

2019
Maternal Child Health Program
and Children and Youth Special Health Care Program
Program Parameters

The Title V Maternal and Child Health (MCH) Services Block Grant creates Federal-State-Local partnerships to develop state and local systems to meet the critical challenges facing women, children and families. Local health agencies and tribal agencies are encouraged to work with community and state partners to achieve common program goals as well as to assure coordination with Regional Centers for Children and Youth with Special Health Care Needs (CYSHCN) as appropriate. States must use at least 30% of Title V Block Grant funds for preventive and primary care programs serving children; and 30% to support programs for children and youth with special health care needs.

Target Populations

The populations to be served are all infants and children, including children and youth with special health care needs, and expectant and parenting families with young children, with a special focus on those at risk for poor health outcomes.

State MCH/CYSHCN Priorities and Performance Measures

The 2015 MCH Needs Assessment led to the identification of MCH/CYSHCN priorities and performance measures for 2016-2020.

MCH Program Priority Areas:

1. Healthy behaviors
2. Safety and injury prevention
3. Mental health factors and healthy relationships
4. Preventive screening and follow-up
5. Health care access and quality
6. Health equity
7. Infrastructure to assure data-informed and policy, environmental, and systems-based strategies

National and State Performance Measures by Population Domain:

- Women/Maternal Health
 - Annual preventive visit
 - Access to contraception
- Perinatal/Infant Health
 - Breastfeeding
 - Safe sleep
 - Perinatal depression
- Child Health
 - Developmental screening
- Adolescent Health
 - Injury (transportation-related and suicide)
 - Annual preventive visit
- Children with Special Health Care Needs
 - Medical home
 - Transition
- Cross-cutting/Life course
 - Smoking (household and during pregnancy)
 - Health equity

Maternal Child Health Program (MCH) Program Parameters: Required Activities

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Local public health departments and tribal agencies receive Title V MCH funds for objectives supporting select MCH National and State Performance Measures. The objectives and strategies outlined for agencies will help measure and accomplish our overall goals related to breastfeeding, safe sleep, child development, adolescent injury prevention, smoking and health equity. LHDs and tribal agencies can use local community health assessments, surveillance data, Wisconsin County Maternal and Child Health Profiles, and other data sources to assist with strategy selection systematic program planning, and policy development to implement and evaluate each selected strategy. (See MCH Objective list with specific strategies for each area of focus).

Required Core Activities Include:

1. Implement and evaluate selected/contracted strategies and activities.
2. Collaborate with community partners.
3. Participate in all quarterly Learning Community meetings/calls.
4. Attend the 2019 MCH/CYSHCN Summit.
5. Report in REDCap quarterly.
6. Exhibit and/or advance knowledge in the following areas: basic quality improvement concepts and terminology, family engagement and leadership, cultural competence, life course theory, Adverse Childhood Experiences ACE's, trauma informed care principles and application including resilience
7. Participate in MCH Program evaluation efforts throughout the contract year.
8. Request technical assistance as needed from the MCH contract administrator.
9. Establish a link to the Well Badger Resource Center website at: <https://wellbadger.org> and provide a voice message for the Well Badger MCH/First Step Resource Line: 1-800-642-7827. Provide new information and referral resources and services to Well Badger.
10. All materials for public distribution developed by a grantee funded by the Title V MCH Block Grant must identify the funding source as follows: **"Funded in part by the MCH Title V Services Block Grant, Maternal and Child Health Bureau, Health Resources and Services Administration, U.S. Department of Health and Human Services."**
11. **FEDERAL MCH MATCH:** Report 75% match in GAC **AND** in CARs using the Community AIDs Reporting System Expenditure Report (F-00642) form by January 31st 2020. Please use profile ID # **193002**. (See example below)

DEPARTMENT OF HEALTH SERVICES Division of Enterprise Services F-00642 (06/2016)	COMMUNITY AIDS REPORTING SYSTEM (CARS) EXPENDITURE REPORT			STATE OF WISCONSIN
INSTRUCTIONS: 1. Report expenses in whole dollar amounts. No formulas. 2. See Contract for current Agency Number and Agency Type. 3. Complete one line per profile.	<input type="checkbox"/> Original Report <input type="checkbox"/> Additional Report <input type="checkbox"/> Final Report			Office Use Only
	Agency Number	Agency Name		Date entered in CARS
	Agency Type	Agency Contact Person	DHS Contract Administrator	Operator Initials
	Report Period (mm/yy)	Agency Contact Phone Number	Agency Contact Email Address	
Profile Name	Profile Number	Current Net Expense	CTD (Contract to Date) Expense	Comments
MCH Match	193002		Add Match Dollars	Required FED Match
CYSHCN Match	193001		Add Match Dollars	Required FED Match

Note: Tribal Agencies are exempt from Federal match requirements.

Federal Match Requirement

Grantees who receive federal funds must provide 75% match (\$0.75 local contribution for every \$1.00 federal) for all Title V MCH Block grant funds. Agencies that do not meet their MCH match requirements may be subject to repayment of awarded grant funds.

Children and Youth Special Health Care Program (CYSHCN) Program Parameters: Required Activities

The Wisconsin MCH Title V Program funds five Regional Centers for CYSHCN, 5 statewide hubs of expertise, and quality improvement grants to tribal health centers and health-care practices (through the Wisconsin Medical Home Initiative).. Objectives and strategies support national performance measures for CYSHCN which are medical home and youth transition to adult health care. In addition, there is a focus on strengthening youth/family/consumer engagement and leadership. (See CYSHCN objectives list with specific strategies).

Required Core Activities Include:

1. Staffing minimum: a project director and parent staff member. Parent(s) in a leadership administrative capacity is strongly encouraged.
2. Assure all staff is orientated to develop the knowledge and skills for advancing professional skills, knowledge and understanding in the following areas: Wisconsin children with special health care needs survey data, quality improvement concept and terminology, medical home and youth health transition model and concepts, Got Transition domains, family engagement and leadership, CYSHCN standards, cultural competence, disability and healthcare disparities, health equity, life course theory and application (including trauma informed principles and application including resilience), and population health. See attached list of links to information for each of the knowledge areas.
3. Attend/participate in Network Directors Meetings, Information & Referral Specialists call, Transition Learning Community, Advancing Care Coordination Learning Community calls, REDCap Data and Reporting Group, Training Institute and other required trainings.
4. Collaborate with the CYSHCN Statewide Coordinator to identify issues and discuss technical assistance needs. (Additional training activities and or education planning shall be done in collaboration with the state CYSHCN state staff).
5. Regional Center staff complete an annual ABC for Health's Health Benefits Competency assessment as well as an assessment of NPM content.
6. In consultation with the DHS CYSHCN Program, serve in leadership roles on statewide committees and boards to advance and promote awareness of CYSHCN mission and goals.
7. 2
8. Maintain an agency webpage including a link to the Well Badger Resource Center website at: <https://wellbadger.org>, and to the [CYSHCN Networks of Support for Families one-pager](#). Provide a voice message for the Well Badger MCH/First Step Resource Line: 1-800-642-7827 when not in the office.
9. Attend the 2019 QI Grant Project Summit.
10. Attend the 2019 MCH/CYSHCN Summit.
11. Report in REDCap quarterly, participate in mid-year review and produce an EOY Report.
12. All materials for public distribution developed by a grantee funded by the Title V MCH Block Grant must identify the funding source as follows: "Funded in part by the MCH Title V Services Block Grant, Maternal and Child Health Bureau, Health Resources and Services Administration, U.S. Department of Health and Human Services."
13. FEDERAL CYSHCN MATCH: Report 75% match in GAC AND in CARs using the Community AIDs Reporting System Expenditure Report (F-00642) form by January 31st 2020. Please use profile ID # 193001. (See example below)

DEPARTMENT OF HEALTH SERVICES Division of Enterprise Services F-00642 (06/2016)	COMMUNITY AIDS REPORTING SYSTEM (CARS) EXPENDITURE REPORT			STATE OF WISCONSIN	
	<input type="checkbox"/> Original Report	<input type="checkbox"/> Additional Report	<input type="checkbox"/> Final Report	Office Use Only	
INSTRUCTIONS: 1. Report expenses in whole dollar amounts. No formulas. 2. See Contract for current Agency Number and Agency Type. 3. Complete one line per profile.	Agency Number	Agency Name		Date entered in CARS	
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Professional and Workforce Development Information and Resources

Trauma Informed Care

<https://www.samhsa.gov/nctic/trauma-interventions>

Quality Improvement Concepts and Terminology

Basis understanding of the Model for Improvement Institute for Healthcare Improvement Resources – How to Improve pages describe the Model for Improvement

<http://www.ihl.org/resources/Pages/HowtoImprove/default.aspx>

National Institute for Children’s Health Quality – Model for Improvement <http://static.nichq.org/quality-improvement-101/>

Family Engagement and Leadership

Core Competencies of Family Leaders: A Guide for Families and Organizations

<http://en.calameo.com/books/0004943210506b6cd7fee>

Patient and Family Engagement: A Framework For Understanding The Elements And Developing Interventions And Policies <https://www.healthaffairs.org/doi/abs/10.1377/hlthaff.2012.1133>

AUCD Family Competencies

https://www.aucd.org/template/news.cfm?news_id=114&parent=119&parent_title=Family&url=/template/page.cfm?id%3D119

DHS Civil Rights Compliance

<https://www.dhs.wisconsin.gov/civil-rights/index.htm>

Health Equity

HRSA Office of Health Equity <https://www.hrsa.gov/about/organization/bureaus/ohe/>

NACCHO Health Equity and Social Justice <http://www.naccho.org/programs/public-health-infrastructure/health-equity>

HRSA: Foundational Practices for Health Equity

<http://www.health.state.mn.us/divs/opi/healthequity/resources/coiin-hrsa-foundational.html>

Cultural Competence

National Center for Cultural Competence <https://nccc.georgetown.edu/resources/title.php#C>
HRSA: Culture, Language and Health Literacy <https://www.hrsa.gov/culturalcompetence/index.html>

Life Course Theory and Application

HRSA MCH Life Course Resource Guide <https://mchb.hrsa.gov/training/lifecourse.asp>
AUCD Life Course Perspective: <http://www.aucd.org/template/page.cfm?id=768>

Population Health

David Kindig's 2003 population health article <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1447747>

CYSHCN Regional Center Specific Resources

Wisconsin Children and Youth with Special Health Care Needs Survey Data

National Survey for CSHCN (Data Resource Center for Child & Adolescent Health -2016:
Percent of CSHCN: <http://childhealthdata.org/browse/survey/results?q=4562&r=51&r2=51>

Wisconsin CSHCN National Performance Measures: <http://childhealthdata.org/browse/survey>

Medical Home Model and Concepts

Wisconsin Statewide Medical Home Initiative <http://www.wismhi.org/WiSMHI-home>
National Center for Medical Home Implementation: <http://www.medicalhomeinfo.org>

Youth Health Transition Concepts and Got Transitions Domains

Health Transition Wisconsin <http://www.healthtransitionwi.org>
Got Transitions <http://www.gottransition.org>

Family Experience in health care:

In Their Own Words: Improving the Care Experience of Families with Children with Special Health Care Needs, June 2015: <http://www.lpfch.org/publication/their-own-words-improving-care-experience-families-children-special-health-care-needs>

Patient Engagement in Redesigning Care from Center for Patient Partnerships
<https://www.hipxchange.org/PatientEngagement>

CYSHCN Standards

Developing Structure and Process Standards for Systems of Care Serving Children and Youth with Special Health Care Needs: A White Paper from the National Consensus Framework for Systems of Care for Children and Youth with Special Health Care Needs Project, March 2014
<http://cyshcnstandards.amchp.org/app-national-standards/#/>

Disability and Health Disparities

Healthiest Wisconsin 2020 Baseline and Health Disparities Report – People with Disabilities
<https://www.dhs.wisconsin.gov/hw2020/baseline.htm>

Centers for Disease Control Disability and Health

<http://www.cdc.gov/ncbddd/disabilityandhealth/index.html>

National Center on Birth Defects and Developmental Disabilities, Centers for Disease Control and Prevention

<https://www.cdc.gov/ncbddd/index.html>

<https://www.cdc.gov/ncbddd/connect/index.html>

Other CYSHCN Training Resources

Federal MCHB supported MCH Navigator located at Georgetown University

<http://mchnavigator.org/trainings/cyshcn.php>