California
Maternal and Child Health Block Grant 2013

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 44 million women and children in the U.S. To learn more about Title V, visit www.amchp.org.

MCH Block Grant Funds to California

<table>
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<tr>
<th>FY 2012</th>
<th>FY 2013 (Estimate)</th>
<th>Difference in Federal Funds*</th>
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<tbody>
<tr>
<td>$41,389,219</td>
<td>$38,784,804</td>
<td>$-2,604,415</td>
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Title V Administrative Agency:
Maternal, Child and Adolescent Health Program, Children’s Medical Services
Estimated State Funds, FY 2013: $1,306,322,819

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

Protecting and Improving the Health of California’s Families

The California MCAH Program uses scientific evidence-based methods in the development, targeting, and evaluation of its programs. These efforts rely upon strategic partnerships with nationally recognized public health and medical experts in health care and university settings; local health jurisdiction programs; partnerships with other State and Federal programs; support of local public health capacity through ongoing technical assistance and training; MCAH leadership and scientific support of multiple statewide and national committees; and the ongoing development and analysis of program and population-based data systems. Statewide MCAH public health priorities are continuously assessed and formally re-established every five years through a comprehensive statewide needs assessment process conducted in close collaboration with local health jurisdictions and other stakeholders.

Birth Defects and Newborn Screening - The MCAH program collects and analyzes data on children with birth defects and encourages prevention through folic acid promotion, effective management of diabetes in pregnancy and interventions regarding perinatal substance use. In addition, Department of Public Health partners screen newborns for genetic diseases and hearing loss, and offer prenatal screening to detect neural tube defects and other fetal abnormalities.

Adolescent Family Life Program - Currently 39 agencies provide services to approximately 6,000 teens in 37 California counties each year. The Adolescent Family Life Program provides case management to pregnant and parenting teens to prevent second pregnancies, improve pregnancy outcomes, and strengthen parenting skills.

Local Maternal, Child and Adolescent Health Program - Local MCAH Program activities focus on comprehensive health, medical, and psychosocial needs of the maternal, child and adolescent health population, along with implementing screening, assessment, and referral to treatment programs that address perinatal substance use prevention. To meet this goal, the Program has partnerships and agreements with various state, federal, and local agencies in both the public and private sectors.

Black Infant Health Program - To improve African American infant and maternal health, the program has been revised to provide a group intervention to African American women that will be conducted both prenatally and postpartum. The groups will provide social support, empowerment and knowledge and skill development intended to decrease black-white health disparities and social inequities.

Children’s Medical Services - Children with complex health and psycho-social needs receive case management and referrals to specialty care, to ensure the provision of multi-disciplinary and coordinated care.

California Diabetes and Pregnancy Program - CDAPP regional representatives recruit, educate, and mentor local health providers to follow the Sweet Success Guidelines for Care for pregnant women with pre-existing, overt or gestational diabetes in order to improving the pregnancy and birth outcome for these women and their infants.

Oral Health Program - To address the oral health needs of pregnant women, mothers, and children, this program collaborates with new and existing dental and health-related programs to expand access to dental care and preventive services. In addition, this program provides technical assistance to local MCAH programs to facilitate oral health program integration policy development and community outreach efforts.

Sudden Infant Death Syndrome - The MCAH program coordinates SIDS services through: data collection and analysis; support services to SIDS families and caregivers; SIDS training for emergency personnel and public health professionals; and promotion of SIDS risk reduction activities in the community.
Preconception Health and Health Care - Through the establishment of the Preconception Health Council of California, MCAH is partnering with organizations and stakeholders across the state to provide direction for the integration of preconception care into clinical and public health practice, develop policy strategies to support preconception care and promote preconception health messaging for women of reproductive age.

Early Childhood Screening – MCAH was one of 12 states to receive Substance Abuse and Mental Health Services Administration (SAMHSA) Project LAUNCH 5 year funding in 2009 to promote the healthy development of young children, 0-8 years of age, in the state. One of the primary goals will be to identify and refer children with a suspected developmental delay or disability as early as possible, when appropriate interventions are known to be the most effective.

Maternal Health - Given the gradual rise in maternal mortality since 1998, MCAH has developed the Pregnancy-Associated Mortality Review (enhanced surveillance with case review), the California Maternal Quality Care Collaborative (multidisciplinary planning to improve maternity care), the Maternal Quality Indicator work group (focus on maternal morbidity) and the Local Assistance for Maternal Health projects (to implement quality improvement efforts at the local level).

Fetal Infant Mortality Review - A community-based program implemented by 16 MCAH local health jurisdictions, that reviews contributing factors to fetal and infant deaths. Members of the Case Review Team and the Community Action Team include community leaders, medical care providers, public health professionals, social service staff, advocacy groups, and consumers. These community groups identify interventions to prevent fetal and infant mortality, thus improving health services for families.

Regional Perinatal Programs of California - Provides a comprehensive, cooperative network of public and private health care providers within geographic areas to assure the well-being of pregnant women and their infants. RPPC promotes access to risk-appropriate perinatal care through regional quality improvement activities. RPPC Directors and staff provide resources, consultation, and technical assistance to their regions’ hospitals and health care providers.

Breastfeeding - This program collaborates with California health care systems, providers, MCAH programs, and other Department of Public Health partners to promote evidence-based public health and health care policies and procedures, thus making breastfeeding the normal method of infant feeding in California. Birth and Beyond California partners with the Regional Perinatal Programs of California to provide technical assistance, resource development, on-site education and training with hospitals to improve their exclusive breastfeeding rates by establishing hospital policies and a continuous quality improvement plan.

People Served by the California 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:

- 526,774 pregnant women
- 589,656 infants under one
- 1,605,499 children and adolescents
- 179,306 children with special health care needs
- 2,901,235 total served

*2009 State/Jurisdiction Annual Reports Submitted to the Maternal and Child Health Bureau

Health Needs in California

- Improve maternal health by optimizing the health and well-being of girls and women across the life course.
- Reduce maternal morbidity and mortality and the increasing disparity in maternal health outcomes.
- Promote positive youth development strategies to support the physical, mental, sexual and reproductive health of adolescents.
- Support the physical, socio-emotional, and cognitive development of children, including the prevention of injuries, through the implementation of prevention, early identification and intervention strategies.
- Reduce infant mortality and address disparities by promoting preconception health and health care and by preventing causes such as birth defects, low birth weight/prematurity, SIDS, and maternal complications in pregnancy.
- Modify the CCS program, with appropriate funding, to cover the whole child.
- Expand the number of qualified providers of all types in the CCS program.
- CCS will work with appropriate partners to define and create and implement standards for Medical Homes for CCS children.
- Promote healthy nutrition and physical activity among MCAH populations throughout the lifespan beginning with exclusive breastfeeding of infants to six months of age.
- Link the MCAH population to needed medical, mental, social, dental, and community services to promote equity in access to quality services.

For more information, contact:

Maternal & Child Health
Shabbir Ahmad, DVM, MS, PhD
Acting Division Chief
Maternal, Child & Adolescent Health Program
1615 Capitol Ave., MS 8300
PO Box 997420
Sacramento, CA 95899
Phone: (916) 650-0300
E-mail: shabbir.ahmad@cdph.ca.gov

Children with Special Health Care Needs
Marian Dalsey
Acting Branch Chief
CA Dept of Public Health
1515 K Street, Suite 400
Sacramento, CA 95814
Phone: (916) 650-0319
Fax: (916) 552-9244
E-mail: marian.dalsey@dhcs.ca.gov