



HRSA

Health Resources & Services Administration



Title V MCH Block Grant Program

VIRGINIA

State Snapshot

FY 2016 Application / FY 2014 Annual Report

April 2016

Title V Federal-State Partnership – Virginia

The Title V Maternal and Child Health Block Grant Program is a federal-state partnership with 59 states and jurisdictions to improve maternal and child health throughout the nation. This Title V Snapshot presents high-level data and the executive summary contained in the FY 2016 Application / FY 2014 Annual Report. For more information on MCH data, please visit the Title V Federal-State Partnership website (<https://mchb.tvisdata.hrsa.gov>)

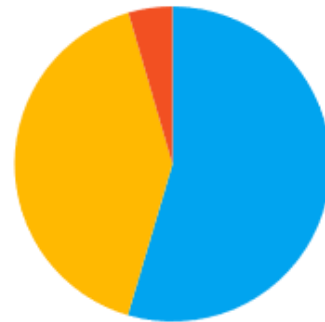
State Contacts

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Funding by Source

Source	FY 2014 Expenditures
Federal Allocation	\$12,025,842
State MCH Funds	\$9,019,382
Local MCH Funds	\$0
Other Funds	\$991,958
Program Income	\$0

FY 2014 Expenditures



Funding by Service Level

Service Level	Federal	Non-Federal
Direct Services	\$1,606,772	\$2,624,137
Enabling Services	\$7,160,900	\$1,689,109
Public Health Services and Systems	\$3,258,170	\$5,698,094

FY 2014 Expenditures Federal



FY 2014 Expenditures Non-Federal



Total Reach of Title V in Serving MCH Populations

Populations Served	Individuals Served	FY 2014 Expenditures	%
Pregnant Women	14,512	\$2,424,128	11.5%
Infants < 1 Year	101,683	\$1,846,731	8.8%
Children 1-22 Years	46,044	\$7,289,059	34.6%
CSHCN	6,776	\$7,230,543	34.4%
Others *	58,540	\$2,254,761	10.7%
Total	227,555	\$21,045,222	100%

FY 2014 Expenditures



FY 2014 Individuals Served



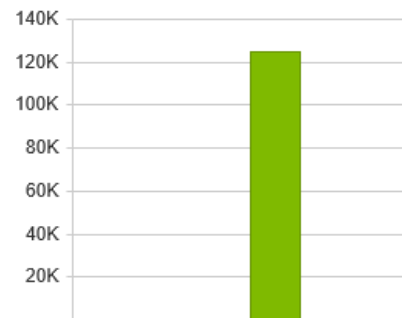
*Others– Women of childbearing age, over age 21, and any others defined by the State who are not otherwise included in any of the other listed classes of individuals.

Selected National Performance Measures

Measure #	Measure Short Name	Population Domain
NPM 2	Low-Risk Cesarean Delivery	Women/Maternal Health
NPM 4	Breastfeeding	Perinatal/Infant Health
NPM 5	Safe Sleep	Perinatal/Infant Health
NPM 7	Injury Hospitalization	Child Health, Adolescent Health
NPM 8	Physical Activity	Child Health, Adolescent Health
NPM 11	Medical Home	Children with Special Health Care Needs
NPM 12	Transition	Children with Special Health Care Needs
NPM 14	Smoking	Cross-Cutting/Life Course

Communication Reach

Communication Method	Amount
State Title V Website Hits:	0
State Title V Social Media Hits:	0
State MCH Toll-Free Calls:	124,563
Other Toll-Free Calls:	0



Executive Summary

I.E. Application and Annual Report and Executive Summary

The Title V Maternal and Child Health (MCH) Block Grant funds are used to improve the health of women, infants, children, and adolescents with and without special health care needs in the Commonwealth of Virginia. While MCH programs are available to all women, infants and children, emphasis is placed on women of childbearing age, low income populations and those who do not have access to health care. Section 32.1-77 of the *Code of Virginia* authorizes the Virginia Department of Health (VDH) to prepare and submit to the U.S. Department of Health and Human Services the state Title V plan for maternal and child health services and services for children with special health care needs and the Commissioner of Health is authorized to administer the plan and expend the Title V funds.

Virginia's FY 2015 Title V Block Grant allocation is approximately \$12.0 million. Federal law mandates that at least 30 percent of the funds be spent on services for children and youth with special health care needs (CYSHCN) and at least 30 percent be spent on preventive and primary care services for children. In accordance with federal requirements, Virginia conducted a comprehensive statewide needs assessment and has designed an implementation plan informed by that process.

Children & Youth with Special Health Care Needs (CYSHCN)

VDH's CYSHCN program provides services to youth and their families from birth to 21. Youth are eligible for services if they have, or are at increased risk for, a chronic physical, developmental, behavioral, or emotional condition and who also require health and related services of a type or amount beyond that required by children generally. The services provided to this vulnerable population consist of care coordination services and developmental and behavioral assessments. To maximize federal funding and make it easier to link families to care, most of the CYSHCN programs are provided in partnership with major health care systems or universities. The CYSHCN program supports coordination of care for children and families with diseases such as cystic fibrosis, diabetes, sickle cell anemia, hemophilia, cerebral palsy, etc. It also helps to fund the early diagnosis of complex behavioral and developmental conditions that require in-depth assessments of children that most pediatricians or family practice clinics are not equipped to provide. During FY 14, the CYSHCN program provided services to more than 6,700 families.

Two of the premier CYSHCN programs that are supported by Title V funds are the Care Connection for Children (CCC) program and the Child Development Center (CDC) program. The CCC is a statewide network of six centers of excellence located regionally throughout the state of Virginia. Most of the centers operate within major medical centers where the families served have easy access to specialty providers. The hallmark service of the CCC centers is care coordination that helps to reduce or eliminate the barriers that family's face when trying to access services. This may include but is not limited to: medical insurance benefit evaluation and referral (to include Medicaid); linkage to a primary care provider/medical home; information and referral to needed resources; family to family support via parent coordinators; support from the VA Department of Education via state educational consultants; connection to appropriate specialty services; and access to a pool of funds for families who are underinsured or uninsured and have no other means for obtaining life preserving medications and durable medical equipment. During FY 14, the CCC program served more than 3,000 families. In FY16, VDH will undertake an analysis of the program to assess overall program performance and financial sustainability.

The CDC program serves families with children who are suspected of having behavioral or developmental disorders such as autism, ADD/ADHD, learning disabilities, anxiety/PTSD, mood disorders, etc. Each center provides multi-disciplinary assessments of each child, diagnoses, and short term care coordination with families to link them to needed services that are beyond the capabilities of most primary care providers. During FY 14, five regional centers of excellence in the Commonwealth were formed from merging smaller statewide centers. During the year, the CDC program served more than 2,000 clients and this resulted in more than 3,400 diagnoses and close to 5,000 referrals for additional services. In FY16, VDH will undertake an analysis of the program to assess overall program performance.

FY 2015-2020 Needs Assessment Priorities

[The FY 2016 MCH Needs Assessment](#) served as an essential tool to reflect on system changes and examine the health status of Virginia's families. Although there have been improvements in some areas, there continue to be disparities based on race, income, age, insurance coverage and geographic distribution of resources across the state. These variations continue to present challenges to improving maternal and child health. Based on the assessment, the following MCH priorities were identified and will provide guidance for MCH related activities and funding during FY 2015 – FY 2020:

1. Decrease tobacco use in pregnant women and household smoking.
2. Increase number of infants who are ever breastfed as well as exclusively breastfed for 6 months.
3. Decrease low-risk cesarean deliveries in pregnant women less than 39 weeks.
4. Increase safe sleep practices and number of infants placed on their backs to sleep.

5. Improve access to health care services and use of medical home for children with and without special health care needs.
6. Promote independence and transition of young adults with and without special health care needs.
7. Increase physical activity in children and adolescents.
8. Reduce injuries, violence, and suicide among the Title V populations.

FY 2016 – Selected Planned Activities for Children and Youth with Special Health Care Needs (CYSHCN)

- Strengthening family partnerships is a key objective for all CSHCN programs. Families will serve on all CSHCN advisory boards.
- The Child Development Clinics, the CCC centers, and the Virginia Bleeding Disorders Program (VBDP) will refer all potentially eligible children to Medicaid, FAMIS, PCIP, compassionate use, and SSI programs and follow-up with families to assure that their applications are processed. Program staff will also educate clients regarding their insurance options including insurance offered through the Affordable Care Act.
- The Care Connection for Children (CCC) network of six Centers of Excellence will provide information and referrals to resources, care coordination, family-to-family support, and assistance to families of CSHCN.
- CCC staff will pursue national case management certification.
- The CCC centers will survey families to determine their satisfaction with the services and make necessary changes to better meet family needs.
- The systematic approach to care, “Care Coordination Notebook – Financing and Managing Your Child’s Health Care” will be used and updated as needed to reflect changes resulting from the Affordable Care Act.
- The CCC and the VBDP will partner with the Virginia Dental Program to improve access to dental care and promote dental homes for CSHCN.
- The Child Development Centers will provide multidisciplinary diagnostic evaluations of children suspected of having developmental and/or behavioral disorders.
- The VBDP will provide coordinated, family-oriented, multidisciplinary services for persons with bleeding disorders. The VBDP will support families who infuse at home, and maintain a strong network of social workers to help families meet their insurance needs.
- The Virginia Early Hearing Detection and Intervention Program (VEHDIP) will work closely with hospitals and physicians to ensure that all infants have hearing screens and timely follow-up. VEHDIP will promote the use of the web-based trainings on VEHDIP 1-3-6 goals for otolaryngologists, audiologists, early intervention providers and primary medical providers.
- The Hearing Aid Loan Bank will provide gap-filling services to families of children with hearing loss.
- The Sickle Cell Program will provide information about the disorder to the public and health care professionals and offer screening, referral, counseling and follow-up services to Virginians at risk for sickle cell disease.
- The CCC, VBDP and the Sickle Cell program staff will assist families in developing transition plans. The CSHCN staff is developing a 1-2 page transition checklist that care coordinators and physicians can use to help families develop their transition plans. A meeting with CCC program directors, physician consultants and the parent resource coordinators statewide will be held in the spring to discuss the implementation of the transition checklist.

FY 2016 – Selected Planned Activities for Pregnant Women and Infants

- The Virginia Healthy Start Initiative (VHSI), the Maternal, Infant and Early Childhood Home Visiting projects and the local health department maternity and family planning clinics will screen women for tobacco use during pregnancy and the inter-conception period and will refer women to the Virginia Quitline for smoking cessation counseling.
- VDH and key community partners will offer a web-based training course in lactation management and a web-based performance improvement initiative (www.BFConsortium.org) to promote and support exclusive breastfeeding.

- VDH and communities partners will work with hospitals in Virginia to encourage them to apply for the 10 step program to become “breast feeding friendly”.
- VHHA, VDH, ACOG, and other partners will continue implementation of a quality improvement program in hospitals to decrease early elective deliveries.
- The local health departments that provide prenatal care will provide education regarding the signs and symptoms of preterm labor and healthy nutrition.
- VDH will continue to provide Text4Baby messages in English and Spanish to educate and support pregnant women about actions they can take to improve birth outcomes.
- Local health departments will offer pregnancy testing, counseling and referral for prenatal care.
- To reduce the risk of neural tube defects, local health departments will provide folate at no charge to women of reproductive age who receive services at health department clinics.
- VHHA, VDH, and other partners will work through a quality improvement program in the birthing hospitals throughout the Commonwealth to educate families about safe sleep practices. First steps include establishing a written protocol, data gathering tool, and safe sleep training to increase safe sleep programming within the labor delivery units.
- The Virginia Maternal Mortality Review Team will review maternal deaths to assess the community systems of care and identify system changes that may prevent future pregnancy-associated deaths.

FY 2016 – Selected Planned Activities for Children

- Title V Block Grant funds will continue to support local health department services that address obesity, injury prevention, children’s dental health, and childhood immunizations.
- VDH will continue to collaborate with multiple state and local partners to help reduce rates of uninsured individuals. VDH will integrate outreach and referral activities into program efforts and continue to participate in the state mandated Children’s Health Insurance Advisory Committee.
- Title V Block Grant funds will continue to support the Virginia Youth Survey and other surveillance activities that provide information that may be used to monitor changes in health status, and to measure progress towards goals in improving children’s health.
- The State Child Fatality Review Team will continue to examine the specific circumstances of child death and make recommendations for prevention of child injury and violence.

For further detailed information on the activities funded by the Title V block grant in Virginia contact Jennifer O’Brien at Jennifer.obrien@vdh.virginia.gov.