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# MCH Title V Annual Plan Technical Assistance Webinar

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# Webinar Agenda

- Welcome
- Brief recap of Title V Annual plan requirements
  - Implementation Guideline
  - Title V priorities and strategies (overview)
- Measure Development
  - Sample measures
- Process and tools for plan development:
  - Planning worksheet
  - MCH Title V strategies table (detail)
- Q&A
- How to complete the Annual Plan form and a sample plan
  - Annual plan template and sample
- Q&A
- Next steps and resources for additional help
  - Title V resources handout

# Oregon MCH Title V Annual Plans

- All local Title V grantees will submit an annual plan by April 1<sup>st</sup> 2016 reflecting how they intend to use their Title V funds for State FY 2017 (July 1, 2016 – June 30, 2017)
- Title V annual plans will align with
  - Oregon Title V priorities and strategies
  - Title V implementation Guidelines

# MCH Title V Priorities: 2016-2020

National Priorities	State Priorities
Well women care	Toxic Stress, trauma ACES
Breastfeeding	Culturally and linguistically responsive services
Physical activity for children	Food insecurity
Adolescent well visit	
Oral health	
Smoking	

# Implementation Guidelines- Priority Selection

Title V Funding level	Minimum # of priorities
Less than \$25,000 per year	1
\$25,000 - \$99,999 per year	2
\$100,000 or more per year	3

# Implementation Guidelines: Strategy Selection

- Strategy Selection
  - Encouraged to use a variety of strategies from menu of options to address priorities
  - Grantees working on more than one priority and/or strategy must select at least one strategy at the community, institutional, or societal level

Level of influence	Examples (spectrum of prevention)
<b>Individual/relationship level</b>	<b>Strengthening individual knowledge and skills</b>
<b>Community level</b>	<b>Promoting community education; fostering coalitions or networks</b>
<b>Institutional level</b>	<b>Changing organizational practices, educating providers</b>
<b>Societal level</b>	<b>Influencing policy and legislation</b>

# Implementation Guidelines: use of Title V funds

- At least 30% must be used for child or adolescent health
- No more than 10% for indirect costs
- Up to 20% of Title V funds can be used for locally-identified MCH work that falls outside of Oregon's Title V priorities and/or strategy menu if approved by OHA
- Can be used to contract with other programs or agencies

# Development of Measures

- Grantees must develop at least one measure per selected strategy.
- Measures can relate to a specific activity, or more broadly to a strategy.
- Measures should assist you in tracking your progress towards addressing the priority areas.
- Measures can be a rate (such as a percentage), or a simple count.
- Numerators and denominators must be specified if the measure is a rate.
- If the measure is only a count, such as the number of trainings provided, numerators and denominators do not need to be defined.

# Sample Measures

Priority Area	Strategy	Activity	Measure	Numerator (if applicable)	Denominator (if applicable)
Breastfeeding	Education/training of health care providers about breastfeeding.	Ensure local staff meets minimum competency and skills in lactation care and support training and continuing education.	Percentage of staff who care for pregnant and postpartum women, who meet minimum competency in lactation care.	Number of staff who care for pregnant and post-partum women, who meet minimum competency for lactation care.	Number of staff who care for pregnant and post-partum women.
Child Physical Activity	Support physical activity in child care settings through policy, training and workforce development.	Promote and/or deliver specialized training to child care providers on increasing physical activity in child care.	Percentage of child care providers in county/tribe who have received specialized training on increasing physical activity in child care.	Number of child care providers in county/tribe who have received specialized training on increasing physical activity in child care.	Number of child care providers in county/tribe.

(Enter) DEPARTMENT (ALL CAPS)  
 (Enter) Division or Office (Mixed Case)

# Sample Measures, cont.

Priority Area	Strategy	Activity	Measure	Numerator (if applicable)	Denominator (if applicable)
Oral Health	Provide oral health services, education and referral/case management services through Oregon's Home Visiting System.	Provide pregnant women with oral health education through Oregon's Home Visiting System.	Percentage of pregnant women provided with oral education by Oregon's Home Visiting System.	Number of pregnant women oral health education by Oregon's Home Visiting System.	Number of pregnant women receiving services from Oregon's Home Visiting System.
Smoking	Collaborate w/CCOs, DCOs, and medical and early childhood/education providers to build screening and intervention processes into their work practices, including workforce training.	Organize/provide 5As and motivational interviewing training for CCOs, DCOs, early learning hubs, and/or medical and early childhood/education providers.	Number of training activities for CCOs, DCOs, early learning hubs, and/or medical and early childhood/education providers.	N/A	N/A

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 (Enter) Division or Office (Mixed Case)

**Key components of 2016 MCH Title V Block Grant plans:  
Priority areas, strategies, activities and measures**

**Priority areas**

Grantees funded at less than \$25,000 per year are required to work on a minimum of 1 priority areas; \$25,000-\$99,000 per year a minimum of 2 priority areas; \$100,000 or more per year a minimum of 3 priority areas.

**National priority areas**

All grantees must select at least one.

**State priority areas**

These can be selected once at least one national priority area has been selected.

**Locally identified priority areas**

Grantees can use up to 20% of Title V funds on these, which can be selected once at least one national priority area has been selected.



**Strategies**

**National priority strategies**

Grantees must identify at least one strategy for each priority they have selected to work on.

Strategies are selected from the lists provided.

If needed, grantees may use the 20% flexible funds to develop additional locally-defined strategies once at least one of the listed strategies has been selected.

**State-specific and locally identified priority strategies**

Grantees must identify at least one strategy for each priority they have selected to work on.

Strategies are developed by local grantees.



**Activities and measures**

Grantees must develop activities and target populations for each of their chosen strategies.

Grantees must develop at least one measure per selected strategy. These measures can relate to a specific activity, or more broadly to the strategy. Measures should provide a way for the grantee to track progress on the identified strategy/activity.

# MCH Title V Planning Worksheet: Breastfeeding

**Strategies** (see strategy table for more details and examples of activities associated with these strategies)

1. Increase the number of fathers, non-nursing partner and family members, especially grandmothers, who learn about the importance of breastfeeding
2. Fill unmet needs for peer support of breastfeeding
3. Education/training of health care providers about breastfeeding
4. Education of pregnant women about breastfeeding
5. Increase the availability of breastfeeding support from professionals
6. Increase access to workplace breastfeeding support
7. Increase the support of breastfeeding at child care settings through policy, training, and workforce development
8. Advocate for program policies that support breastfeeding

What strategy do you plan to implement? (from the list above)	What is the need in your community that this strategy addresses?	What activities will you do to implement this strategy in your community?	What populations will be impacted?	How will you measure your progress? (see sample measures)	Where will you get the data to report on your measure?

# Questions?



# Completing the MCH Annual Plan template

- The MCH annual plan is to be completed and submitted electronically by April 1st. Submit completed plans to: [Kalii.P.Nettleton@state.or.us](mailto:Kalii.P.Nettleton@state.or.us)
- Annual Plan Template can be found:
  - in the e-mail “MCH Title V Plan instructions” sent on February 16
  - On the MCH Title V website: <http://Healthoregon.org/titlev>
- Note: Tribal and LHA plan templates are slightly different, so please use the appropriate one for your type of agency.
- Questions? Contact [Maria.N.Ness@state.or.us](mailto:Maria.N.Ness@state.or.us)

# Sample MCH Annual Plan

# Questions?



# Next Steps

- MCH Annual plans are due April 1, 2016. The period covered by the plan is July 1, 2016 – June 30, 2017.
- Complete your plan using the electronic template provided.
- Instructions for completing the plan are on the plan template.
- Once you have completed your plan, save the file with your agency's name in the file extension and email the finished plan to: [Kalii.P.nettleton@state.or.us](mailto:Kalii.P.nettleton@state.or.us).
- See Title V TA Resources handout for Title V staff contact information and additional resources. Information will also be posted on the MCH Title V website: <http://Healthoregon.org/titlev>
- Don't hesitate to reach out to us with questions.

# Additional questions and comments?

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