



Indiana
Department
of
Health

RESTRUCTURING AND MOBILIZING STATE AND LOCAL PUBLIC HEALTH SYSTEMS TO ACHIEVE POSITIVE OUTCOMES FOR THE MCH POPULATION

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OUR MISSION:

To promote, protect, and improve the health and safety of all Hoosiers.

OUR VISION:

Every Hoosier reaches optimal health regardless of where they live, learn, work, or play.



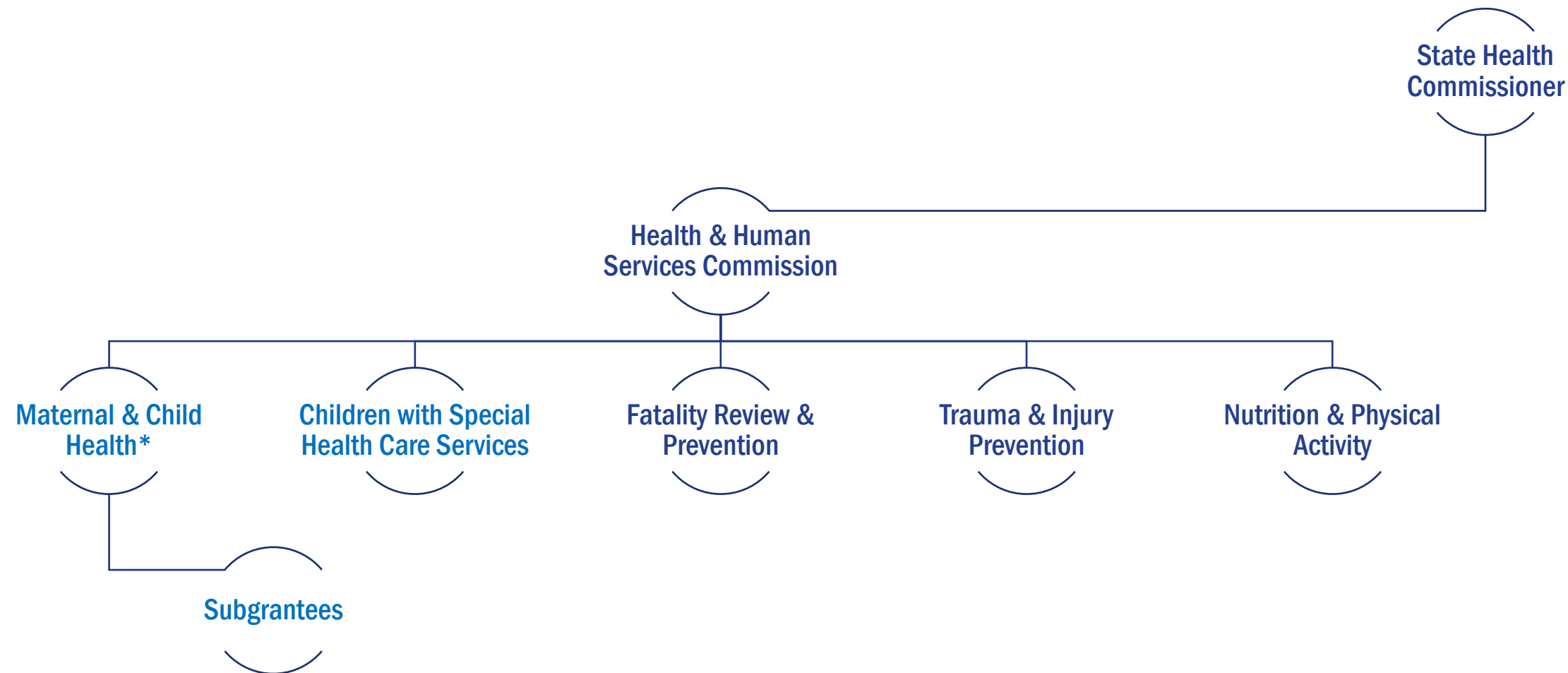
IDOH MCH Title V Team

Core Team

- Eden Bezy, MCH Director
- Kate Schedel, MCH Programs Director
- Mary Ellen Potts, Operations & Evaluation Manager
- Melanie Roberts, Title V Coordinator
- Lindsey Abercrombie, Program Evaluator



Organizational Context – Indiana’s Title V Program



Title V Priorities 2020 – 2025

Reduce Preventable Deaths in the MCH population with a focus on reduction and elimination of inequities in mortality rates



Prevent Substance Use including alcohol, tobacco, and other substances among pregnant women and youth



Promote Physical Activity through policy improvements and changes to the built environment



Access to High-quality, Family-centered, Trusted Care is available to all Hoosiers



Strengthen Mental, Social, and Emotional Wellbeing through partnerships and programs that build capacity and reduce stigma



Engage Families and Youth with diverse life experiences to inform and improve MCH services



Reduce Health Disparities and Inequities in internal programs, policies, and practices to improve maternal and child health

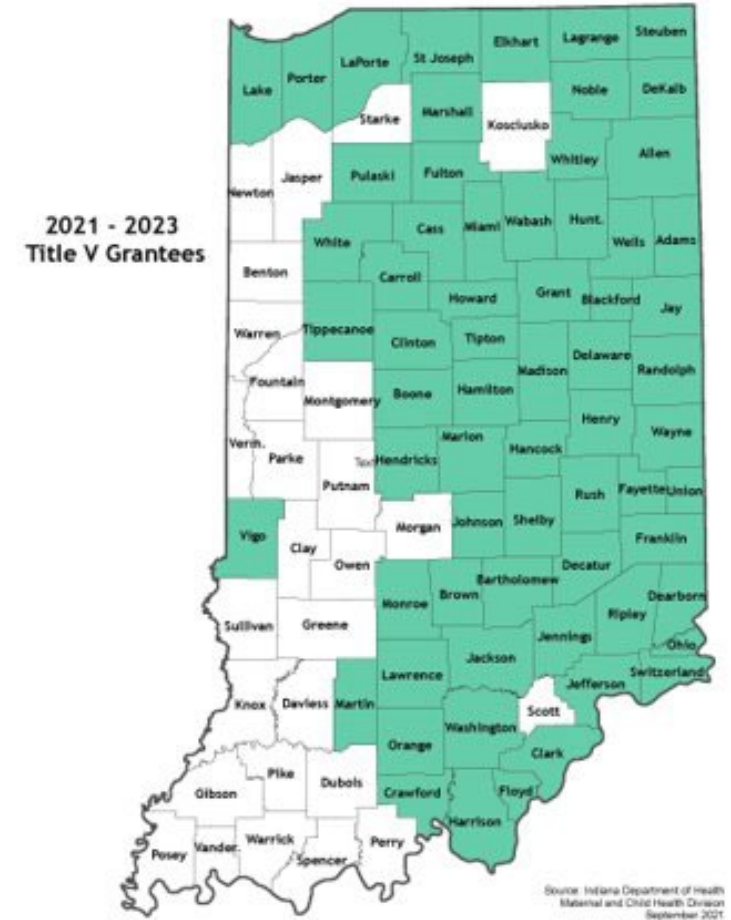


Ensure Frequent Surveillance, Assessment, and Evaluation of data drives funding, programming, and system change



A New Process for Title V Funding

- New Request for Application (RFA) Process modeled the application after AMCHP's Innovation Station Process
- Went from a traditional grant application to a more accessible process
- Overcommunicated: Hosted a Notice of Funding Opportunity Webinar to go over new RFA Process
- Twenty-nine subgrantees selected that span our State Action Plan
 - All were awarded 2-year grants and recently were awarded a 2-year extension – we wanted a long-term investment
 - Two were not refunded as the program was successfully completed/sustainable
 - Some have changed their scope of work or goals



Building Supportive Relationships

- New Sub-Recipient Monitoring Processes
 - Wanted change how we support and build relationships with Grantees
 - Quarterly engagement with grantees
 - In Q1 & Q3: We have 1:1 meetings
 - In Q2 & Q4: Host all grantee meetings
 - Created Quarterly Report Templates
 - Regularly discuss finances and spend
 - Created and utilize listserv to send opportunities to both funded and non-funded partners





Discussion Questions

- How do you create new partnerships?
- How do you find and select grantees?
- How do you show up in your community? (what is your role at the state level)
- Do you have any non-traditional partnerships that you are proud of?

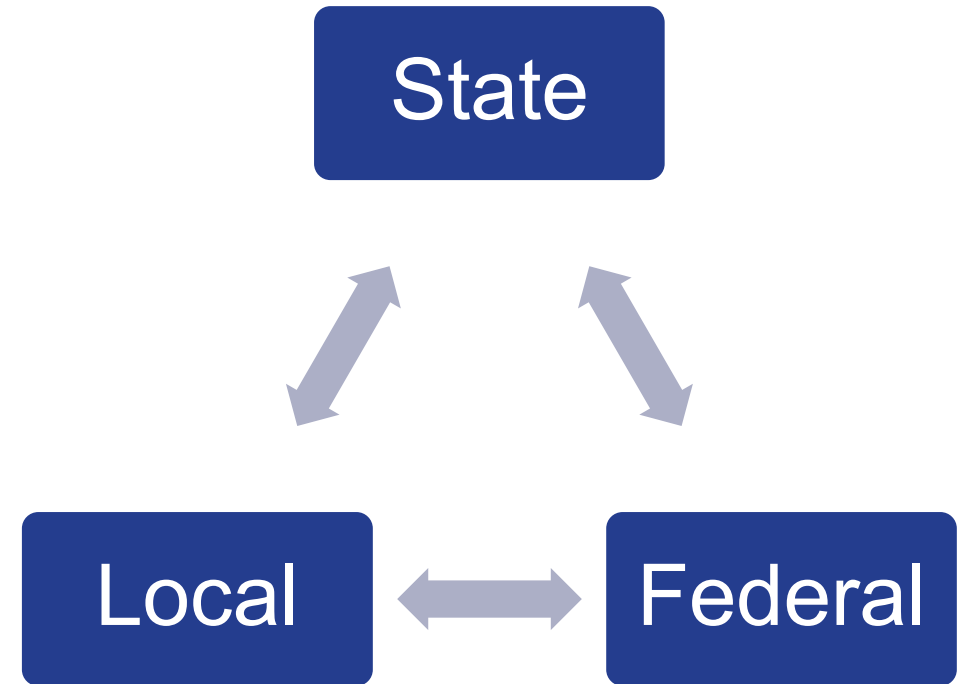
Reporting Template: Demographics

- Update to Quarterly Report Templates to better align with Title V Application reporting including NPMS, SPMS, Cross-Cutting measures

Indiana Department of Health Division of Maternal and Child Health Title V Quarterly Report October 1, 2021 - January 1, 2022										
Name of Organization:	Drug & Alcohol Consortium of Allen County									
Proposed Program:	Stop Suicide Northeast Indiana seeks to strengthen the suicide safety net under youth through providing toolkits, training, and providing peer support to youth having suicide thoughts and attempts.									
Individuals Served by Race and Ethnicity										
Individuals Served	White	Black/African American	American Indian/Native Alaskan	Asian	Multi-Racial	Other/ Unkn	Total Served (Of All Races)	(Total Served not Hispanic)	Total Served Hispanic	Total Served (All Ethnicity)
Women										
Infants (0-1)										
Children (ages 1-9)										
Adolescents (ages 10-21)										
Other (Insert)										
Total										
Individuals Served by insurance type										
Individuals Served	Medicaid (Title XIX)	CHIP (Title XXI)	Private Insurance	Self-Pay	No Source	Unknown Source of Insurance	Total Individuals Served			
Women										
Infants (0-1)										
Children (ages 1-9)										
Adolescents (ages 10-21)										
Other (Insert)										
Total										

Title V Application Reporting

- Utilize data from quarterly reports for Annual Title V Application
- During 2023 review
 - Not placing data correctly in form 5
 - Expand on grantees and their work
- Moving forward:
 - Re-evaluate how grantees are included in the report
 - Implement changes to how form 5 is completed and where data points should be included
 - Prep for new cycle of NPMs and SPMs, grantees, and quarterly reports.



Reporting Template: Continued.

Quarterly Summary

Describe any successes you've seen this quarter.
Did your organization face any barriers when trying to achieve program goals? If not, do you foresee any upcoming challenges?
What have you done to address those barriers?
Describe how are you evaluating your program/initiative and/or how does your project measure impact? (ex: survey responses, attendance/participation, well visits?)
Please describe any other information you would like us to know (Quality Improvement Projects, Staff Changes, Innovative Efforts, etc.)
Do you have a need for any Technical Assistance or Support from IDOH?

Cross Cutting

Family and Youth Engagement
How are you engaging Families and Youth in your work?
Health Disparities and Inequities
How is your program/initiative striving to reduce health disparities and inequities?
Data
Describe efforts/initiatives your organization is doing to improve data collection, surveillance, and program evaluation. Have you shared any program data externally?
Mental, Social and Emotional Health and Well-being
How has your organization strengthened partnerships and built capacity around mental, social, and emotional well-being.
Partnerships
Describe any new partnerships pursued, formed, or changed?

Evaluation

- Current Evaluation Lense:
 - Assessing grantee quarterly reporting system
- Objectives:
 - Enhance Reporting: Assess significance of quarterly reporting metrics
 - Review Data Quality: Evaluate the quality and consistency of data submitted
- Purpose:
 - Enhance content and value of quarterly reports to provide more comprehensive and actionable information for both IDOH and Subgrantees
 - Improve accuracy in completing Title V Annual Application and Report





Discussion Questions

- How do you collect data from grantees for the application without burdening them?
- How do you utilize data from your grantees for the application and to better inform future programming?
- What is the most valuable question or data metric you collect from your grantees?
- Do you have any advice for form 5 & 10 or need additional support for those forms?

Partners and the Needs Assessment



IN IT TOGETHER

Indiana Title V Needs Assessment

- Started with a secondary data analysis
 - Internal partners/other divisions provide data that MCH might not be collecting
 - Asked them to identify health trends
 - Built on what each of our needs are
 - Partner to achieve priorities
- Built a statewide survey
 - Two community-based partners worked to pilot the survey
- Statewide survey is officially LIVE!!
 - Distribution from all partners is important
 - Who we know: groups, individuals, colleges, listserves
 - Who we don't know: try new things with State Library network and BMV
- Focus groups in 2024



Discussion Questions

- What data do you have/anticipate needing this time that you did not have for your 2020 needs assessment?
- How will you continue to engage stakeholders through the priority setting and action planning processes?
- How do you envision sharing this information with your stakeholders?
- For those of you who are new to the Title V needs assessment process, what questions do you want to ask of your peers on this topic?

Utilizing Lessons Outside Title V

- Safety PIN - (Protecting Indiana's Newborns) is a state grant fund that funds programs to reduce infant mortality.
 - Match used for Title V and helps braid MCH work across Title V
 - Aligned Quarterly Reports demographics with the Title V demographics
 - Absorbed FIMR grants from Title V and looking to strategize perinatal programs across funding
- Other MCH Programs
 - Modeled RFAs off the success of the Title V RFA
 - Incorporating subrecipient monitoring strategies
 - Building stronger partnerships
- Indiana is increasing Public Health funding to local health departments known as Health First Indiana.

Health First Indiana

- Now in implementation phase — Health First Indiana
- Historic, FIRST of its kind investment in public health
- Investment in prevention leads to healthier communities and workforce, which attracts businesses and benefits economy
- Brings together local elected officials, public health, clinical health and community partners
- Partnerships allow us to organize care as a community, reduce duplication of services, be more efficient
- Benefits rural communities that often have fewer resources
- Deadline to opt-in was 9/1/23--all but six counties opted in, or 96 percent of Hoosiers will have access to core public health services
- Includes core services directly related to Title V and Indiana's priority measures

Questions?

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