MCH Training: A Context for Leadership

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Goals

- Participants will understand:
 - an overview of HHS / HRSA / MCHB / DRTE and the Training Program Portfolio
 - MCH leadership training as a context for and catalyst to assure national MCH impact
 - MCHB Training Program priorities



Objectives

- Upon completion of the session,
 participants will be able to successfully:
 - Describe how their MCH training relates to HHS, HRSA, MCHB, DRTE & key personnel
 - Articulate roles of the Title V Block Grant
 Program and MCH Training Program
 - Identify MCH leadership competencies as a framework for their MCH training
 - Describe MCHB Training Program priorities



Getting to Here...

"Do not follow where the path may lead. Go instead where there is no path and leave a trail."

~Ralph Waldo Emerson



Getting to Here...

"When I grow up..."



Getting to Here...

- Moments are meaningful
 - Learn from past
 - How you came to be an MCH trainee
 - Mindful of present
 - Here now context for MCH professional – "the big picture"



The BIG Picture

The President

The Secretary of HHS

HRSA Administrator

Associate Administrator for MCH

Division of Research, Training & Education!



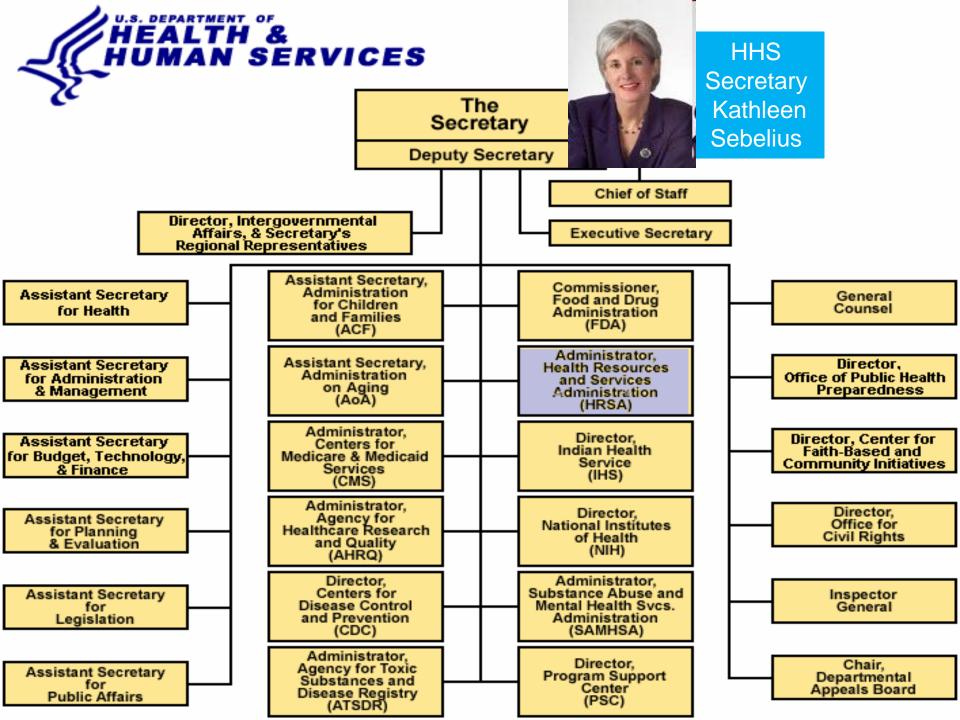












Health Resources and Services Administration

HRSA is the nation's access agency – improving health and saving lives by making sure the right services are available in the right places at the right time.



HRSA Administrator Dr. Mary Wakefield

HIV/AIDS

Primary Health Care

Healthcare Systems

Clinician

Recruitment

Health Professions

Maternal & Child Health (MCHB)

& Service

Rural Health



HRSA Bureaus

www.hrsa.gov

- Bureau of Health Professions
- HIV/AIDS Bureau
- Bureau of Primary Health Care
- Healthcare Systems Bureau
- Maternal and Child Health Bureau

http://www.mchb.hrsa.gov



Dr. Peter van Dyck Associate Administrator for Maternal & Child Health Bureau

MCHB

Office of Data and Program Development Michael Kogan, PhD

Division of Child, Adolescent and Family Health David Heppel, MD

Division of Research, Training and Education Laura Kavanagh, MPP





Division of State and Community Health Cassie Lauver, ACSW

Division of Services for Children with Special Healthcare Needs Bonnie Strickland, PhD

Division of Healthy Start and Perinatal Services



MCHB Strategic Plan Mission

- "To provide national leadership and to work, in partnership with states, communities, publicprivate partners, and families to:
 - strengthen the MCH infrastructure
 - assure the availability & use of medical homes
 - build knowledge and human resources in order to assure continued improvement in the health, safety and well-being of the MCH population

MCH Population

- "The MCH population includes all America's:
 - women
 - infants
 - children
 - adolescents
 - their families, including women of reproductive age, fathers, and children with special health care needs(CSHCN)"



MCHB Strategic Plan Goals

- Provide national leadership for maternal and child health
- Eliminate health disparities
- Assure the highest quality of care
- Facilitate access to care



Understanding MCH Services: Title V



Division of State & Community Health (DSCH)



Mission of the Division of State & Community Health

"To work, in partnership with States, primarily through the Title V block grant, communities, and grantees to assure continued improvement in the health, safety and well-being of the MCH population."



Federal Title V Program: Partnership with States / Jurisdictions

- Has operated as a Federal-State partnership via passage of the Social Security Act (1935)
 - Through Title V of SSA
 - Federal support of State efforts for health and welfare services for mothers and children.
- Title V converted to a block grant program as part of the Omnibus Budget Reconciliation Act (OBRA) of 1981.
- Government Performance & Results Act (GPRA) 1989
 - States required to report progress on key MCH indicators & program capacity



Federal Title V Program: Partnership via Title V Block Grants

- Each state / jurisdiction (59 total)
 develops a plan / Block grant application
 annually to describe their:
 - MCH relevant populations & their needs
 - current organizational & program capacity for services
 - proposed use of MCH funds (including federal & state)
 - current progress on performance measures
 - state priorities & plan to assess progress



Federal Title V Program: Partnership via Title V Block Grants

- All State MCH programs work to do the following:
 - Reduce infant mortality
 - Increase appropriate child immunizations
 - Increase the number of children in low-income households who receive assessments and follow-up diagnostic and treatment services
 - comprehensive perinatal care for women
 - preventative and child care services;



Title V Block Grants to States / Jurisdictions

- All State MCH programs work to facilitate the development of:
 - comprehensive
 - family-centered
 - community-based
 - culturally competent
 - coordinated
- systems of care for children with special health care needs (CSHCN)



HOW???

- Who assures, develops, provides, and evaluates all of these efforts on behalf of the MCH population???
 - The "MCH workforce"
- Who assures an MCH workforce specifically trained to meet the needs of the MCH population???
 - The MCH Division of Research, Training & Education (DRTE)



MCHB DRTE Funding

- Special Projects of Regional & National Significance (SPRANS)
 - SPRANS--enhance major purposes of State formula grants
 - Training, Education & Research fall under SPRANS category
- Combating Autism Act (2006)
 - Training & Research support





MCH Training Program

The MCH Training Program seeks to train the next generation of leaders who will provide or assure the provision of quality services for the MCH population.



MCH Training Program

- Quality services for mothers, children and adolescents require professionals who are:
 - Attuned to the special needs of children, adolescents and CSHCN;
 - Trained to provide or assure the provision of interdisciplinary, family-centered, and culturally competent services;
 - Focused on improving the health of the entire population, with a focus on diversity.



2005-2010 MCH Training Program: Goals

- The goals of the MCH Training Program are focused on:
- Training for MCH Competencies
- Supporting MCH Workforce Diversity
- Ensuring Interdisciplinary Training
- Enhancing MCH Leadership
- Supporting Knowledge to Practice
- Collaborating with Others



MCH Training Program: Funding

- Annual Budget \$45.9 million
- 132 Active Projects
 - *at 73 universities
 - *in 39 States & DC



MCH Training Program: Program Types

10 categories of long term training

- LEAH
- Communication Disorders
- Developmental-Behavioral Pediatrics
- LEND
- Nursing
- Nutrition
- Pediatric Dentistry
- Pediatric Pulmonary Centers
- Schools of Public Health
- Social Work



MCH Training Program: Program Types

6 categories of continuing education

- Continuing Education
- Distance Learning
- Certificate in Maternal and Child Health
- Collaborative Office Rounds
- MCH Institute
- MCH Pipeline



MCH Training Programs, FY 09







www.mchb.hrsa.gov/autism



Amaternal Child Health Bureau - Combating Autism

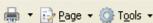


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Live Search







U.S. Department of Health and Human Services Health Resources and Services Administration



SEARCH

GRANTS

FIND HELP

SERVICE DELIVERY

DATA

HEALTH SYSTEM CONCERNS

ABOUT HRSA

Combating Autism

"This \$42 million effort, HRSA's implementation of the Combating Autism Act of 2006, addresses some of the most urgent issues affecting people with autism and their families. A national evaluation also will be conducted to report to Congress on progress related to Autism Spectrum Disorders and other developmental disabilities.

The evaluation will contribute to the U.S. Department of Health and Human Services Secretary's Report to Congress on progress related to Autism Spectrum Disorders and other developmental disabilities as required by the Combating Autism Act of 2006.

Funded Activities

- Training for Professionals
- State Demonstrations and **Policy**
- Autism Intervention Research <u>Networks</u>

- Increasing awareness;
- Reducing barriers to screening and diagnosis;
- Supporting research on evidence-based interventions for children and adolescents with Autism Spectrum Disorders or other developmental disabilities;
- Promoting evidence-based guideline development for interventions: and
- Training professionals to utilize valid screening tools to diagnose and to provide evidence based interventions.

About Autism

- HHS Autism Information (U.S. Department of Health and Human Services)
- Autism Spectrum Disorders (National Institutes of Health)
- Autism Research at NICHD (National Institutes of Health)
- Autism Information Center (Centers for Disease Control and Prevention)

Combating Autism Act

- Combating Autism Act: Public Law 109-416 (PDF - 49 KB)
- Interagency Autism Coordinating Committee (U.S. Department of Health and Human Services)



www.aucd.org

Where we are now...

- So far...
 - MCHB Training Program context within DRTE / MCHB / HRSA / HHS
 - Role of MCHB & Title V Block Grant Program in maternal and child health
 - Focus on Training Program responsibility to assure a workforce to meet MCH needs
- Yet to travel...
 - MCH Leadership
 - Preparing interdisciplinary MCH leaders
 - You are the leaders...we are the leaders.



MCHB Training Goal 4: Enhancing MCH Leadership

- Develop effective MCH leaders.
- Strategies:
 - Ensure that MCH training in all disciplines includes leadership skills
 - Improve recruitment into MCH training programs
 - Identify people who have potential to provide leadership in MCH and foster their development



MCH Leadership: Context & Catalyst

- Leadership in Maternal and Child Health is about connections that:
 - include and result in products, but are not just the products
 - utilize the MCH leadership competencies, but are not just the competencies
 - have a measurable impact, but are not just the measurable impact
 - are more about the process, the verb in connecting – not the noun



MCH Leadership Competencies: Purpose

- MCH Leadership requires specific knowledge, values, personal characteristics and skills
 - some intrinsic
 - some to be taught and developed with experience
- MCH Training programs must ensure the necessary foundation for leadership development that lasts a lifetime



MCH Leadership Competencies: History

- Necessary framework / definition in order to evaluate MCH leadership and MCH leadership training
- Part of National MCH Training Program Strategic Plan 2005-2010
- Multi-year process resulted in release of MCH Leadership Competencies Version 2.0 (2007)
 & current Version 3.0 (2009)



MCH Leadership Competencies: Framework

- MCH Leadership is complex due to:
 - areas of leadership
 - variety of disciplines and settings
- There are degrees of leadership and what leadership looks like is a developmental process
 - Life-long journey, not a destination



MCH Leadership Competencies: Framework

- Developmental approach
 - no one person is expected to have all knowledge and skills across all of the competencies
 - strive toward ongoing development during career
- Goal is to build teams of MCH leaders where all competencies are well represented



MCH Leadership Competencies: Framework

- MCH leaders build expertise upon base of discipline specific and MCH specific knowledge
- Expand skills and influence in ever widening circles
- Spheres of MCH competencies are series of concentric circles (influence grows)
 - Self / Others / Wider community



MCH Leadership Competencies: Self

Self

- MCH Knowledge Base
- Self-reflection
- Ethics and Professionalism
- Critical Thinking



MCH Leadership Competencies: Others

Other Individuals

- Communication
- Negotiation & Conflict Resolution
- Cultural Competency
- Family-centered Care
- Developing Others Through Teaching & Mentoring
- Interdisciplinary Team Building



MCH Leadership Competencies: Wider Community

Wider Community

- Working with Communities and Systems
- Policy and Advocacy



MCH Leadership Competencies: In Practice

- Each MCH Leadership Competency
 - described by associated knowledge
 - basic and advanced skills
- Taken together, the 12 MCH Leadership Competencies define what is to be an MCH leader



Questions to Consider

- Do I want to be an MCH leader?
- Why do I want to be an MCH leader?
- What makes an MCH-trained leader different than another professional?
- What led me to here?
- What path will I create in MCH and what trail will I leave?



MCHB Training Branch Priorities

Paths to Travel,
Paths to Create...



MCHB Training Branch Priorities:

- Impact / visibility of training programs regionally & nationally
- Cultivating Trainee Voice / Direct connection to MCHB Training Branch & Training Network
- Creative Partnerships that impact Maternal & Child Health
- Inter-professional Education (IPE) / Interdisciplinary Leadership
- Life Course Perspective & Practice
- MCH Leadership Development
- National Strategic Plan for MCH Training



Summary

- MCH Trainees are part of the Training Branch within DRTE & MCHB & HRSA & HHS
- The MCH Workforce assures Title V / MCH Services for the MCH population
- MCH Training Programs assure a specially trained MCH workforce
- MCH Leadership development assures the competency necessary for the field to meet needs now and into the future



Summary

- You are a part of the Training Branch within DRTE & MCHB & HRSA & HHS
- You are becoming part of an MCH training network of MCH trained alumni and faculty
- You are challenged to develop an identity and a legacy as an MCH leader



Summary

- What paths will you travel with other MCH trained leaders?
- What paths will you create on behalf of the MCH population?
- What trail will you leave?

Comments / Questions

