



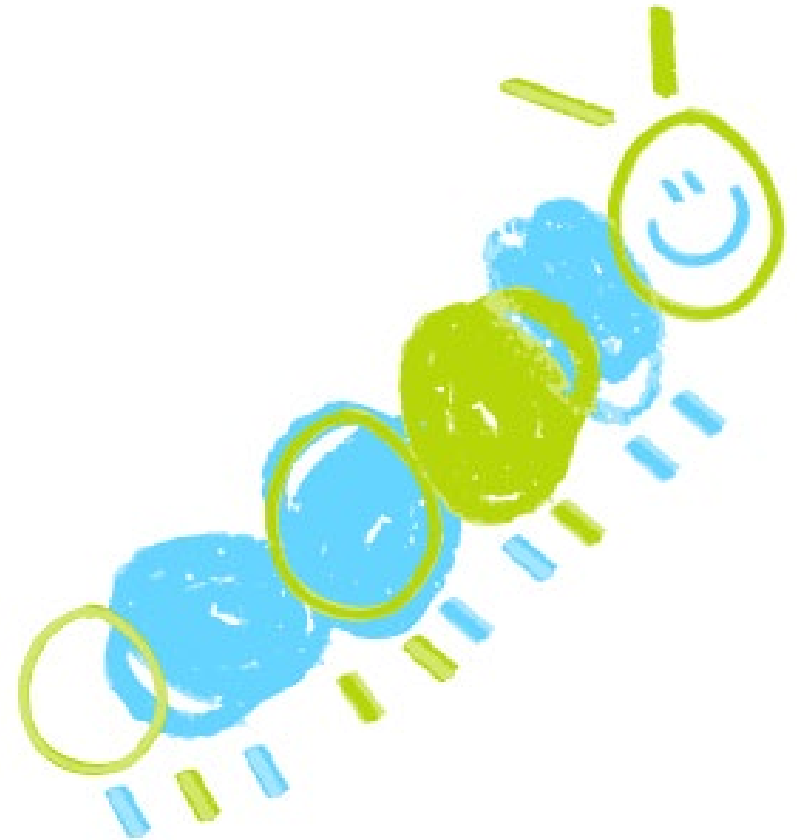
Where do we Begin?!

Aligning for Accelerated Impact on Child Health Outcomes: Opportunities within the Title V Needs Assessment

Anna Corona-Romero, Maura Leahy, and Paige Falion

Session Objectives:

1. **Provide the rationale for why we're talking about alignment** as a critical strategy for achieving impact on child health outcomes
2. **Frame the Title V needs assessment as a critical opportunity** to lay the foundation for new and continuing alignment with other Maternal & Child Health Bureau (MCHB) child health investments



In the next hour, we'll cover:

- ✓ **The three windows of opportunity that exist for Title V programs to align with other MCHB child health investments:**
 1. Shared priorities are baked in
 2. The Title V advantage
 3. It's a needs assessment year!
- ✓ **An approach for leveraging the needs assessment as an opportunity to lay the foundation for alignment with other MCHB investments**
 - i. From partner engagement → action planning
- ✓ **Discussion (if time allows)**



1

Why are we talking about this?

Title V's child health-specific measures align well with the priorities of other MCHB child health investments, creating a window of opportunity to align around a shared purpose. However, gaps in this type of collaboration among MCHB investments still exist (for many reasons!)

Title V Child Health Measures

NOMs (the purpose):

- School readiness
- Flourishing
- Children's health status
- Tooth decay/cavities
- Child mortality
- Child injury hospitalization
- Child obesity
- Behavioral/conduct disorders
- Adverse Childhood Experience

National Outcome Measures	National Performance Measures																				
	Postpartum Visit	Postpartum Mental Health Screening	Postpartum Contraceptive Use	Perinatal Care Discrimination Risk Appropriate	Perinatal Care	Breastfeeding	Safe Sleep	Housing Instability	Developmental Screening	Childhood Vaccination	Preventive Dental Visit	Physical Activity	Food Sufficiency	Adolescent Well-Visit	Mental Health Treatment	Tobacco Use	Adult Mentor	Medical Home	Transition	Bullying	
Severe Maternal Morbidity			X	X				X													
Maternal Mortality	X	X	X	X				X													
Teen Births														X							
Low Birth Weight			X	X				X													
Preterm Birth			X	X				X													
Stillbirth				X	X			X													
Perinatal Mortality				X	X			X													
Infant Mortality		X	X	X	X	X	X	X		X											
Neonatal Mortality				X	X																
Postneonatal Mortality					X	X	X			X											
Preterm-Related Mortality				X	X																
SUID Mortality		X				X	X	X		X											
Neonatal Abstinence Syndrome																					
School Readiness								X	X				X								
Tooth Decay/Cavities											X										
Child Mortality								X		X											
Adolescent Mortality														X	X						X
Adolescent Motor Vehicle Death														X							
Adolescent Suicide														X	X						X
Adolescent Firearm Death														X	X						X
Child Injury Hospitalization		X						X													
Adolescent Injury Hospitalization														X	X						X
Women's Health Status	X	X									X										
Children's Health Status								X	X	X	X	X	X	X	X	X		X			
Child Obesity												X		X							
Postpartum Depression	X	X		X				X													
Postpartum Anxiety	X	X		X				X													
Behavioral/Conduct Disorders								X					X								
Adolescent Depression/Anxiety														X	X		X				X
CSHCN Systems of Care											X			X	X			X	X		
Flourishing								X			X	X	X	X	X		X	X			
Adverse Childhood Experiences								X				X									X

Title V Child Health Measures

NPMs (how we get there):

- Housing stability
- Food sufficiency
- Developmental screenings
- Childhood vaccination
- Preventive dental visit
- Physical activity
- Medical home

National Outcome Measures	National Performance Measures																		
	Postpartum Visit	Postpartum Mental Health Screening	Postpartum Contraceptive Use	Perinatal Care Discrimination Risk Appropriate Perinatal Care	Breastfeeding	Safe Sleep	Housing Instability	Developmental Screening	Childhood Vaccination	Preventive Dental Visit	Physical Activity	Food Sufficiency	Adolescent Well-Visit	Mental Health Treatment	Tobacco Use	Adult Mentor	Medical Home	Transition	Bullying
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Child Injury Hospitalization		X					X												
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Women's Health Status	X	X								X									
Children's Health Status							X	X	X	X	X	X	X	X	X		X		
Child Obesity											X		X						
Postpartum Depression	X	X		X			X												
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Behavioral/Conduct Disorders							X					X							
Adolescent Depression/Anxiety													X	X		X			X
CSHCN Systems of Care										X			X	X			X	X	
Flourishing							X				X	X	X	X		X	X		
Adverse Childhood Experiences							X					X							X

MCHB's child health investments

- Title V MCH and CYSHCN programs
- [Maternal, Infant, and Early Childhood Home Visiting \(MIECHV\) Programs](#)
- [Healthy Start](#)
- Early Childhood Systems (ECS) Programming
 - [Early Childhood Comprehensive Systems \(ECCS\)](#)
 - [Transforming Pediatrics for Early Childhood \(TPEC\)](#)
 - [Infant-Toddler Court Program \(ITCP\)](#)
- [Developmental Behavioral Pediatrics \(DBP\) Training Program](#)
- [Early Childhood Systems Collective Impact Project](#)



Title V



North Stars:
Flourishing
School Readiness
Health Equity

Systems development
Medical home

SDOH

Prenatal visits
Well child visits
Family engagement
Developmental screening
Maternal depression screening
Coordinated intake & referral systems

Tobacco use/cessation

Birth outcomes
Breastfeeding
Child injury
Safe sleep

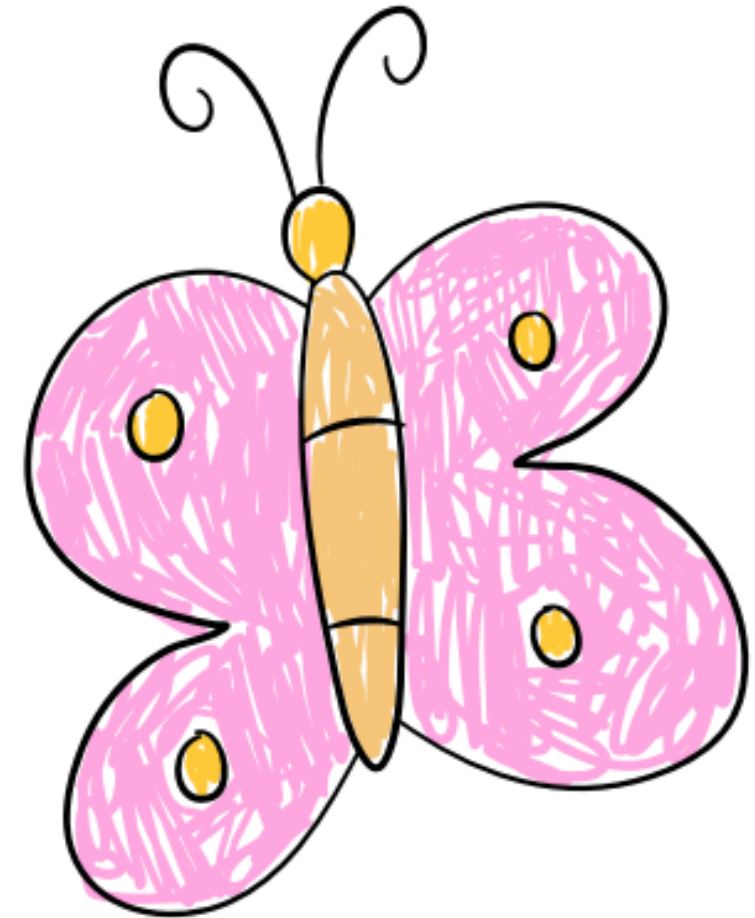
ECCS

MIECHV

✓	Cross systems training and initiatives on breastfeeding, developmental screening, maternal depression screening, and equity	✓	Use integrated early childhood data to drive policy and decision making
✓	Improve identification of pregnancy-related depression and early identification systems for developmental screening and referral	✓	Partner on needs assessment activities for early childhood populations
✓	Partner on community coordination resources, like Help Me Grow, to support systems building, coordination, and alignment	✓	Develop early childhood “hubs” to support local programs and communities
✓	Build or enhance centralized intake and referral systems	✓	Embed a culture of meaningful family and community engagement and co-creation in all early childhood systems building efforts
✓	Develop or enhance integrated early childhood data systems	✓	Develop a strategic plan to guide racial equity in early childhood systems and programs, such as promoting equitable access to, and experience with, developmental health services for young children and families of color

Self-reported facilitators for alignment

- Programs being housed in the same agency
- Interagency agreements
- Regular communications and meetings
- Unified statewide vision
- Shared priorities across grants
- Windows of opportunity
- Braided funding



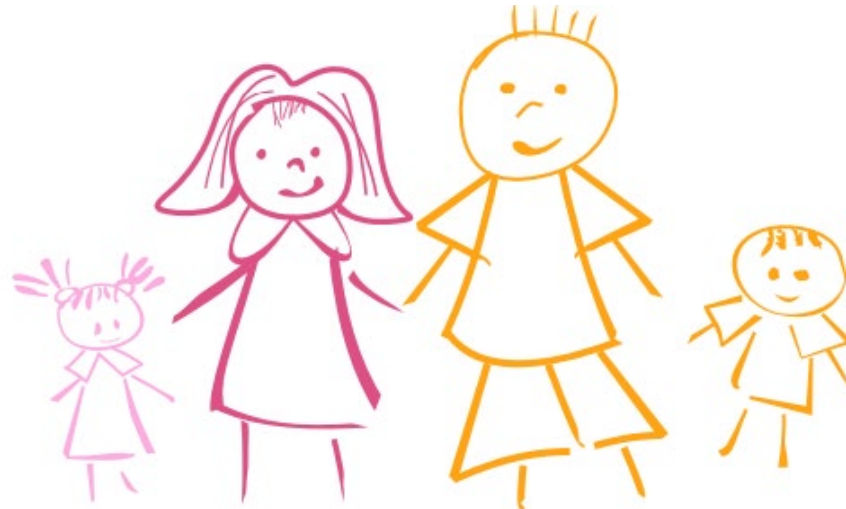
Self-reported barriers to alignment

- Lack of unified vision
- Competition for resources and prioritization
- Data challenges
- Challenging grant structures
- Public health emergencies



This is already happening! BUT the goal is 100%*

- Nearly half report that a statewide vision for child health is in place
- About half report regularly aligning efforts with ECCS projects
- A little over half report regularly aligning efforts with MIECHV projects
- About half report aligning measures and data systems with ECCS
- About a third report aligning measures and data systems with MIECHV



*Data as of Spring 2022

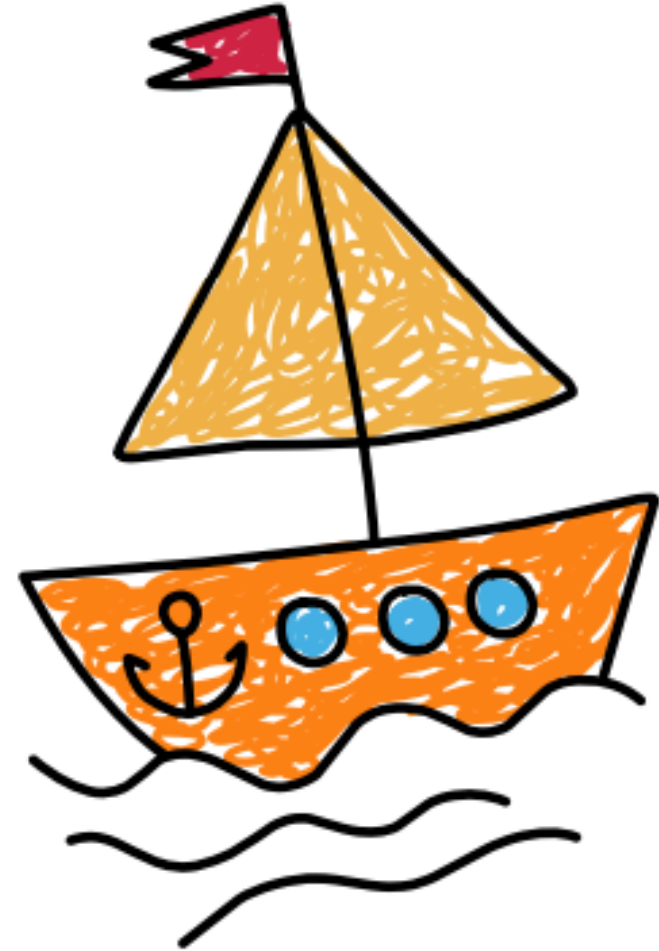
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Why are we talking about this?

Title V programs are well positioned to serve as visionaries for child health in their states/jurisdictions
AND are well positioned to serve as leaders of alignment across MCHB investments (many already do!)

Why is Title V well positioned?

- Relatively consistent resource
- Focus on systems strengthening
- Flexibility of the block grant



3

Why are we talking about this?

It's a Title V needs assessment year and other MCHB investments have their own “needs assessment” type windows of opportunity

State MCH Block Grant Needs Assessment Conceptual Framework



Use this resource!

Instructions and overviews on how to use tools and frameworks that will be helpful to you through each step of the needs assessment.


www.mchneeds.net

TOOLS BY STEP

Finding the Right Tool at the Right Time

These resources help move you from knowledge to practice with your needs assessment work. A list of all tools are presented below, organized by step; specific tools are also repeated on the corresponding Needs Assessment Step page.

You can also access an [alphabetical list of all tools](#). Also, check out new webinars posted to the homepage; from there you can access experts in the field discussing how to use many of these tools.

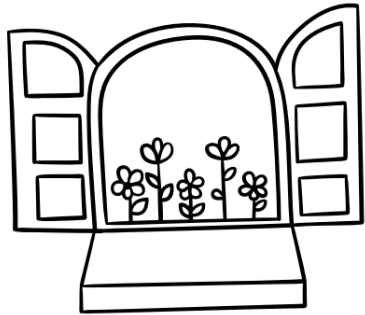


- Q Step 1: Engage Partners
- Q Step 2: Assess Needs
- Q Step 3: Examine Strengths and Capacity
- Q Step 4: Select Priorities
- Q Step 5: Set Performance Objectives
- Q Step 6: Develop Action Plan
- Q Step 7: Seek and Allocate Resources

Aligning for Impact: (1) Engage Partners



- Confirm the child health investments that exist in your state
- Assess your current partnerships, then knock on those metaphorical doors



Did you know?

- ✓ MIECHV programs will soon be allowed to amend their completed needs assessments.
- ✓ ECCS projects are, or soon will be, exploring sustainability plans for their efforts.

Window of opportunity

Aligning for Impact: (2) Assess Needs



Reflect with yourself/your team:

1. What child health investments exist in your state or jurisdiction? Which ones are housed in your agency?
2. What is Title V's strength of partnership with child health investments in your state/jurisdiction?

Reflect with other child health investments:

1. What are their program or project's child health-related priorities?
2. What role do they currently play in the overall early childhood system (direct and/or enabling services, systems strengthening)?
3. What are their windows of opportunity for alignment?

Reflect with other child health investments, families, and communities:

1. Where is alignment/coordination/collaboration working well amongst these investments, especially from the perspectives of families and communities?
2. Where are there major areas of disconnect amongst these investments, especially from the perspectives of families and communities?

Aligning for Impact: (3) Examine Strengths & Capacity

- Is there a clearly identified statewide vision around child health? If not, where is there potential for a shared purpose given each investment's priorities?
- What role does each investment play in child health outcomes?
- What resources does each investment contribute toward child health outcomes?
- Where are there opportunities to better connect the programs, initiatives, and settings that make up the system?





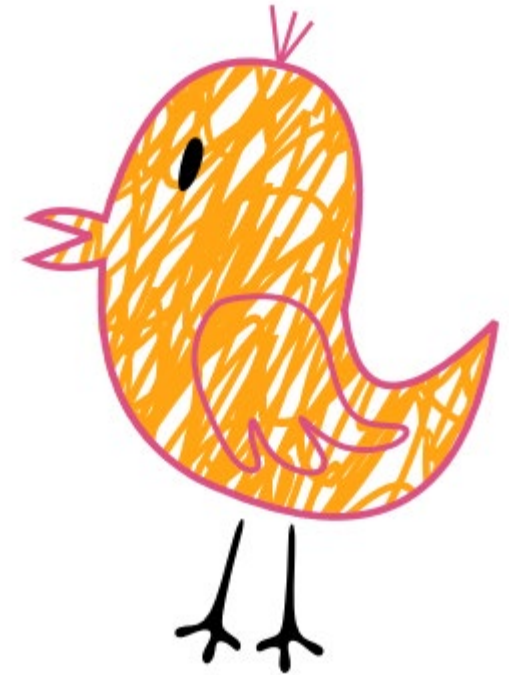
Pay particular attention to who fills these roles:

- The visionary
- The director of the systems approach
- The convener
- The backbone (coordinator)

Aligning for Impact: (4) Priority Selection

Examples of Title V child health priorities, 2020-2025 cycle:

- Increase the number of children who are living in safe, stable, nurturing environments [AK]
- To improve the cognitive, physical and emotional development of all children [Guam]
- Address community and environmental safety for children, youth, and families [NY]
- Strengthen families and communities to assure safe and healthy environments for children of all ages and abilities to live, play, learn, and grow [IL]
- + 14 additional examples!



Aligning for Impact: (5) Set Performance Objectives

Examples of measures from the 2020-2025 cycle

SPMs:

- Percent of children 6 month to 5 years who meet all 4 flourishing items [VT]
- Social and emotional readiness among kindergarteners [WA]

ESMs:

- Percent of children who received a developmental screening through MIECHV (or other home visiting program) [AZ]
- Percent of Medicaid/CHIP recipients receiving a development screen or screening using other EPSDT tool [CT, IA, IL, ME, NV]



Coming soon! AMCHP Resource

- The resource will highlight measures your state can consider selecting to ensure alignment with other child health investments
- Expected January 2025



Aligning for Impact: (6) Develop Action Plan

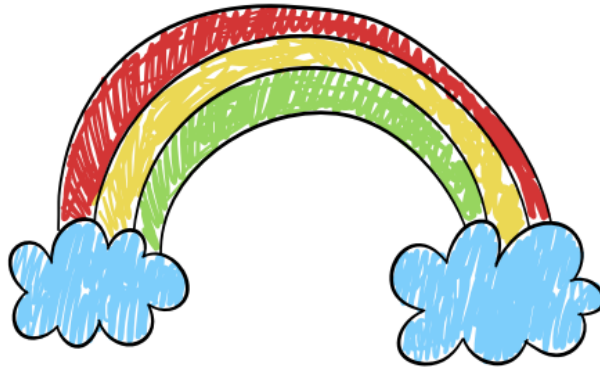
Examples of strategies in most recent block grant applications:

- Provide state leadership and coordination for development of an integrated and comprehensive early childhood system of services and supports through the Early Childhood Comprehensive System project and other related state initiatives. [WA]
- Provide leadership for the State Early Childhood Development and Coordinating Council, a multi-sector body with the mission of supporting and advocating for policies and practices to improve collaboration and coordination among agencies and community partners, to ensure a comprehensive early childhood education and development system. [DC]



The bottom line...

1. What child health outcomes are we, as a group of child health investments, best positioned to make an impact on if we strategically pool our resources?
2. What role is Title V uniquely positioned to play in the effort to achieve our shared purpose?
3. How can we “bake-in” time for strategic, collaborative thinking and coordination of efforts to achieve our intended impact?





AMCHP
ASSOCIATION OF MATERNAL & CHILD HEALTH PROGRAMS



Technical Assistance Opportunity

This winter and spring, AMCHP is offering tailored technical assistance to help align your Title V Needs Assessments with strategies for **equitable, comprehensive prenatal-to-3 systems**.

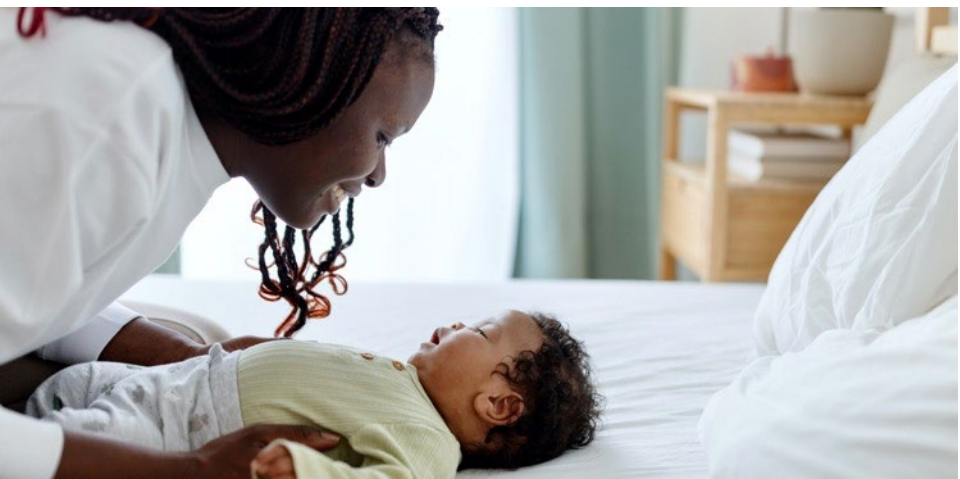


Receive expert guidance through individual or small group sessions. Scan the QR code to express interest and take advantage of this opportunity!



Discussion

1. How has your Title V program aligned with other child health investments in your state or jurisdiction?
2. What successes have you had in your efforts to align with other child health investments in your state or jurisdiction?
3. What challenges have you faced in your effort to align with other child health investments in your state or jurisdiction?



AMCHP

ASSOCIATION OF MATERNAL & CHILD HEALTH PROGRAMS

Thank you!

Reach out to us:

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