

Virginia

Maternal and Child Health Block Grant 2016

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 Virginia

FY 2013	FY 2014	FY 2015
\$11,675,402	\$12,025,842	\$12,060,536

Title V Administrative Agency:
Office of Family Health, Virginia Department of Health

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

Protecting and Improving the Health of Virginia's Families

Children with Youth with Special Health Care Needs — One of the most vulnerable populations, Children and Youth with Special Health Care Needs, receive a large proportion of block grant funds. The MCH program assures and coordinates health services on an individual basis through its Care Connection for Children network, Child Development Centers, Bleeding Disorders Program, and Sickle Cell Centers. The Care Connection for Children program provides care coordination services, family to family support, and some financial assistance to children with special health care needs.

Injury and Violence Prevention — Sleep-related deaths are the leading cause of death among infants during the postneonatal period. The MCH program supports the prevention of sleep-related deaths in Virginia as a strategic priority in both the statewide infant mortality reduction plan and as a CoIIN priority for Virginia. MCH funding also supports statewide work to prevent leading and emerging causes of injury and violence in Virginia including traumatic brain injury, child passenger safety, prescription drug misuse and bullying prevention.

Thriving Infants—MCH staff support the Statewide Thriving Infants Initiative which includes integration and implementation of both the Thriving Infants Strategic Plan, an evidence based plan to reduce infant mortality (IM) in Virginia and the national rollout of the IM CoIIN (Collaborative Innovation and Improvement Network). A 25 member state team of key stakeholders are collaborating on implementing evidence based strategies at the state, regional, and local levels to reduce Virginia's infant mortality rate (IMR) to reach short term and long term goals by 2018. The Office of the Chief Medical Examiner leads a collaborative effort to conduct maternal and infant mortality reviews.

Bright Futures — As the standard of pediatric health care in Virginia, Bright Futures is integrated into provider/workforce training, and parent/family education. A new health literacy portal has been developed in partnership with the American Academy of Pediatrics – www.healthyfuturesva.com is a web-based tool that personifies Bright Futures for parents and caregivers. Bright Futures as an interagency initiative is coordinated by MCH program staff.

Nutrition — The Division of Community Nutrition, promotes healthy eating habits and good nutrition, to improve the quality of life for women, infants and children, including children with special health care needs. Breastfeeding is promoted and supported as the ideal source of nutrition for infants. Breastfeeding Peer Counselors are available to offer support to pregnant and breastfeeding women to help them meet their breastfeeding goals. The Virginia Maternity Center Breastfeeding-Friendly Designation Program has been developed as a five-star award system for maternity care centers, which will reward them for taking steps to improve the quality of care for breastfeeding women.

Early Childhood Services— The purpose of this program is to promote the health of children from birth to approximately 8 years of age. The program provides infrastructure-building services. Core services include: Identifying and disseminating effective resources/tools/best practices to early childhood providers on prioritized health topics; providing technical assistance to early childhood providers and the public; and collaborating with early childhood stakeholders to monitor quality of health services provided to young children in child care settings. Efforts focus on partnering to ensure the safety and well-being of young children in all settings and to support and strengthen family relationships. Staff collaborate to prepare a workforce to seamlessly support children's health, development, learning, and school success from birth through age 8.

Dental Health – Tooth decay is the most common chronic disease of childhood. MCH funding supports increased access to dental care and oral health promotion programs for high risk children and across the lifespan. Programs include fluoride varnish application for infants and toddlers in non-dental settings; oral health assessment and education for children and adults, including pregnant women; training for dental professionals on care of young children and Children with Special Health Care Needs; and data collection and surveillance activities to guide future program planning.

School Age/Adolescent Health Program—The program provides infrastructure building services to public, private and parochial school age health care providers. Core services include surveying these providers to identify needs. The program identifies and disseminates effective resources, tools and best practices to providers on prioritized health topics. This program develops and updates the school health guidelines, the school entrance health form and the school age health website, and collaborates with school age health stakeholders to monitor the quality of school health services. Approximately 2,000 public, private/parochial school nurses serve 1.2 million public school students and 100,000 private/parochial school students.

People Served by the Virginia 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 services to the following individuals:

14,512	pregnant women
101,683	infants under one
46,044	children and adolescents
6,779	children with special health care needs
58,540	others
231,753	total served

*2014 State/Jurisdiction Annual Reports Submitted to the Maternal and Child Health Bureau

For more information, contact:

Maternal & Child Health

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Health Needs in Virginia

- Increase proportion of parents and caregivers who position their children in a safe sleep environment.
- Increase the proportion of women who initiate breastfeeding before hospital discharge. Increase the proportion of women who exclusively breastfeed through 6 months of age.
- Increase partnerships with school systems who participate in 60 minutes of physical activity daily for children 6-11 years.
- Decrease the proportion of pregnant women who smoke during pregnancy, and decrease the number of smoking households.
- Increase the percentage of adolescents with and without special health care needs who have an identified adult health care provider by 18 years of age.
- Increase the rate of children and adolescents who are appropriately restrained with car seats or seatbelts and who use safety helmet in all recreational activities.
- Reduce the number of cesarean deliveries among low-risk births.

State Selected National Performance Measures

- Low Risk Cesarean Deliveries
- Breastfeeding
- Safe Sleep
- Child & Adolescent Injury
- Physical Activity
- Medical Home
- Transition
- Smoking

Grants to Virginia

Healthy Tomorrows Partnership for Children Program

PEOPLE INCORPORATED OF VIRGINIA
 Abingdon, VA
 \$43,745

STATE SYSTEMS DEVELOPMENT INITIATIVE (SSDI)

HEALTH, VIRGINIA DEPARTMENT OF
 RICHMOND, VA
 \$90,097

GENETICS SERVICES

HEALTH, VIRGINIA DEPARTMENT OF
 Richmond, VA
 \$298,713

*These grants were awarded in FY 2013.