Title V Guidance and Forms for the Application/Annual Report
Goals of the Guidance Revision

- Tell a more cohesive and comprehensive Title V story
- Demonstrate vital leadership role of Title V programs in assuring and advancing state public health systems and responding to changes in the health and health care environment
- Position state and national MCH priorities as centerpiece of application
Goals of the Guidance Revision (cont)

- Assure state and national MCH priority needs as “drivers” for state reporting in needs assessment, selection of national performance measures, and development of evidence-based-strategies
- Reduce burden and duplication in narrative and forms
- Maintain with legislative requirements
Sections of the Application

New requirements and order:

• Application/Annual Report Executive Summary
• State Overview
• Needs Assessment Summary
• State Action Plan and Strategies
• Budget
• Reporting Forms
Application/Annual Report
Executive Summary

• No more than 3 pages
• Summary of the application
  • Emergent needs based on 5-year needs assessment
  • Highest ranked priority needs for states
  • SPMs developed to address needs, NPMs selected, and S&PMs in subsequent years
  • Major accomplishments and performance relative to identified needs
  • Plan for coming year
Application/Annual Report Components

- Overview of the State
- Summary of Five-year needs assessment
- State Selected Priorities
- Linkage of State Priorities with NPMs and Outcome Measures
- Linkage of State Selected Priorities with State Performance and Outcome Measures
- Five-year State Action Plan
Five-Year Needs Assessment

- Needs Assessment to be integrated into annual application/annual report
- Needs Assessment summary replaces the former standalone document in first year application/annual report
- Updates provided in interim year reports
TITLE V MCH BLOCK GRANT NEEDS ASSESSMENT FRAMEWORK
LOGIC MODEL

1. 5-Year Needs Assessment
2. Assess and Summarize MCH Population Needs, Program Capacity, and Partnerships/Collaborations
3. Identify State Title V Program Priority Needs and Consider National MCH Priority Areas
4. Select National Performance Measures; Develop State Measures
5. Develop/Refine Strategies for Addressing Priority Needs and Selected National and State Measures
6. Develop/Implement State Action Plan for MCH Block Grant Program
7. Develop/Refine Structural Measures for Achieving Progress on National Measures
8. Develop/Update Performance Objectives; Report Annual State Performance Indicator Data
9. Analyze Performance Trends
10. Reassess
11. Interim Year Applications/Annual Reports
Needs Assessment Summary

• Concise summary of the needs assessment process and findings
• No more than 20 pages (60,000 characters)
• Key findings as they relate to state MCH priority needs and link with national MCH priority areas
Needs Assessment Process

• Goals, framework, methodology
• Level and extent of stakeholder involvement
• Quantitative and qualitative methods used to assess strengths and needs of each population health domain, MCH program capacity and partnerships
• Data sources used
• Interface between data, finalization of state priority needs, and action plan
Needs Assessment Findings

- MCH population needs
  - Summary of MCH strengths/needs, successes, challenges and gaps for population health domains
- Title V program capacity
  - Organizational structure
  - Agency capacity
  - MCH workforce development and capacity
- Partnerships, collaboration and coordination
  - Family/consumer engagement and leadership
  - Coordination with other MCHB, federal, state and local MCH investments
Needs Assessment Findings (cont.)

• State Selected Priorities
• Linkage of State Priorities with National Performance Measures
• Linkage of State Selected Priorities with State Performance Measures and Outcome Measures with other MCHB, federal, state and local MCH investments
Application/Annual Report

- Organized by population health domain
  - Maternal/women’s health
  - Perinatal/infant health
  - Children
  - Adolescent/young adults
  - CYSHCN
  - Cross-cutting/Life course

- Other programmatic activities
State Action Plan

• Serves as application and annual report for reporting year and plan for application year
• Organized by population health domain
• States will describe efforts taken and progress made in addressing identified needs, highlight accomplishments, challenges
• Describe role of Title V agency in advancing key strategies
• Analysis of factors contributing to progress made, challenges that may have impeded progress
• Discussion of performance measurement data
State Action Plan (cont.)

• Description of plan for coming year in response to successes and challenges
• Discussion of legislative requirements
• Efforts to assure cultural and linguistic competence
• Efforts to promote health equity
• Description of critical partnerships with MCHB programs
State Action Plan (cont.)

• Other Programmatic activities
• MCH Workforce Development and Capacity
• Family/Consumer Partnerships
• Health Reform
• Emerging Issues
• Public Input
• Technical Assistance
State Action Plan Table

- Organized by population health domain
- State Priority Needs
- Strategies/Activities
- Performance measures (NOMS, NPMs, S&PMs, SPMs,)

Health Resources and Services Administration (HRSA)
## Five-Year State Action Plan Table

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Development and Implementation Five-Year of the State Action Plan

**Application Year 01**
Complete Five-Year State Action Plan Table and Summarize Findings in State Action Plan Narrative

**Application Year 02**
Update Five-Year State Action Plan Table and Insert S&PMs. Present narrative description by performance measure and by population health domain, of planned activities for coming year and discuss for reporting year.

**Application Year 03 through Application Year 05**
Update Five-Year State Action Plan Table. Present narrative description, by performance measure and population health domain, of planned activities for the coming year and progress achieved in reporting year.
Budget Narrative

• Demonstrate compliance with 30%-30% requirements
• Describe maintenance of efforts and match
• Submit separate budget estimates for federal and non-federal MCH block grant funds
• Describe sources of other federal MCH dollars, state matching funds, including non-federal dollars that meet the legislatively-required match, and other state funds used
Reporting Forms

- Fewer forms (11) and revised order
- Revised budget expenditure forms
- Revised newborn screening form
- Revised MCH priority needs form
- Expanded toll-free hotline form to include “other appropriate methods”
<table>
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<tr>
<th>Submission Date</th>
<th>Application Year</th>
<th>Annual Report Year</th>
<th>Minimum Needs Assessment Reporting Requirements</th>
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<td>July 15, 2014</td>
<td>FY 2015 (Last Application year of the current five-year cycle.)</td>
<td>FY 2013</td>
<td>States report annual update on their ongoing Needs Assessment efforts in Section IIC of their Application.</td>
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<td>July 15, 2015</td>
<td>FY 2016 (First Application year of the new five-year cycle.)</td>
<td>FY 2014 (Last Annual Report year of the current five-year cycle)</td>
<td>States submit their MCH five-year Needs Assessment, which includes identification of 7-10 priority needs, 5 State Performance Measures (SPMs) and selection of 8 National Performance Measures (NPMs) from the pool of 15 NPMS, based on the findings of the 5-year Needs Assessment.</td>
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<td>July 15, 2016</td>
<td>FY 2017</td>
<td>FY 2015</td>
<td>This submission includes structural measures developed by the State to link with the NPMs they have selected and the establishment of performance objectives for both Structural and State performance measures.</td>
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<td>July 15, 2017</td>
<td>FY 2018</td>
<td>FY 2016 (First Annual Report of the new five-year cycle.)</td>
<td>States begin reporting on structural measures related to the NPMs they selected and on their unique SPMS.</td>
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