CAST-5 and the Title V
Program Planning Cycle

A collaborative project of the Johns Hopkins Women’s and Children’s Health Policy Center and the Association of Maternal and Child Health Programs

The Maternal and Child Health Bureau’s Title V MCH Services Block Grant Program Guidance describes a cyclic process for needs assessment, planning, and program monitoring and improvement. Capacity Assessment for State Title V (CAST-5) can contribute to each part of that cycle.

**Program Planning Cycle**

- **Assess Needs**
- **Examine Capacity**
  - Includes describing current activities and services (organized by 4 levels of the MCH pyramid)
- **Identify Priority Needs**
- **Establish Performance Measures**
- **Identify Annual Targets**
- **Identify Activities to Address Priority Needs**
- **Allocate Resources**
- **Monitor Progress**

**Contribution of CAST-5**

- The Core Questions provide a structure for articulating the population health needs identified in the Needs Assessment and the programmatic and organizational strategies that address them.
- The Process Indicators tool helps gauge performance related to meeting those needs through the 10 MCH Essential Services. The Capacity Needs tool provides a structured way to examine capacity to carry out the MCH Essential Services and achieve desired performance objectives.
- The Process Indicators can be used to determine areas of performance needing improvement. In addition, CAST-5 includes a process for establishing priority areas of capacity building in light of the state context as expressed in the answers to the Core Questions, national objectives, etc.
- CAST-5 provides a way to examine capacity to meet performance targets, particularly for the measures of health systems capacity.
- The Process Indicators are supplemented by examples of Title V activities that contribute to carrying out the MCH Essential Services. Where priorities include building organizational capacity, the Capacity Needs tool provides concrete examples of resources that contribute to improving performance in identified areas.
- The prioritization of capacity needs provides a basis for allocating staff and resources and assists in identifying low-cost methods of infrastructure building (e.g., through collaboration, consolidation, etc.)
- CAST-5 can be repeated (in full or in part) on a periodic basis to monitor status of capacity-building efforts in light of changing population and organizational needs.

JHU WCHPC

January 2004
MCH Strategic Capacity Planning Framework

CAST-5 provides a link between what a program does and what it strives to achieve by identifying the organizational resources that support program operations.

CAST-5 and the Title V Pyramid

The MCH-specific 10 Essential Services provide the conceptual framework for CAST-5. This framework is compatible with the four levels of the MCH pyramid, which form the conceptual basis for Title V activities as described in the Block Grant guidance. The 10 MCH Essential Services and the 4 levels of the MCH Pyramid are different ways of categorizing the same core public health functions.

The 10 MCH Essential Services (abridged):
1) Assess and monitor MCH status
2) Diagnose and Investigate health problems and health hazards
3) Inform and educate the public
4) Mobilize community partnerships
5) Leadership for priority setting, planning, and policy development
6) Promote and enforce legal requirements
7) Link to services
8) Assure workforce capacity
9) Evaluate services
10) Support research and demonstrations

Each level of the Title V Pyramid corresponds to one or more of the MCH-specific 10 Essential Services.