



PULSE

A MONTHLY NEWSLETTER FROM THE ASSOCIATION OF MATERNAL & CHILD HEALTH PROGRAMS

A Year in Review/ A Look Ahead

January/February 2012

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From the President

By Stephanie Birch, RNC, MPH,
MS, FNP



I am always excited to start a new year. For me, it speaks to the opportunity to try things new or revisit the old. 2011 was quite a year as states' adjusted to massive spending cuts, reorganization of health departments or MCH programs, and the implementation of several new programs, such as the maternal, infant and early child home visiting program. It was a busy year for the AMCHP staff as well. Advocacy for the Title V MCH Block Grant during a very uncertain period was a challenge. While any cuts to the block grant are not positive, the silver lining is that the reduction was not nearly what we anticipated.

What will 2012 bring? Federal spending cuts are likely to result in significant changes to programs and possible elimination. For maternal and child health and CYSHCN programs, 2012 will continue to be a challenge. I am confident we will find ways to use our skills and strengths in partnership, collaboration and creativity to continue the important work required of us. We must continue to educate our elected officials and the public about the meaningful work that is being done in each of the states and the impact that it makes on the health outcomes of women, children and their families. Leadership is what is most important during challenging times! States are fortunate to have skilled and committed MCH and CYSHCN leaders who can make a difference!

I look forward to seeing many of you at the annual AMCHP conference in the coming days.

A featured topic on influence and creating change in challenging times will offer an opportunity to look at how



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From the President CONT.

to view current challenges differently. Other topics include chronic disease prevention across the lifespan, working through difficult times, and a session to highlight state initiatives to promote maternal and child health.

Join me as we march forward together in 2012!

From the CEO Looking Forward, Looking Back

By Michael R. Fraser,
PhD, CAE

Happy New Year! This issue of *Pulse* is one of my favorites to put together each year. It captures all that we have done in 2011 to move state maternal and child health (MCH) programs forward – and we have done a great deal – and it also lays out some of the things that we anticipate facing in 2012. This issue is presented with a great sense of pride in all that AMCHP accomplished in 2011, and a cautious optimism about 2012 despite all the challenges we know we will face this year.



No doubt about it: 2011 was tough! The Title V MCH Services Block Grant and a number of other MCH-related programs faced significant funding challenges here in Washington, D.C. as Congress and the administration wrestled with the 2012 federal budget and proposed funding reductions. I'll remember 2011 as a year of near misses and dodged bullets. Thankfully, with the support and voices of AMCHP members and partners we avoided

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a \$50 million proposed cut to Title V programs and instead face a 2012 Title V budget with a \$10 million cut – not ideal, but better than expected. Ironically this cut comes at a time of new investment in programs authorized under the Affordable Care Act, such as the Maternal, Infant and Early Childhood Home Visitation Program. Many of the presentations I did last year started with the famous opening of Dickens' *Tale of Two Cities* – "It was the best of times, it was the worst of times." 2011 definitely felt that way for much of the year!

Despite the budget gloom, 2011 was a very productive year here at AMCHP. Our Program Team developed several webinars, research briefs, training programs, leadership development opportunities and family engagement resources that will help state MCH programs be more efficient and effective. Many of these programmatic resources are described in this edition; take a look and let us know what other resources would be helpful to you as an AMCHP member or partner as we move our programmatic work forward. Our Policy Team was equally prolific in developing resources and tools for state MCH programs and their partners – especially in terms of resources to help states plan implementation of the Affordable Care Act. Be sure to review the many resources our National Center on Health Reform Implementation has developed for more on this topic. All this was accomplished by a highly motivated, qualified and devoted team of staff here at AMCHP, as well as an equally skilled cadre of AMCHP members, partners and volunteer leaders.

I am generally an optimist and as such, I wish I could say with great certainty that I thought 2012 was going to be a banner year from MCH programs. Unfortunately, I think it would be more apt to say that 2012 will be a year of great success, but also great challenge. We know that the proposed 2013 federal budget will almost certainly contain proposed cuts to Title V and other federal investments in MCH. Why? Automatic cuts were part of the deal Congress reached in 2012 before charging its "Super Committee" with the unenviable task of shoring up the federal budget. The Super Committee's lack of consensus means that automatic cuts will be triggered in proposed federal funding for 2013. What does this mean for MCH programs? We don't know specifics yet, but we will be sure to share what we know when we know it as the year progresses.

With that downer of a new year's outlook what could possibly be good about 2012? Lots!

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First, we have a strong advocacy team and wide support network for Title V – our mailing list and the overall number of folks receiving our legislative alerts (and acting on them) is higher than it has ever been. There are still opportunities to reverse proposed cuts – especially if we can activate a strong response from you and your networks. We are also looking forward to continuing a number of programmatic successes in 2012 – more on programmatic work that we are really excited about is included in this issue of *Pulse*. And 2012 is starting with an important challenge from the Association of State and Territorial Health Officials President, Dr. David Lakey, to improve birth outcomes in all states and reduce the rate of non-medically indicated pre-term birth by 8 percent by 2014. This is a great chance for MCH programs to demonstrate their leadership, expertise, and strength in convening partners and stakeholders around this important and impactful issue.

So, as we look toward 2012, I think we have cause to be excited. Of course, an important holdover from 2011 will be continued MCH leadership in 2012. The gains we make and the successes we enjoy are only possible with the strong leadership of our Board and members, partners, and staff, who all continue to share a unifying vision, align our work and share our resources. I look forward to 2012 with a confidence that AMCHP is in a great position to support state MCH programs and provide national leadership on issues affecting women, children and families. Thank you for being a part of our shared vision and AMCHP! Happy 2012!

AMCHP Conference Goes Mobile

Whether you've got an iPad, smartphone or laptop, we've got ways for you to engage on your terms to enhance your experience at the AMCHP Annual Conference! For the first time ever, AMCHP will offer meetsmart mobile, a new conference navigation app that lets attendees personalize their conference experience with easy connect, decide and go functionality. Start using it now at tinyurl.com/amchp12app or click [here](#) for more information.



Feature

The Year in Title V MCH Policy – Looking Back (At Bullets We Largely Dodged) and Looking Forward (To Living in the Era of Tightening Budget Caps)

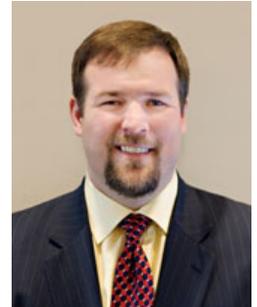
By AMCHP Policy Staff
(Brent Ewig, Carolyn Mullen & Karen VanLandeghem)

While AMCHP, along with our members and partners, worked to meet our strategic goal of effectively voicing the critical importance of maternal and child health issues, this past year was marked by continued and perhaps deepening, divisiveness here in Washington, D.C. In practical terms, this means that nothing gets done in Congress until the last moment – and usually only then with maximum acrimony. This political posturing from both parties overshadows a year in which the number of people living in poverty and without health insurance reached record highs.

Against these stark determinants of MCH status, the year was also marked by intense budget battles and continued planning for both implementation and challenges to the Affordable Care Act. This column takes a look at highlights from the AMCHP work in both categories.

On the budget front, it seems hard to imagine but it really was less than a year ago, Feb. 9, 2011, when the U.S. House of Representatives proposed a stunning \$210 million cut to the Title V MCH Services Block Grant for FY 2011. Recognizing the gravity of this threat, AMCHP members, partners and staff mounted an all out advocacy effort

to demonstrate the devastating impact this would have on MCH populations. Notable successes in this effort included thousands of phone calls and e-mail messages to policymakers, as well as three strategically placed



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The Year in Title V MCH Policy

op-eds promoting the value of state Title V MCH programs by AMCHP CEO Mike Fraser in conjunction with Mother's Day.

With the support of members and the help of partners too numerous to mention, we collectively and successfully advocated against these deep cuts. By May 2011, we received confirmation that Congress restored Title V MCH funding to the nearly flat level \$656 million in the final government-shutdown averting deal. From this effort, we demonstrated that targeted advocacy; engagement with key stakeholders, partners and champions in the administration and Congress; and convincing documentation of potential negative impacts truly can make a difference.

Action in Congress this year also set in motion the process that provides a series of both annual budget caps, as well as automatic cuts virtually guaranteeing that we will face the continued threat of MCH program cuts for years to come.

The effect of these caps quickly became apparent when the Senate Appropriations Committee proposed and approved a \$50 million reduction to the Title V MCH Block Grant in September. Once again, AMCHP provided leadership to mobilize against further cuts. A highlight here included a new partnership with the National WIC Association and the National Family Planning & Reproductive Health Association that delivered an unprecedented National Mobilization for Women, Children and Families. On Oct. 26, we combined forces to flood Capitol Hill with a unified message opposing MCH and women's health program cuts. Our message was simple **"we urge our senators and representatives to oppose**

any efforts to cut core programs for women, children and families, including the Title V MCH Block Grant and Home Visiting Program, WIC and Title X."

Once again, our efforts paid off when, on Dec. 17, Congress finally approved an Omnibus Appropriations Bill, which provides \$646 million for the Title V Maternal and Child Health Services Block Grant – a \$10 million decrease from the FY 2011 level of \$656 million. The legislation specifies that the reduction will be applied to the Special Projects of Regional and National Significance (SPRANS) component of the Title V MCH Block Grant. A subsequent provision applies a 0.189 percent across the board cut bringing the MCH Block Grant total closer to \$645 million. While significant, the \$10 million reduction is much less than the \$50 million cut approved by the Senate Appropriations Committee in 2011. It will likely take some time to learn details on how the reductions will be applied.

It is important to pause and reflect on what you accomplished last year. During the February FY 2011 budget fight, the House proposed to slash the Title V MCH Block Grant by \$210 million. Together we defeated that proposal and ended up with a small cut to the block grant. Then earlier this year the Senate proposed a \$50 million cut to the MCH Block Grant in the FY 2012 Senate appropriations bill. That cut has been reduced to \$11.2 million. While this cut is not insignificant in these trying times, it is important for us to pause for a moment and know that our voice was heard. So, once again, on behalf of AMCHP and the millions of women, infants and children served by Title V MCH programs we thank you for your advocacy.

The FY 2012 budget process begins again in earnest on Feb. 6, when the president submits the administration's budget proposal and action subsequently turns back to Capitol Hill. This year will be even more challenging, but 2011 should be a testament to the power of our collective advocacy. We will be calling upon this power again soon for the next budget cycle!

A Look Back...National Center for Health Reform Implementation

In the past year, we also monitored and reported on a series of challenges to the Affordable Care Act, including efforts to repeal, defund and litigate the law. In perhaps the most significant development, the U.S. Supreme Court has



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scheduled arguments about the case for March 2012. A ruling is expected sometime this summer, and it is clear the law will be an issue in the November elections as well.

Against this complicated backdrop, this past year the AMCHP **National Center for Health Reform Implementation** continued to provide assistance to state MCH programs and their key partners (e.g., state Medicaid and CHIP programs, community health centers, local health departments, providers) to understand challenges and optimize the opportunities presented by health reform for women, children, including children and youth with special health care needs (CYSHCN), and their families. We are extremely grateful for support from and partnership with the Health Resources and Services Administration (HRSA), the Centers for Disease Control and Prevention (CDC), the Commonwealth Fund and the Kellogg Foundation to support our work this past year.

Some of our notable accomplishments include:

- Featured state strategies for integrating public/private systems and building medical homes through the Affordable Care Act through two national webinars with over 500 participants. Our first webinar focused on integrated service delivery systems for women, children and their families, while the second national webinar described the health home provisions of the Affordable Care Act – known as Section 2703 after the section of the law that provides the authorization – and how states may include children in the state plan amendments. Both of these webinars are archived on the AMCHP [webinar archive page](#).
- Helped build state capacity to improve preconception health through the Affordable Care Act with six states through a national meeting and targeted technical assistance.
- Highlighted state strategies and best practices for integrating service delivery systems. Drafted policy briefs on integrated service delivery systems for women, infants and children. In addition, AMCHP drafted policy briefs detailing how states can use evidence-based practice, like The Community Guide, to drive policy. These policy briefs will be released this spring.
- Provided timely information on implementation of key provisions of the Affordable Care Act through widely distributed fact sheets and comments on the Affordable Care Act health insurance exchange regulation.

- Promoted the importance of preventive services for women in testimony before the Institute of Medicine (IOM). The majority of the AMCHP recommendations were included in the IOM report adopted by the U.S. Department of Health and Human Services (HHS) identifying eight gaps in preventive health for women.
- Advocated for the unique needs of women and children and the role of Title V in key provisions of the Affordable Care Act, including but not limited to quality measures, the Prevention and Public Health Fund, and the National Prevention and Health Promotion Strategy.
- Promoted the importance of state Title V MCH programs in helping to improve MCH through the National Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Improvement Workgroup and a number of coalitions working to implement provisions of the Affordable Care Act.

A Look Ahead...

AMCHP is excited to continue working on health reform implementation and providing states with technical assistance and resources to optimize the opportunities afforded in health reform. Our work for the next year will encompass a broad array of projects designed to improve birth outcomes, integrate service delivery systems and include children in health home state plan amendments.

We intend to closely follow and report on the Supreme Court decision on the Affordable Care Act. Moreover, we will provide comments on potential regulations on essential health benefits and how this will affect all populations but specifically children and youth with special health care needs. Finally, AMCHP plans to develop resources for states to think through the tough questions regarding assuring access to care and supporting adequate capacity in state MCH programs after 2014, and how these issues will potentially shape and redefine the roles of Title V in a post health reform world.

Specifically, our work on health reform implementation and providing states with technical assistance and resources to optimize the opportunities afforded in health reform during the next year will encompass a broad array of activities, including:

- Promoting comprehensive benefit package design, including application of the Bright Futures for Children

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guidelines for all plans and development of Bright Futures Guidelines for Women.

- Assisting states in building capacity to implement important provisions, including the expansion of medical homes through the ACA and other national opportunities.
- Continuing to contribute state MCH expertise to state exchange design, including creation of the essential benefits package.
- Supporting efforts to strengthen and expand Medicaid, including strengthening the role of state Title V MCH programs in working with Medicaid, CHIP agencies in building and improving systems of care for MCH populations.
- Developing strategies to address increased demand for access to providers and relating the role of Title V in assuring provision of enabling services, care coordination, population-based prevention and systems-building services.
- Crafting strategies to help assure health system capacity and other crucial activities leading up to the 2014 coverage expansion.
- Identifying and promoting the role of Title V MCH programs in a reformed health care system and providing strategies and assistance to state Title V programs and their partners in doing so.
- Assuring strong MCH representation on national boards and commissions, including but not limited to the National EPSDT Improvement Workgroup, Key National Indicators Development and Adult Medicaid Quality Measures, with opportunities to focus on women's health, preconception and maternity care.
- Continuing an intensive learning collaborative with state MCH programs and their key partners (e.g., state Medicaid agencies, local health departments, community health centers) in selected states to increase their effectiveness and capacity to optimize implementation of the Affordable Care Act to address preconception health, adolescent health and reproductive health.
- Providing capacity building assistance to state MCH leaders and their key partners in optimizing recent advances and opportunities in breastfeeding promotion.
- Identifying, strengthening and replicating successful state efforts to forge collaborative partnerships among state and local MCH programs and key stakeholders to improve birth outcomes with a focus on reducing the rate of preterm birth inductions and unnecessary C-sections.

Feature

A Look Back at AMCHP Programs in 2011

By Lauren Raskin Ramos, MPH
Director of Programs, AMCHP

With contributions from the AMCHP Program Team



2011 was another busy year for AMCHP staff working to support state Title V programs and advance the AMCHP strategic plan by providing resources, technical assistance, analysis and training to Title V programs. Throughout the year, AMCHP enhanced efforts to support state implementation of the life course perspective; supported peer-to-peer exchange among states to build systems of care for children and youth with autism and other developmental disabilities; provided ongoing capacity-building for state MCH epidemiology programs; supported state innovation in adolescent health; grew Innovation Station by collecting and disseminating best practices in MCH; and provided leadership development for new Title V directors and family leaders. Importantly, AMCHP also strengthened evaluation efforts across the organization supporting continuous quality improvement to ensure that our work is relevant and timely for state Title V programs. A snapshot of key activities to support our strategic goals follows.

Strategic Goal: Improve maternal and child health outcomes by promoting a life course perspective and sharing effective and promising practices with state and territorial MCH programs.

This past year, we made strides in understanding effective and promising practices that states can use for **measuring preconception health**. Our activities included a scan of the Title V Information System for measurement practices, an online assessment of states about the use of the Core Preconception Health Indicators and a site visit to a state demonstrating leadership in measuring preconception health.

Throughout 2011, AMCHP collected and disseminated promising and evidence-based practices in women's and infant health through conference sessions, webinars and issue briefs.

- AMCHP supported quarterly Women's Health

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Programs: A Look Back

Information Series webinars to showcase promising and evidence-based practices in women's and infant health, highlighting federal and national initiatives and resources, and allowing discussion of related policy and research. Webinar topics this year included:

- **Text4baby:** State Enrollment Contest Kick-Off Webinar for AMCHP Members.
- **Infant Sleep Position and Bed Sharing:** Using PRAMS to Impact Programs and Policy.
- A Year of Progress **Utilizing the Less Than 39 Weeks Toolkit:** Building Successful Partnerships with clinicians, health departments and the March of Dimes Webinar.
- **American Academy of Pediatrics Task Force SIDS and Other Sleep-Related Infant Deaths:** Expansion of Recommendations for a Safe Infant Sleeping Environment.
- AMCHP hosted three conference sessions on reproductive and infant health at the 2011 AMCHP Annual Conference. Session topics were: 1) *Promoting MCH and Chronic Disease Program Collaboration: Practical Tools and Perspectives* (this session will highlight Activity 4.1b); 2) *New Developments in Federal and State Breastfeeding Policies and Programs*; and 3) *Innovative Approaches for Integrating Preconception Health Concepts into Adolescent Health*.

In 2011, to aid **maternal and child health and chronic disease collaboration**, AMCHP:

- Partnered with the Division of Reproductive Health Applied Science Branch/Research and Evaluation Team and the National Association of Chronic Disease Directors (NACDD) Women's Health Council to pilot a project with three states (MO, OH and WV) using an

Action Learning Collaborative (ALC) model to support **collaboration and integration between MCH and chronic disease programs for early prevention of chronic diseases**. This project is focusing on enhancing gestational diabetes awareness; treatment and follow-up as a topic area to improve project collaboration and partnership between MCH and chronic disease leaders; prevent or delay onset of type-two diabetes; improve birth outcomes; and promote women's health across the lifespan.

AMCHP grew and enhanced **Innovation Station, the AMCHP best practices program** by reviewing new practices and creating tools and resources to facilitate easy submission. Currently, Innovation Station includes 39 programs and continues to grow.

- Six new programs were accepted into Innovation Station and three existing programs received designations to raise them to a higher category. These newly accepted programs were highlighted in AMCHP publications and on the AMCHP website.
- AMCHP honored Illinois' La Vida Sana with a Promising Practice award at the 2011 conference.
- AMCHP developed [new resources](#) to help programs determine if they were ready to submit to Innovation Station and prepare their submission. AMCHP also developed internal tools and tutorials for staff so they are better able to recognize and solicit successful submissions at conferences, meetings and during state block grant reviews. AMCHP increased efforts to recruit submission through a targeted marketing campaign (via publications, listservs, Regional calls, partner meetings, etc.) that focused on monthly topics and through focused outreach by AMCHP staff.



Improving Maternal and
Child Health
Across the Life Span:

**ACTING
TODAY** for healthy
TOMORROWS

2012 AMCHP ANNUAL CONFERENCE

February 11-14

Washington, DC



AMCHP 2012 Offers Social Work Continuing Education Credits!

For the first time this year, AMCHP will be offering social work contact hours for the Annual Conference! The conference has been approved by the National Association of Social Workers (approval #886591416-9870) for 19.5 social work continuing education hours. Due to the cost associated with this offering, there is a \$50 fee for all attendees wishing to receive social work contact hours. Payment can be made via your online registration (pending updates) or onsite. Please contact [Sarah Schenck](#) with questions. Click [here](#) for more information and to register.

Feature CONT. Programs: A Look Back

- AMCHP launched evaluation efforts to assess the usefulness and effectiveness of the program in helping Title V programs strengthen their capacity to improve MCH status.
- In November, we had the opportunity to highlight two Innovation Station programs during a National Initiative for Children's Healthcare Quality (NICHQ) [Collaborate for Healthy Weight webinar](#), which featured our best practices program, highlighting practices that addressed healthy weight in Latino populations.

In order to support state efforts to **implement a life course perspective**, AMCHP:

- Hosted two town hall-style meetings (in September 2010 and February 2011), with CityMatCH, for key MCH leaders and practitioners interested in and currently developing life course-focused programming. These town hall events explored **applying the life course perspective, social determinants of health and health equity concepts to everyday MCH practice**, while promoting in-depth discussions about the three essential elements of the MCHB Concept Paper: knowledge base, program and policy strategies, and political will.
- Released a summary report, with CityMatCH, ***Moving the Life Course Work Forward: Recommendations from the Life Course Town Hall Meetings***.
- Worked with the Emerging Issues Committee to assess **what resources exist to help state Title V programs incorporate a life course perspective into their work**. The goal is to offer a forum to share existing resources among states and determine areas of need or gaps that could develop into future projects.
- Held discussions with the Workforce & Leadership Development Committee on life course perspective and its **implications for the MCH workforce**.

To share effective and promising practices on **children and youth with special health care needs** over the past year, AMCHP has:

- Provided direct technical assistance to 35 states through autism funding from HRSA and CDC.
- Strengthened the **State Public Health Autism Resource Center** (SPHARC) by highlighting additional

state resources, news stories on autism, state spotlights and resources from its Peer-to-Peer Exchange program.

- Identified promising practices through two publications: 1) ***Roles for State Title V Programs: Building Systems of Care for Children and Youth with Autism Spectrum Disorder and Other Developmental Disabilities***; and 2) ***Environmental Scan: How State Title V Programs are Responding to Autism Spectrum Disorder and Other Developmental Disabilities***. The first publication highlighted state Title V program efforts to address the increasing numbers of children identified and diagnosed with autism spectrum disorder and other developmental disabilities (ASD/DD). The second publication highlighted activities among states to address ASD/DD, provided insights into approaches that state Title V programs are taking to address the growing incidence of ASD/DD, and catalogued ASD/DD activities that fit within the framework of the Maternal and Child Health Bureau Critical Indicators for CYSHCN.
- Through funding from the CDC National Center for Birth Defects and Developmental Disabilities (NCBDDD), provided grants to state teams led by a public health entity to **support the collaboration of Act Early teams and to further activities related to incorporating the Learn the Signs. Act Early. (LTSAE) materials** and messages into public health planning. Ten states were chosen to receive grant funds and technical assistance webinars were held throughout the year. A second round of CDC Learn the Signs. Act Early. State Systems Grants were awarded to 10 states in November, with a primary focus on partnerships with early childhood programs.

To advance **adolescent health** outcomes, AMCHP:

- Completed the **Preconception Health and Adolescents Action Learning Collaborative** with six states who worked to implement preconception health efforts into their adolescent and young adult health efforts – state success stories can be viewed on the AMCHP YouTube Channel.
- Hosted the **Preconception Health and Adolescents Symposium** at the AMCHP 2011 Annual Conference.
- Disseminated two documents in the Youth Document Series: **Adolescent Reproductive & Sexual Health and Mental Health**.

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Programs: A Look Back

- Convened three adolescent health related webinars: Awareness, Inclusion, and Prevention: How to Resonate with Lesbian, Gay, Bisexual and Questioning (LGBQ) Youth about Sexual Health Issues – a two-part series: Strategies for Creating LGBTQ Inclusive Anti-Bullying Policies at the State Level & Strategies for Addressing the Sexual Health Needs of Youth in Foster Care; and Positive Youth Development: Practical Applications for State Health and Education Agencies.
- Supported an adolescent health track at the AMCHP 2011 Annual Conference, including a general session: **R U Effective? How well R U meeting the health needs of young people?**; a skills-building session; two Knowledge Café sessions; two power sessions; and a number of adolescent health-related workshop sessions.

Strategic Goal: State and territorial MCH programs will have a diverse and effective workforce with competent leaders at the national, state and local levels.

Over the last year, AMCHP has conducted training and technical assistance to ensure that state and territorial MCH programs have a **diverse and effective workforce** with competent leaders. These efforts included:

- Supporting the **skills and capacity of the MCH epidemiology workforce**, including three training sessions prior to the 17th Annual MCH Epidemiology Conference. These sessions included two-day trainings on **Data Linkage** and **Knowledge Translation**, and a one-day training on **Scientific Writing**. Overall, the training participants were very satisfied with the training (99 percent), they felt the tools were relevant to their work (100 percent), they felt they would be able to apply the training information to their work (96 percent) and that their knowledge about the techniques increased (100 percent).
- Providing **support to the MCH Epi Group**, along with other sponsoring organizations, in order to improve communications between MCH epidemiologists working at both the state and local levels by assisting the development of a new website, mchepi.org.
- Conducting leadership development training through the SPHARC Peer-to-Peer Exchange program. In March, AMCHP held a **Peer-to-Peer Exchange** in Salt Lake City, UT that addressed the topic of **medical home for children and youth with autism spectrum**

disorders and other developmental disabilities. State Autism Implementation Grantees from AK, IL, ME, MO, NJ, NM, NY, RI and WI participated in the exchange. In June, AMCHP held a Peer-to-Peer Exchange in Chicago, Illinois that addressed the topic of **using families to engage providers and cultural competency.** State Autism Implementation Grantees from IL, NJ, UT, VT, WA and WI, and staff from the American Academy of Pediatrics (AAP) participated in the exchange. Evaluation of the Peer-to-Peer Exchanges has been overwhelmingly positive, with 100 percent of participants rating themselves as satisfied, and 100 percent of participants rating the exchanges as relevant to their professional needs.

- On Apr. 12, family leaders completed the inaugural 12-month **Family Scholars Program (FSP)**. The FSP began a new program year in July. Currently, 11 scholars and three mentors are participating in the program, which includes monthly webinars and 'stretch' assignments on a selected topic related to Title V and the MCH competencies. Topics have included family involvement and Title V, strengths-based leadership, family-professional partnerships, policy and advocacy, writing your story, and life course perspectives.
- Focusing the **Family and Youth Leadership Committee (FYLC)** on strengthening family leadership and engagement within AMCHP and Title V.

Have you connected with AMCHP through social media? Here's your chance to like us, follow us, be part of the AMCHP group and check out our videos on YouTube!!



Feature CONT. Programs: A Look Back

- In February 2011, completing the first AMCHP **Family Delegate (FD) survey**; the data collected indicated that FDs want periodic contact to network and learn from each other. The survey also identified knowledge and skill sets that FDs indicate as important for family leaders, results include translating and communicating data, knowledge of program serving MCH populations, public speaking, and translating policy. As a result, the FYLC has established quarterly calls for the FDs and will hold one annual in-person event at the AMCHP annual conference.
- Expanding its partnership with **national family organizations**, including Parent to Parent USA (P2P USA), who approved AMCHP as a board member.
- Kicking off the **New Director Mentor Program** in 2011 at the AMCHP Annual Conference with eight pairs of new directors and mentors.
- Continuing to be an active partner to the **Maternal and Child Health Public Health Leadership Institute** (MCH PHLI).
- Supporting **MCH engagement in public health accreditation**. The 2011 AMCHP Annual Conference included a Knowledge Café session on this topic. AMCHP is also partnering with ASTHO on a pilot program to plan and implement quality improvement projects in MCH, Chronic Disease or Environmental Health programs and model how they would use the quality improvement results to satisfy documentation to meet public health accreditation standards and measures for state health agencies.
- Offering professional development opportunities to Title V programs through **individual coaching sessions** at the AMCHP annual conference. Over 30 MCH professionals participated and took advantage of this opportunity.
- Continuing dialogue to support **youth involvement** in AMCHP. The board of directors appointed a subgroup to discuss what youth involvement means at AMCHP and provide guidance in this area. This work is leading to strategic directions and a workplan to advance youth involvement in AMCHP.
- Launching the **Ryan Colburn Scholarship Fund** (RCSF) and selecting the first recipient in 2011. The scholarship is for outstanding youth leadership in the field of MCH and is specifically for a youth leader with special health care needs. AMCHP had five youth

applicants for the RCSF and requested volunteer reviewers from the FYLC, FDs, and alumni and current participants of the FSP. The selected recipient has been matched with a mentor from the FYLC and will attend the annual conference.

- Establishing the **Realityworks and Go Beyond MCH Graduate Student Scholarship** in 2011. The scholarship was awarded to a graduate student in their last year of studies for demonstrating leadership involvement through academic excellence and practical experience in the field of MCH. A total of 35 applicants were reviewed and the recipient has been selected.

Strategic Goal: AMCHP will be an effective and efficient organization and partner in support of state and territorial MCH programs.

In order to be an effective and efficient organization and partner, supporting of state and territorial MCH programs, AMCHP has:

- Partnered with the Catalyst Center to write a fact sheet titled, ***The Affordable Care Act and Children and Youth with Autism Spectrum Disorder and other Developmental Disabilities***. The purpose of the fact sheet is to provide an overview of select provisions in ACA that have implications for children with ASD/DD.
- Planned, in partnership with the National Center for the Ease of Use of Community-Based Services, an ALC on the topic of **“Ease of Use of Services for Latino Families who have Children and Youth with Special Health Care Needs.”**
- Convened an **adolescent health strategy meeting** with key public health organizations including ASTHO and NACCHO.
- Supported the leadership team of the **National Network of State Adolescent Health Coordinators**.
- Advanced evaluation efforts by implementing an **evaluation and assessment plan**, using a set of core evaluation questions across all activities.
- Provided monthly reports to the Executive Committee on evaluation activities, fund development, organizational financial status, and program, policy and communications benchmarks.

Feature CONT.

AMCHP Programs: A Look Ahead to 2012

By Lauren Raskin Ramos, MPH
Director of Programs, AMCHP

*With contributions from the
AMCHP Program Team*

2012 is off to an exciting start for AMCHP programs, with many new efforts already underway! A preview of what you can expect in the coming months is highlighted below, including how each of our activities is working to support state Title V programs and advance the AMCHP strategic plan. Look for resources to support states to improve birth outcomes and reduce infant mortality; a Web-based resource for states to implement the life course perspective; assessment of effective models for maternal mortality reviews; technical assistance for state implementation of home visiting programs; enhanced efforts to support state preconception health; and new tools and resources to support state systems building in adolescent health, and autism and developmental disabilities.

Strategic Goal: Improve maternal and child health outcomes by promoting a life course perspective and sharing effective and promising practices with state and territorial MCH programs.

AMCHP will enhance work to support state efforts to implement a life course perspective through some key activities, including:

- The **Life Course Training Institute** at the AMCHP Annual Conference.

In the coming year, AMCHP will **support MCH epidemiology capacity** by:

- Developing an assessment for MCH epidemiologists and Vital Records registrars, in partnership with the National Association for Public Health Statistics and Information Systems (NAPHSIS), about their practices



relating to data linkage, particularly the **linkage of birth certificate and hospital discharge records**.

- Exploring effective and **promising practices around successful maternal mortality reviews**, beginning with an assessment of state activities, as part of our CDC cooperative agreement.
- Working on identifying a set of core indicators states can use to **measure health throughout the life course**. This work, which will be sponsored by the Kellogg Foundation, will support efforts to implement a life course perspective by providing a mechanism with which to demonstrate success.
- Finalizing the **State Infant Mortality Collaborative Toolkit**, providing tools for states to analyze and understand data related to infant mortality.

AMCHP will work to showcase effective practice in women's and infant health in 2012 by:

- Producing an online toolkit to **support state maternal mortality reviews**, in partnership with the American Congress of Obstetricians and Gynecologists. Information in the toolkit will include state profiles, as well as legislative and funding information.
- Assessing the **relationships between MCH (Title V) and family planning (Title X) programs**, including opportunities and challenges to provide comprehensive women's health services and promote adolescent health through family planning services.
- Collecting and disseminating tools and resources to **promote the health of women with disabilities**.
- Partnering with CDC to support stakeholder workshops on **emergency preparedness for special populations**, including pregnant women and infants.

AMCHP will continue to expand on opportunities to increase the use of its Best Practices program as a resource and promote the value of being included in Innovation Station. Planned activities include:

- Continued outreach to increase submissions with the goal of having **at least one program from each state** accepted to Innovation Station.
- Developing new resources and learning opportunities,

Feature CONT.

AMCHP Programs: A Look Ahead

such as webinars or fact sheets, about successes and lessons learned from practices in Innovation Station.

- Highlighting current Innovation Station programs at the 2012 conference through the **Best Practice Awards** and a special session on how states incorporated evidence into and improved effectiveness of their programs, especially given limited resources and budgets.
- Launching **opportunities to foster replication of emerging, promising and best practices** in other states and communities.

In 2012, AMCHP has planned the following to promote our adolescent health objectives:

- Host an Adolescent and Young Adult Health Institute at the AMCHP Annual Conference to support a **life course and adolescent and young adult health dialogue**.
- Support state and local partnership in adolescent health by piloting **the System Capacity Assessment Tool for Adolescent Health** with local public health providers.
- Hold a **Comprehensive Systems Approach to Adolescent Health Thought Leaders Roundtable** meeting.
- Maintain and support key adolescent health partnerships, including the **National Network for State Adolescent Health Coordinators**.
- Improve and expand the AMCHP adolescent health related online resources – including enhanced Web pages, increased numbers of adolescent health related best practices, and connection with adolescent health related tools and resources.

To help building systems for children and youth with special health care needs, AMCHP has several activities planned, including:

- Hosting a webinar, *Roles for State Title V Programs – Building Systems of Care for Children and Youth with Autism Spectrum Disorders* to help states, primarily Title V programs, determine appropriate roles and approaches to pursue in building systems of care for children and youth with autism spectrum disorder and other developmental disabilities.
- Planning, in partnership with the National Center for

Ease of Use of Community-Based Services, an ALC on the topic of **“Ease of Use of Services for Latino Families who have Children and Youth with Special Health Care Needs.”** AMCHP will select states to participate in the ALC, and will host a series of webinars and a site visit.

- Supporting 10 state teams through the **CDC Learn the Signs. Act Early. State Systems Grants**.

AMCHP will continue to **support state implementation of home visiting programs** in 2012. As a partner in the new Maternal, Infant and Early Childhood Home Visiting (MIECHV) Technical Assistance Center, AMCHP will work with partners to provide technical assistance to states to advance implementation of state home visiting programs.



Do you have a program that is related to development and training of the MCH workforce?

Consider sharing your program in [Innovation Station](#), AMCHP’s searchable database of emerging, promising and best practices in maternal and child health. You’ll have a chance to:

- Share successes with your peers
- Enhance the MCH field
- Contribute to program replication
- Get expert feedback from the Review Panel
- Receive national recognition

The online submission process is simple and applications are accepted on a rolling basis. For more information, contact [Kate Howe](#) at (202) 266-3056 or visit amchp.org/bestpractices.

You can also [click here](#) to refer an innovative MCH program that we should know about!

Feature CONT.

AMCHP Programs: A Look Ahead

Strategic Goal: State and territorial MCH programs will have a diverse and effective workforce with competent leaders at the national, state and local levels.

AMCHP believes it is important for state and territorial MCH programs to have a diverse and effective workforce with competent leaders at the national, state and local levels. This year we plan to:

- Collaborate with the MCH Epi Group to begin a **mentorship program for new and junior MCH epidemiologists** working at the state level. The program will match new/junior MCH epidemiologists with mentors who can help them adjust to their new role, identify skill areas they need to develop and provide expert advice on career opportunities.
- Focus more sessions on relating to data and assessment at the AMCHP Annual Conference this year. The offerings will include a **skills-building session on Performance and Outcome Measurement: Strategies for Target Setting**, and sessions about the preconception health indicators and MCH epi Methods and Practices.
- Provide ongoing leadership development to family leaders through the **Family Scholars Program (FSP)**. Family Scholars will attend the AMCHP Annual Conference to expand their knowledge in various areas and make visits to their elected officials on the Hill to advocate for Title V. Monthly leadership development will continue. AMCHP will launch the call for applicants for the 2012 FSP in June 2012.
- Support family engagement through the **Family & Youth Leadership Committee (FYLC)**, including activities for Family Delegates and other family leaders at the AMCHP Annual Conference.
- Grow the **New Director Mentor Program** by welcoming a new cohort into the program.
- Revise the **Guide for Senior Managers**, a resource developed to provide an overview of the roles and responsibilities that individuals responsible for managing parts of the Title V MCH Block Grant, to reflect recent policies and emerging issues impacting the health of women, children and families.
- Identify opportunities for the Workforce & Leadership Development Committee (WLDC) to present the implication of the **Life Course Approach on the MCH workforce** to different audiences.

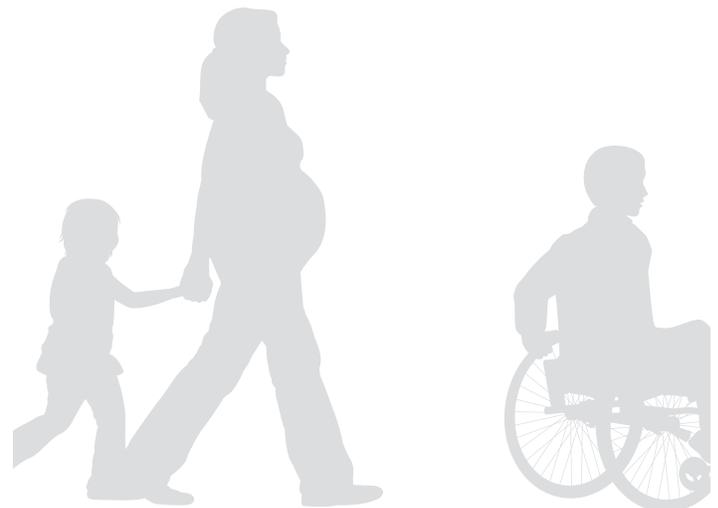
- Provide opportunities to for professional development by offering individual **professional coaching sessions** by certified professional coaches at the AMCHP annual conference.

In addition to a strong workforce, **youth involvement and leadership development** also is key. To facilitate more youth involvement, AMCHP will:

- Develop and implement strategies to advance youth involvement and leadership in the organization.
- Support youth leaders through the **Ryan Colburn Scholarship** to support a youth leader to attend the 2013 AMCHP Annual Conference and by offering opportunities to **encourage participation by students and young professionals** at the AMCHP Annual Conference through scholarships and abstract submissions.

Strategic Goal: AMCHP will be an effective and efficient organization and partner in support of state and territorial MCH programs.

AMCHP will continue striving to be an effective and efficient organization and partner in support of state and territorial MCH programs. We will continue to focus on **continuous quality improvement**, including ongoing implementation of the Evaluation and Assessment Program. AMCHP also will continue to **maintain and enhance partnerships with key organizations**, including MCHB, CDC, CityMatCH, Family Voices, ASTHO, the National Healthy Start Association, March of Dimes, ACOG, AAP, the MCHB-supported CYSHCN National Resource Centers and many others!



Who's New

NEW MCH STAFF

NEW TITLE V DIRECTORS

NEW YORK

Rachel DeLong

Director, Division of Family Health
New York State Department of Health

U.S. VIRGIN ISLANDS

Derval N. Petersen, MA

Acting Director
VI Department of Health

NEW MCH DIRECTORS

GEORGIA

Seema Csukas, MD, PhD

MCH Director
Georgia Department of Public Health

WISCONSIN

Murray Katcher

Chief Medical Officer for MCH
Wisconsin Department of Health Services, Division of
Public Health

NEW CYSHCN DIRECTORS

DELAWARE

Bhavana Viswanathan, MS, MBA, MPH

CYSHCN Director
Delaware Division of Public Health

MISSOURI

Steve Cramer, M.A

Section Administrator, CYSHCN
Missouri Department of Health and Senior Services

AMCHP WELCOMES NEW STAFF

Erin Bonzon, MSPH/MSW

Erin Bonzon joins AMCHP as the Associate Director, Women's and Infant Health, supporting our CDC Division of Reproductive Health work, and managing our new home visiting technical assistance center contract. Previously, Erin worked at the National Association of County and City Health Officials as a Program Manager for Community Health, where she managed chronic disease and MCH projects at NACCHO for five years. Erin also has experience as a family home visitor for the Orange County Health Department in NC and at the UNC Center for Maternal and Infant Health. She also worked with the Maternal and Child Health Leadership Training Program at the University of North Carolina and the Lombardi Comprehensive Cancer Center at Georgetown University. Erin has an MSPH/MSW from the University of North Carolina at Chapel Hill and a Bachelor of Arts in Psychology from the State University of New York College at Fredonia.

Maritza Valenzuela, MPH, CHES

Maritza Valenzuela joins AMCHP as Adolescent Health Program Manager and will be coordinating CDC-funded programming that builds state-level capacity to advance adolescent sexual health policy, systems, and environmental change efforts. Maritza has several years of diverse experience in health promotion, HIV prevention, electoral campaigns, issue advocacy, capacity building, and youth empowerment. Born and raised in Arizona, she received her BA from the University of Redlands in California and her MPH from Columbia University in New York City. Prior to joining AMCHP, Maritza was the Program Manager for Training and Education at AIDS Alliance for Children, Youth & Families, providing capacity-building assistance to youth-serving community based organizations. Maritza is an active member of the American Public Health Association and a current Fellow with the National Hispana Leadership Institute. She is passionate about the intersections of social justice and public health, addressing health disparities, anti-oppression education, and the health of sexual minority youth.

Resources

2011 – AMCHP Publications and Webinars

Publications

- [AMCHP Fact Sheet: State Birth Defects Performance Measures](#) – May 2011
- [AMCHP Youth Document Series: Adolescent Reproductive and Sexual Health](#) – September 2011
- [AMCHP Youth Document Series: Mental Health](#) – September 2011
- [Opportunities for Collaboration between State Oral Health and Maternal and Child Health Programs to Improve Early Childhood Oral Health](#) – September 2011
- [Roles for State Title V Programs: Building Systems of Care for Children and Youth with Autism Spectrum Disorder and other Developmental Disabilities](#) – October 2011
- [AMCHP Issue Brief: Environmental Scan: How State Title V Programs are Responding to Autism Spectrum Disorder and Other Developmental Disabilities](#) – November 2011

Webinars

- [Screening, Referral and Treatment for Developmental Delay: Using EPSDT to Support State Initiatives](#) – March 2011
- [Utah Peer-to-Peer Exchange: Medical Home](#) – March 2011
- [The National Centers](#) – May 2011
- [State Roadmaps to Services](#) – May 2011
- [Text4baby State Enrollment Contest Kick-Off Webinar for AMCHP Members](#) – May 2011
- [Illinois Peer-to-Peer Exchange: Using Families to Engage Providers and Cultural Competency](#) – June 2011
- [Infant Sleep Position and Bed Sharing: Using PRAMS to Impact Programs and Policy](#) – June 2011
- [Strengthening Title V and Medicaid Partnerships](#) – September 2011
- [Making Healthcare Information Technology Meaningful for Maternal and Child Health](#) – September 2011
- [A Year of Progress Utilizing the Less Than 39 Weeks Toolkit: Building Successful Partnerships with clinicians, health departments and the March of Dimes](#) – November, 2011
- [State Models in Advancing Preconception Health Screening Tools](#) – November 2011
- [Financing Issues in Systems of Care for Children and Youth with Autism Spectrum Disorders](#) – December 2011

Get Involved

Training Course In Maternal and Child Health Epidemiology

MCHB/CDC Training Course in MCH Epidemiology is part of an ongoing effort to enhance the analytic capacity of state and local health agencies. This program is aimed primarily at professionals in state and local health agencies who have significant responsibility for collecting, processing, analyzing and reporting MCH data. This year, the course is geared to individuals with intermediate to advanced skills in using statistical and epidemiologic methods, preferably in MCH or a related field. The training curriculum is designed to build conceptual, technical and analytic skills for using data effectively, and focuses on applications that are relevant to the day-to-day work of participants. The course will be held May 29-Jun. 2 in Denver, Colorado. Lodging, breakfast, and luncheon costs of trainees are covered. A limited number of scholarships for airfare are available. Completed applications must be submitted to Positive Outcomes, Inc. by 5 p.m. EST, Friday, Mar. 2. For more information, click [here](#).

Save the Date! UIC MCH Retreat – Leading in Challenging Times: Innovations & Inspiration

This year's retreat will focus on Leading in Challenging Times; however, this concept will be talked about ways that you may expect. Participants will share personal stories of their journey and work with women, men, children and families. AMCHP CEO Dr. Michael Fraser will lead this process. We also will explore and practice various leadership concepts including challenging the assumption that these are indeed challenging times. The leadership training will be facilitated by Dr. Stephen Bogdewic, PhD, Executive Associate Dean for Faculty Affairs & Professional Development at the Indiana University School of Medicine. The retreat will be held Jul. 22-24 at the Hyatt Lodge in Oak Brook, IL. For more information visit our [website](#).

Scholarships Available for Univ. of Arizona Graduate Certificate in MCH Epidemiology

HRSA has full tuition scholarships for up to 15 participants in the Graduate Certificate Program in MCH Epidemiology at the University of Arizona. In addition to obtaining the certificate, credits from the program are transferable to graduate programs in public health. Deadline for 2012 intake is Mar. 1. Full details and application can be found on the program [website](#).

Data and Trends

AMCHP By the Numbers: 2011

Program and Policy Activities

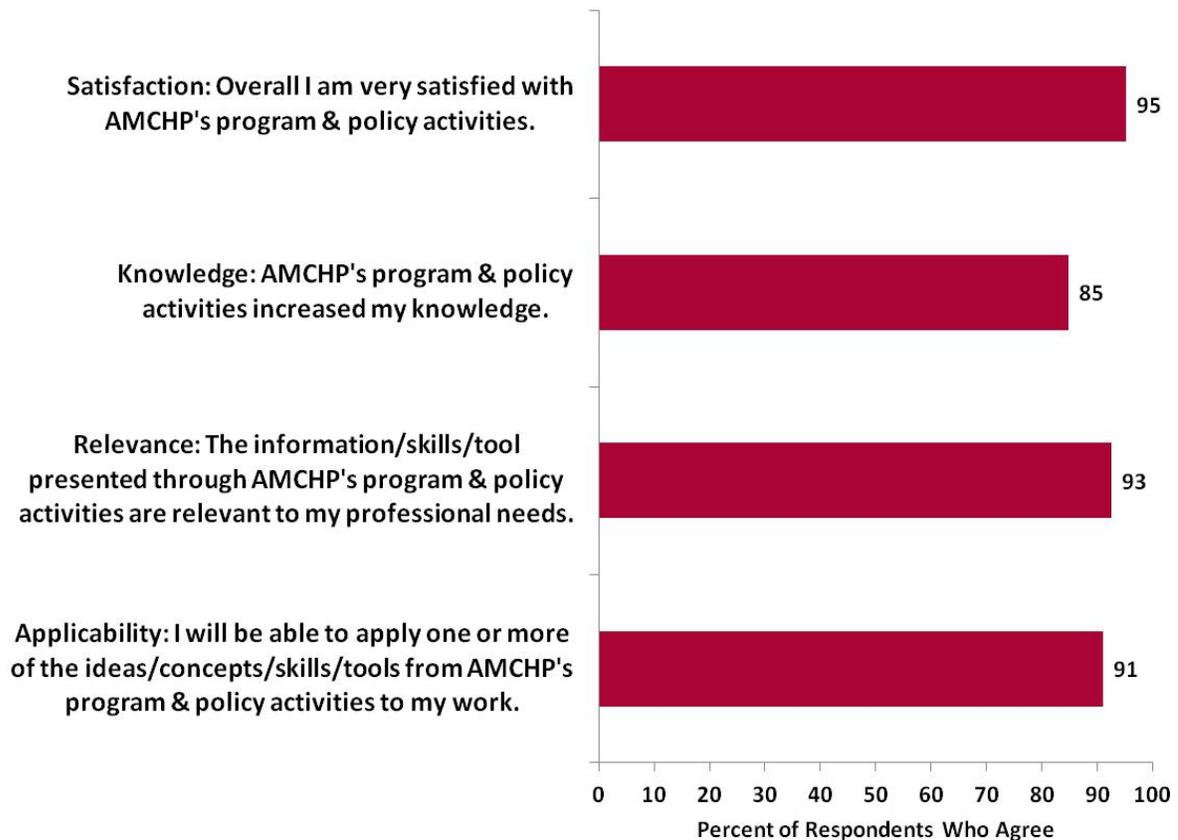
Virtual and In-Person Trainings: **29**

Total Emerging / Promising / Best Practices : **9**

Leg alerts sent: **23**

National Policy Calls: **5**

Core Evaluation Questions:



Communications: Monthly Snapshot

Average Pulse Reach (people): **11,206**

Average Member Briefs Reach (people): **1,075**

Average Visits to AMCHP.org: **9,742**

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Les Newman
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AMCHP Staff

Matt Algee, *Senior Accountant*

Julio Arguello, Jr., *Program Manager, Online Media and Information Technology*

Erin Bonzon, MSPH/MSW, *Associate Director, Women's and Infant Health*

Treeby Brown, MPP, *Senior Program Manager, Children and Youth With Special Health Care Needs*

Tegan Callahan, MPH, *CDC Public Health Prevention Specialist, Women's and Infant Health*

Tania Carroll, *Office Assistant*

Melody Cherny, *Program Associate, Children and Youth With Special Health Care Needs*

Sharron Corle, MS, *Associate Director, Adolescent Health*

Librada Estrada, MPH, CHES, CPCC, *Associate Director, Workforce & Leadership Development, Family Involvement*

Brent Ewig, MHS, *Director of Public Policy & Government Affairs*

Michael R. Fraser, PhD, CAE, *Chief Executive Officer*

Alma Gomez, *Administrative Assistant, Program and Policy*

Laura Goodwin, *Publications and Member Services Manager*

Piia Hanson, MSPH, *Program Manager, Women's and Infant Health*

AMCHP Staff CONT.

Jessica Hawkins, MPH, CHES, Senior Program Manager, Women's and Infant Health

Adriana Houk, Associate Director, Organizational Performance and Membership

Kate Howe, MPH, Program Manager, Child Health

Michelle Jarvis, Program Manager, Family Involvement

Jess Kim, Intern, Women's and Infant Health

Nora Lam, Executive Assistant

Carolyn D. Mullen, Associate Director, National Center for Health Reform Implementation

Lauren Raskin Ramos, MPH, Director of Programs

Caroline Stampfel, MPH, Senior Epidemiologist, Women's and Infant Health

Maritza Valenzuela, MPH, CHES, Program Manager, Adolescent Health

Karen VanLandeghem, MPH, Senior Advisor, National Center for Health Reform Implementation

Calendar

AMCHP Conference and Special Events

[AMCHP 2012 Annual Conference](#)

Feb. 11-14

Washington, DC

[Adolescent and Young Adult Health Institute](#)

Feb. 11 (during the AMCHP Annual Conference

Training Institute)

Washington, DC

[A Life Course Dialogue: Exploring State-Level Implementation](#)

Feb. 12 (during the AMCHP Annual Conference

Training Institute)

Washington, DC

[AMCHP and March of Dimes Third Annual Mini-March for Babies](#)

Feb. 14 at 10 a.m.

Washington, DC

Want your event listed on the AMCHP MCH Events Calendar? It's easy! Just complete our [online submission form](#).

Calendar CONT.

Partner Events

[Leadership Education in Neurodevelopmental and Related Disabilities \(LEND\) Directors Meetings](#)

Feb. 12

Washington, DC

[Leadership Education in Adolescent Health \(LEAH\) Directors Meeting](#)

Feb. 12

Washington, DC

[National Summit on Quality In Home Visiting Programs](#)

Feb. 15-16

Washington, DC

MCH Events

[Health Connect One National Action Summit](#)

Feb. 28-29

Washington, DC

[NHSA 13th Annual Spring Conference](#)

March 11-14

Washington, DC

[2012 National Health Promotion Summit](#)

April 10-11

Washington, DC

[Safe States Alliance 2012 Joint Annual Meeting](#)

May 1-4

Atlanta, GA

[Head Start's 11th National Research Conference](#)

June 18-20

Washington, DC

[25th Anniversary Meeting of the Society for Pediatric and Perinatal Epidemiologic Research](#)

Jun. 25-27

Minneapolis, MN

Association of Maternal & Child Health Programs

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