhode Island has been participating in the Infant Mortality Collaborative Improvement and Innovation Network (CoIn). 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. The team is coordinating activities to reduce infant mortality closely with the Rhode Island Task Force to Reduce Premature Births, the Rhode Island Neonatal Abstinence Syndrome Task Force, and the Disparities in Infant Mortality Advisory Board.

Substance Exposed Newborns (SEN) intergenerational efforts – The SEN program at the Rhode Island Department of Health (RIDOH) supports the ongoing work of the RI Task Force to Support Pregnant and Parenting Families with Substance-Exposed Newborns (SEN Task Force) and related efforts. The SEN Task Force seeks to improve a coordinated system for early identification and support for impacted families. The SEN Task Force reports out to the Governor’s Task Force on Drug Overdose, as well as the Children’s Cabinet on findings, recommendations for action and to request resources, policy changes and guidance.

Safe Sleep – The Interagency Safe Sleep Workgroup is comprised of members from RIDOH; the Department of Children, Youth and Families; the Office of the Child Advocate; Parent Support Network of Rhode Island, and several community-based organizations. Together, the agencies are working to address all child deaths related to safe sleep. A multifaceted work plan has been developed to increase public awareness as well as provide technical assistance and training to a variety of audiences (both clinical and non-clinical) that serve mothers and their infants. This work is considered a priority for the Governor’s Children’s Cabinet.

The Medical Home Portal was developed to help professionals and families who care for Children and Youth with Special Health Care Needs (CYSHCN) find reliable information and access to valuable local professional and community resources to improve the care, health, and outcomes of CYSHCN. The Medical Home Portal is available 24/7, is google translate enabled and contains a help key for additional support via e-mail or a call during working hours. There is detailed information on over fifty diagnoses and conditions with local pediatric specialists embedded within the resources. The Medical Home Portal also contains sections on newborn screenings, Rhode Island Services Directory, transition to adulthood, care coordination, family FAQ pages, and an extensive customizable care notebook.

Percentage Served by the Rhode Island MCH Program*

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>pregnant women</td>
<td>100.0%</td>
</tr>
<tr>
<td>infants under one</td>
<td>100.0%</td>
</tr>
<tr>
<td>children and adolescents</td>
<td>100.0%</td>
</tr>
<tr>
<td>children with special health care needs</td>
<td>47.0%</td>
</tr>
<tr>
<td>others</td>
<td></td>
</tr>
</tbody>
</table>

*2017 State/Jurisdiction Annual Reports Submitted to the Maternal and Child Health Bureau

Health Needs in Rhode Island

- Improve routine provision of preconception care and education
- Increase breastfeeding awareness and social support
- Address obesity/nutrition & physical activity for children
- Increase the capacity and efficiency of the adolescent systems of care
- Support implementation of the Family Home Visiting Program.
- Improve the system of care of children and youth with special health care needs
- Improve access to dental services
- Improve system coordination in communities and in the state to facilitate improved health outcomes
- Improve mental / behavioral health across the life course
- Adopt social determinants of health in public health planning and practice to improve health equity

State Selected National Performance Measures

- Breastfeeding
- Physical Activity
- Adolescent Well-Visit
- Medical Home
- Transition
- Preventive Dental Visit
- Adequate Insurance

Rhode Island State Profile 2019
Current Special Projects of Regional and National Significance (SPRANS)

State Systems Development Initiative (SSDI)
RHODE ISLAND DEPARTMENT OF HEALTH
Providence, RI

Children’s Oral Healthcare Access Program
RHODE ISLAND DEPARTMENT OF HEALTH
Providence, RI

MCH Collaborative Office Rounds
UNIVERSITY OF RHODE ISLAND
Kingston, RI

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