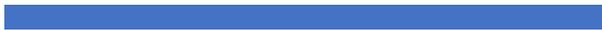


# Title V MCH Internship

## 2018 State Application



National **MCH** Workforce  
Development Center  
Advancing Health Transformation



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\*Click on each state agency name to jump to that state project.

## Alabama Department of Public Health, Division of Perinatal Health Division

### **Project Description:**

In 2017, two MCH Title V MCH interns began to develop a Toolkit focused on addressing the social determinants of health (SDOH) to reduce infant mortality. In summer 2018, the interns will continue this effort.

### **Objectives:**

Objective 1: Align the tool kit to be more directly related to Maternal and Child Health

Objective 2: Investigate the generational impact of key SDOH indicators on the overall health of the MCH population in Alabama

Objective 3: Identify promising practices in addressing SDOH issues in the MCH population in other states.

### **Skills required for the project(s):**

Microsoft Word

Microsoft Excel

Microsoft PowerPoint

Literature Review Skills

Qualitative Methods (Analysis)

Communication Skills

Presentation Skills

### **Deliverables or products:**

Present the findings to key ADPH stakeholders and MCH Title V Director. Develop a plan to address the SDOH in the MCH population in Alabama. Develop and present educational resources.

### **Preceptors:**

Title MCH Epidemiologist Supervisor

Title MCH Epidemiologist Assistant

Title MCH Coordinator

### **Is there affordable temporary housing available for the students near your agency or affordable housing easily accessible by public transportation?**

Yes

### **What is the typical cost of a short-term rental or sublet near your agency?**

Above \$1301/per person for the entire summer

### **Is your state agency easily accessible by public transportation?**

No

While transportation may not be easily accessible, there are options available. The commute through public transportation might require up to two hours one way depending on the transportation options. It is preferred that the student has their own vehicle.

Also, based upon a google search, the one way uber cost from Auburn University Montgomery to the work site is \$20-26 for an uberX and \$32-42 for an uber XL. The one way cab estimate is approximately \$23.82 and the Montgomery transit offers single ride (\$2), weekly pass (\$18) and monthly pass (\$45) options. The following is a link to the Montgomery Transit website: <http://montgomerytransit.com/fares/>

**Housing Resources:**

Auburn University Montgomery, Alabama State University, Huntingdon College, Faulkner University. We are requesting that the students begin June 11, 2018 - August 3, 2018. This will allow them to finish their internship before the Montgomery colleges begin their fall semesters.

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# Alaska Department of Public Health, Section of Women's, Children's, and Family Health

## **Project Description:**

The students will work on two projects focused on early childhood development. In addition, to these projects described below, interns may choose to select an additional mentored experience including shadowing a maternal and child health (MCH) subject matter expert and completing a relevant mini- project of their choosing, developed in collaboration with the appropriate WCFH program manager. Examples of MCH topical areas are reflected in Alaska's Title V national and state performance measures, including focus on women's health, breastfeeding, child maltreatment, adolescent health, Children and Youth with Special Health Care Needs (CYSHCN), reduction of infant mortality and/or data analysis within our MCH Epidemiology Unit. Below, the two major projects are described.

1. The Early Childhood Comprehensive Systems (ECCS) project is funded through a federal Health Resources and Services Administrations (HRSA) grant. Alaska's ECCS work focuses on five Critical Components to improve children's developmental health and family wellness: Collective Impact, Continuous Quality Improvement (CQI)- using the Collaborative Improvement and Innovation Network (CoIIN) model), Help Me Grow (HMG), Strengthening Families, and technical assistance for service providers. The CoIIN work takes place within the three place-based community (PBC) teams (Norton Sound Region, Matanuska-Susitna Borough, and Kodiak Island). Along with the ECCS Program Manager, with guidance and technical support from HRSA, community teams use a CoIIN national technical assistance center and a cross-state learning community to enhance and integrate early childhood services and improve childhood developmental health through collaborative partnerships across agencies, organizations and programs at the community, regional and state level. Each community builds on existing networks to form and participate in a CoIIN to gain knowledge of continuous quality improvement and the CoIIN process. Using the resources gained through the CoIIN, and with existing Collective Impact structures already in place, the communities are developing and implementing a two-generation approach to improve children's developmental health in their communities. ECCS is a new grant for Alaska's Title V agency, as program implementation began within WCFH in May 2017. In addition, the Help me Grow call center will be launched in January 2018, providing the interns insight into formative public health programming.

The students will learn about children's developmental health and family wellness while working closely with Title V staff including the ECCS Program Manager and the ECCS CoIIN Data Lead. Together they will meet regularly with ECCS partners such as the statewide Developmental Screening Task Force and Help Me Grow staff to strategize data collection and sustainability planning, etc. The MCH students will work directly with ECCS grantees to create a newsletter that highlights their efforts and accomplishments of the place based community (PBC) teams to spread awareness of activities and importance of developmental screening. The student will also participate in NICHQ (National Institute for Children's Health Quality) technical assistance/learning session conference calls. This will provide students with opportunities to practice quality improvement through rapid cycles tests of change, collection of data to measure program progress, and will introduce systems change through collective impact theory. There will also be opportunities for the student to collaborate with HMG on provider outreach activities; researching evidence based screening training for rurally based health aides for developmental screening, and preliminary data analysis of HMG client data for specific ECCS data measures.

2. The Parents as Teachers (PAT) model is an evidence-based home visiting model designed to support parents as their child's best first teacher. The cornerstone of the PAT model are personal visits by trained parent educators which includes a focus on parent-child interaction, development-centered parenting and family well-being. PAT utilizes the Strengthening Families framework and promotes parental resilience, knowledge of parenting and child development; and social and emotional competence of children. PAT educators also conduct developmental screenings and coordinate needed referrals to services. The State of Alaska funds three PAT affiliates, which implement programs in the communities of Haines, Kake, Kodiak, Anchorage, and Juneau. WCFH coordinates training, continuous quality improvement (CQI) projects, and performance measure development for these affiliates. These efforts assist PAT

affiliates in their mission to provide Alaskan families high quality services and one-on-one engagement, as well as with a network of community support.

The students will learn about Parents as Teachers and other evidence-based home visiting models. They will utilize existing and new performance measures to develop a range of materials for PAT affiliates. The purpose of the materials is to spread awareness of PAT programs and highlight the benefits to Alaskan children and families. Potential consumers will be families that are eligible for PAT services, groups that might refer families to PAT, and the state lawmakers that approve PAT funding. In addition, the student will work directly with the PAT grantees to first gain an understanding of their perceived programmatic strengths and weaknesses, then use that insight to help develop a CQI project. If the student is interested and has the skillset, there is the potential for a data analysis project looking at outcomes such as child maltreatment and child development among children enrolled in PAT programs and other children in Alaska.

Both of these projects are directly related to National Performance Measure (NPM) 6 “Percent of children, ages 10 through 71 months, receiving a developmental screening using a parent-completed screening tool”. Both ECCS and PAT serve to address Alaska’s state priority to increase and access preventative health care services to Alaskans and their families and reduce the rate of child maltreatment.

PAT and HMG are implemented in diverse Alaskan settings. There will likely be opportunities for interns to accompany program staff on site visits to better understand program implementation at the community level.

**Objectives:**

Objective 1: (ECCS) To support the Early Childhood Comprehensive Systems (ECCS) Program Manager in publication development and quality improvement activities.

- Work directly with the three Place Based Communities (PBC’s) to create a newsletter that highlights the efforts and accomplishments of the PBC teams to spread awareness of activities and importance of developmental screening.
- Participate in NICHQ (National Institute for Children’s Health Quality) technical assistance conference calls
- Meet regularly with the statewide Developmental Screening Task Force
- Create infographics and other easily consumable publications specifically to be used on social media platforms related to child development and evidence based screening tools
- Collaborate with Help Me Grow (HMG) on activities mentioned above
- Optional: If student has GIS experience or is interested in learning GIS, there will be opportunity to use GIS storyboards software to create community specific materials.

Objective 2: (PAT) To support Parents as Teachers Program Manager in sustainability planning efforts and publication development.

- Meet with program managers and PAT grantees for input on essential components of materials to be developed
- Develop a range of materials for legislature, potential clients, and referral agencies
- Discuss programmatic strengths and weaknesses with PAT grantees and assist in the development of a Continuous Quality Improvement (CQI) project to address identified needs.
- (optional/potential) Conduct data analysis to compare outcomes for PAT children with other children PAT communities.

**Skills required for the project(s):**

- Microsoft Word
- Microsoft Excel
- Microsoft PowerPoint
- Qualitative Methods (Analysis)
- Facilitation Skills
- Survey Development
- Synthesis of Information
- Communication Skills

Presentation Skills

Other -- publication design, GIS (optional)

**Deliverables or Products:**

1. Interview ECCS Project Leads (3) to create a newsletter highlighting the activities of each ECCS community and share resources and challenges related to implementing ECCS or one of its five critical components to improving children's developmental health and family wellness.
2. Use MCH Epi Surveillance Data to create a one-page fact sheet/infographic related to the Strengthening Families 5 protective factors that can be used by the ECCS community outreach staff.
3. Use PAT Performance Measures to develop: a) three fact sheets with community specific data for grantees; and, b) one Alaska-wide fact sheet highlighting PAT data and accomplishments to share with the Alaska State Legislature.
4. Document strengths and weaknesses of the PAT programs and identify opportunities for continuous quality improvement. Assist data manager in the development of an initial Plan-Do-Study-Act (PDSA) cycle.

**Preceptors:**

Title Health Program Manager II

Title Epidemiology Specialist II

**Is there affordable temporary housing available for the students near your agency or affordable housing easily accessible by public transportation?**

Yes

**What is the typical cost of a short-term rental or sublet near your agency?**

\$701-\$900/per person

**Is your state agency easily accessible by public transportation?**

Yes

**Housing Resources:**

UAA Summer Housing: <https://www.uaa.alaska.edu/about/administrative-services/departments/business-services/housing/summer.cshtml>

Anchorage Rent/Buy/Sell Housing Facebook Group: <https://www.facebook.com/groups/963861360318656>

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## Illinois Department of Public Health, Office of Women's Health and Family Services

### **Project Description:**

The Title V internship students will assist with three strategic assessment activities to support improvements to school health centers (SHC) in Illinois. The purpose of an SHC is to improve the overall physical and emotional health of school age children and youth by promoting healthy lifestyles and providing accessible preventive health care. The Illinois Department of Public Health (IDPH) School Health Program monitors 66 certified school health centers operating in Illinois for compliance with state rules related to SHCs. SHCs are key strategic partners involved in four of the ten priorities in Illinois' Title V Action Plan: medical home for children, adolescent health behaviors, youth transition services, and mental health. SHCs are an integral part of the system of healthcare for children and adolescents, including provision of well-child visits, immunizations, risk screenings, and mental health services. SHCs are particularly relevant as a source of care for adolescents, and are a component of the key strategies Illinois is using to improve Title V National Performance Measure (NPM) #10 (adolescent well-visit rate) and NPM #12 (youth transition services). As process measures for these NPMs, the state will be monitoring SHC outputs related to adolescent well-visits and provision of transition readiness assessment services.

The main project to be jointly completed by the two students will involve implementing an evaluation plan to assess SHC services for adolescents. The objective of this evaluation is to identify facilitators and barriers to the provision of high-quality adolescent services in SHCs, including assessments of adolescent-friendly care, compassionate care for LGBT youth, and ability to conduct readiness assessments for the transition to adulthood. The evaluation plan will be developed through the CDC Harvard Evaluation Practicum during January 2018 and will likely involve both qualitative and quantitative components. Students will jointly carry out the components of this evaluation plan and develop an evaluation report that highlights key findings and program recommendations.

In addition, each student will take primary responsibility for one of the two projects below that address other assessment needs of the school health program:

- a) Statewide needs assessment to identify areas of high-need for new SHCs. This assessment will involve identifying, compiling, and synthesizing local-level data to demonstrate geographic areas with poor health outcomes for children and adolescents. Such data can be used by state and local stakeholders to target communities that may benefit from an SHC.
- b) Development of a report card template to compile performance measure data on existing SHCs throughout the state. The Illinois School Health program has recently developed a plan for monitoring performance of SHC services based on national recommendations related to the quality of care, and SHCs are now submitting data on performance indicators. The student will develop a template for organizing the performance measure data in comparison to state and national standards, and for providing feedback to the SHCs on their performance.

Throughout the project, mentors will identify components of the projects appropriate to each student's skillset and experience. The graduate student will have leadership and project management responsibilities for ensuring timely completion of the project tasks, in addition to leading advanced tasks, such as synthesis of information and development of program recommendations. The undergraduate student will complete tasks related to information gathering, organization, and summarization. During the internship, data and epidemiology support will be available the Office of Women's Health and Family Services (OWHFS) epidemiology team.

**Objectives:**

Objective 1: Employ program evaluation principles to assess barriers to and facilitators of high-quality SHC adolescent health services.

Week 1: Review SHC program materials to become familiar with SHC services and standards; review evaluation plan created through 2018 CDC-Harvard evaluation practicum; discuss evaluation components and methods with program preceptors; develop implementation plan

Weeks 2-7: Implement components of evaluation plan; ensure consistent and well-documented collection of data through qualitative and quantitative mechanisms

Weeks 8-9: Work with preceptors to develop recommendations for SHC improvements based on findings of evaluation plan

Objective 2: Identify, analyze, and synthesize data to support programmatic needs.

Week 1: Understand programmatic needs of School Health program

Weeks 2-6: Identify internal and external data sources that include relevant local data on child and adolescent health; compile community-level health data; discuss methods and findings with OWHFS epidemiology staff

Weeks 7-8: Summarize community health data in meaningful formats; Develop methods for synthesizing multiple health indicators or ranking community health needs

Objective 3: Communicate findings and recommendations to key stakeholders

Weeks 1-3: Engage in meetings with mentors, program staff, and stakeholders to learn about needs and expectations for the products

Weeks 4-6: Develop feedback loops with mentors and program staff to obtain ongoing feedback about format and contents of final products

Weeks 7-8: Begin development of products, including written report(s) and PowerPoint presentation

Week 9: Finalize reports and project products; give oral presentation to IDPH-OWHFS staff

Student should have strong skills in organizing and synthesizing information. The needs assessment project would most likely not entail any direct data analysis, but would be more about gathering existing county-level data and organizing it. For example, visiting America's County Health Rankings and pulling out relevant adolescent health indicators and compiling those data into some sort of summary for Illinois counties.

**Skills required for project(s):**

Microsoft Word  
Microsoft Excel  
Microsoft PowerPoint  
Program Evaluation  
Literature Review Skills  
Community Assessment  
Qualitative Methods (Implementation)  
Qualitative Methods (Analysis)  
Synthesis of Information  
Communication Skills  
Presentation Skills

**Deliverables or Products:**

- Evaluation Report (student 1 & 2)
- Needs Assessment Summary (lead = student 1)
- Performance Report Card Template (lead = student 2)
- Oral Presentation for IDPH Staff (student 1 & 2)

**Preceptors:**

- Title Deputy Director, OWHFS
- Title CDC MCH Epidemiology Assignee
- Title School Health Administrator

**Is there affordable temporary housing available for the students near your agency or affordable housing easily accessible by public transportation?**

Yes

**What is the typical cost of a short-term rental or sublet near your agency?**

\$901-\$1100/per person

**Is your state agency easily accessible by public transportation?**

Yes

**Housing Resources:**

- Many local universities may have sub-lease websites, including: Roosevelt University, Colombia College, DePaul University, University of Illinois at Chicago, Loyola University, University of Chicago, etc.
- Dwight Lofts offers summer student housing by the week: <http://www.sterlinghousing.com/chicago-il/dwight-lofts/>
- DePaul University Center Housing: flexible summer availability by the week

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## Minnesota Department of Health, Division of Community & Family Health

### **Project Description:**

The Title V internship students will assist Minnesota's Title V Needs Assessment leadership team with preparing for our 2020 Title V Needs Assessment. This project aims to improve Minnesota's Needs Assessment process by ensuring data and information is available to all stakeholders engaged throughout the prioritization process so they can make informed decisions. The Title V student interns will work closely with Title V staff to assist with the collection/analysis of nationally available and state-specific indicator data to develop data briefs and data visualizations for use during the needs assessment process. This includes working in SAS to clean and format data to assist with the creation of an indicator database that can be used to create data visualizations in Tableau. Minnesota will begin engaging stakeholders during the fall of 2018 through structured focus groups, community work groups, and our MCH Advisory Task Force. The data briefs and data visualizations will be used during those engagements to inform and provide data to support these discussions. These initial engagements will also help us ensure diverse priority areas and performance measures are reflected in the data briefs and data visualizations being developed. The Title V student interns will also help create an evaluation survey to collect information throughout the engagement process. The survey will assess strengths and weaknesses of the needs assessment process and evaluate stakeholder satisfaction. It will be issued at multiple intervals to different groups of stakeholders and needs assessment leadership. The interns will also work to develop an infographic to visualize needs assessment process strengths and opportunities.

### **Objectives:**

Objective 1: Using the data brief template, complete data briefs for priorities selected by the needs assessment leadership team. Data briefs will be referenced by stakeholder groups during the prioritization process. Interns will familiarize themselves with the indicator database (the source for the data briefs) and conduct literature reviews as necessary to populate data briefs with quantitative and qualitative information about selected priorities.

Both interns will work on completing the data briefs. While the graduate student will be working directly in the SAS data sets to clean and manage the data that informs the data briefs, the undergraduate intern will be asked to conduct literature reviews, review nationally-available data summaries, and speak with key informants, all of which will be included in the data briefs as well. Both students will be responsible for inputting the information into the briefs.

Objective 2: Assist in creating and editing SAS datasets to be used in creating an indicator database for data visualizations. Graduate-level intern will work closely with the Needs Assessment Data Team (and preceptors of this internship) to clean and recode data.

Objective 3: Develop the evaluation survey and infographic for the needs assessment process. Interns will work with their preceptors to develop an evaluation survey, to be administered after each needs assessment activity involving stakeholders. Results of the survey will be visualized along a timeline (as a journey map) to describe strengths and opportunities over time. The intern will work with the preceptor to visualize survey results and to summarize the data. The undergraduate student will work closely with a preceptor to develop the evaluation tool (question set) for evaluating the needs assessment process. Evaluation will happen after each prioritization and community engagement activity; therefore, the structured question set needs to allow for consistent collection of data over time. The undergraduate student will also be asked to develop the infographic template for the evaluation results.

### **Additional activities for both graduate and undergraduate students:**

\*Coding qualitative data. The undergraduate or graduate student or both may be trained in coding interviews and focus groups (depending on the timeline of those activities and on-site work) and assist in the analysis of those qualitative activities.

\*MDH is known for its Advancing Health Equity agenda and both interns will be invited to attend any agency-level health equity events or trainings during their time at the Minnesota Department of Health

**Additional activities that are planned for the spring and summer of 2018 that an undergraduate student intern might potentially work on are:**

\*The administration of a web-based Discovery Survey to collect community input on the greatest needs of women and children in the State of Minnesota. The survey will close in May of 2018, and the preceptors will be summarizing the survey data. Depending on the interests and skill-level of the undergraduate student, the undergraduate can assist in coding and summarizing the survey data.

\*Regional focus group meetings to be conducted during the summer of 2018. The preceptors will be creating structured question sets for regional focus group meetings, and the undergraduate intern can assist in the development of the question set, and potentially attend one or more focus group meetings with a facilitator if interested in qualitative research.

\*Key Information Interviews. The undergraduate intern can assist preceptors in creating semi-structured question sets for key informant interviews.

**Skills required for the project(s):**

Microsoft Word  
Microsoft Excel  
Program Evaluation  
Literature Review Skills  
Survey Development  
SAS  
Synthesis of Information  
Communication Skills

**Deliverables or Products:**

- Create Data Brief(s) for priority areas selected by the Needs Assessment Leadership Team
- Assist in creating/formatting data for indicator database
- Create Evaluation Survey
- Evaluation Infographic Template

**Preceptors:**

Title Senior Research Scientist  
Title Senior Research Scientist

**Is there affordable temporary housing available for the students near your agency or affordable housing easily accessible by public transportation?**

Yes

**What is the typical cost of a short-term rental or sublet near your agency?**

\$701-\$900/per person

**Is your state agency easily accessible by public transportation?**

Yes

**Housing Resources:**

University of Minnesota (student housing)

Craigslist

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# Mississippi State Department of Health, Division of Child and Adolescent Health

## **Project Description:**

The internship team will contribute to the development of a Title V plan for increasing consumer and stakeholder engagement in the Mississippi Title V program, particularly in the Child, Adolescent, and CYSHCN populations. Consumers will include: parents, caregivers, families, and youth. Stakeholders will include: state agency partners, nonprofit partners, family advocates, youth advocates, and health equity partners. The plan will be developed through outreach to consumers in the state to assess their need for engagement and assess engagement methods that would be suitable for state consumers and the Title V program. This outreach will include the application of qualitative methods (focus groups, listening sessions) and surveying. Through outreach and researching methods for engagement, the internship team will help to inform Title V and Child and Adolescent Health leadership as they plan for increasing engagement over the course of the next five years. The development of an engagement plan will also assist in the ongoing development of a Title V strategic plan as well as ongoing needs assessment.

Consumer and stakeholder engagement is a focus area for all Title V programs, with a key need being utilizing engagement to inform practice and policy beyond just idea generation. Engagement should also extend to evaluation, implementation, and development. While Mississippi Title V currently has some parent and consumer engagement initiatives, there is a need for more substantial and sustained engagement that is threaded into all areas of Title V practice in the state. One particular need is to ensure inclusivity of vulnerable populations in the state that may otherwise be overlooked: children and youth in foster care, LGBTQ parents, children, and youth, and families from the Choctaw Nation.

## **Objectives:**

Objective 1: To assess consumer and stakeholder needs regarding engagement in Title V Child and Adolescent Health programs.

Interns will need to spend time becoming familiar with the Mississippi Title V programs, through arranged introductory meetings and exploratory conversations as well as inclusion in less formal meet and greets.

Interns will use a variety of methods (surveys, listening sessions, focus groups) to gather input from consumers and stakeholders on the current level of engagement, ideal level of engagement, and proposed methods that would be most suitable for engagement. These sessions will also include an exploration of the role Title V plays in the lives of consumers and to what degree consumers feel it meets their needs.

Objective 2: Communicate findings from conversations and outreach to consumers and stakeholders internally to Title V staff and to the overall stakeholder groups of Title V. Communications should focus on findings and the meaning for Title V practice and policy in the state.

The intern team will collaborate with agency communications staff, Title V program directors, and engagement groups to develop a strategy to communicate findings and ensure that they are actionable.

## **Skills required for the project(s):**

- Microsoft Word
- Microsoft Excel
- Microsoft PowerPoint
- Literature Review Skills
- Community Assessment
- Qualitative Methods (Implementation)
- Qualitative Methods (Analysis)
- Facilitation Skills
- Survey Development

Synthesis of Information  
Communication Skills  
Presentation Skills

**Deliverables or Products:**

Analyzed data from stakeholder and consumer sessions.  
Outline of communication plan

**Preceptors**

Title Bureau Director of Adolescent Health  
Title Title V Director  
Title Office Director for Child and Adolescent Health

**Is there affordable temporary housing available for the students near your agency or affordable housing easily accessible by public transportation?**

Yes

**What is the typical cost of a short-term rental or sublet near your agency?**

\$701-\$900/per person

**Is your state agency easily accessible by public transportation?**

Yes

**Housing Resources:**

UMMC Medical School Housing Listserv (utilized by short term research students as well as med students and residents)

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# New Hampshire Department of Health and Human Services, Public Health Services, Maternal Child Health, Injury Prevention Program

## **Project Description:**

New Hampshire State Injury Prevention Plan (<https://www.dhhs.nh.gov/dphs/bchs/mch/documents/nh-injury-prevention-plan-2014-2018.pdf>) needs revision/updating. Over the summer, we could use the assistance of two interns to work with us to review other states' plans, conduct focus groups with stakeholders, and work with the Injury Prevention Center's director to draft the new State Injury Prevention Plan for 2019-2023. Over the years our NH Maternal and Child Health program has always used a portion of Title V funds for childhood injury prevention. The NH State Injury Prevention Plan, that the interns will be helping us update, will be including topics that related to:

### Injury Prevention Infrastructure

#### Unintentional or accidental injuries

- Preventing motor vehicle crashes, (Adolescent Drivers: safety belt use, texting while driving, etc.)
- Poison prevention,
- Reducing the impact of older adult falls, and
- Childhood injuries in the home and those related to physical activity (Infant Safe Sleep, Childhood Concussion Prevention and Return to Learn/Play)

#### Intentional injuries

- Child maltreatment
- Suicide
- Sexual violence

Topics we address with Title V funds related to childhood injury include:

- NOM 15: Child Mortality
- NOM 16.1: Adolescent Mortality
- NOM 16.2: Adolescent Motor Vehicle Death
- NOM 16.3: Adolescent Suicide
- NPM 5: Safe Sleep
- NPM 7: Injury Hospitalization (Adolescent)

## **Objectives:**

**Objective 1:** Review and update the data the current State Injury Prevention Plan, collect data to update tables and graphs, update text to reflect analysis of the new data. Use data to determine the current top five causes of injury in New Hampshire (NH).

The tables and graphs will be created using hospital discharge data or death certificate data in the numerator and population data in the denominator to create either age-specific or age-adjusted rates. Students can utilize R or Microsoft Access, and format graphs and tables in MS Excel for a final summary report. The interns should have a working knowledge of this software and some ability to analyze these type of data. However, agency staff can provide training in how to use agency data, and this software to generate rates. These data will help NH decide what the major topics for injury prevention should be over the next 5-year plan.

**Objective 2:** Contact other state Injury Prevention Programs and request copies of their Injury Prevention Plans. Compare and contrast the topics in other state plans to NH's state plan, and national injury prevention objectives. Assist in the decision to keep our current state objectives or select other topics to address in the coming five-year period. Develop SMART objectives to address each topic.

This is a qualitative review of state plans to find commonalities and differences. The interns will be expected to contact other state injury prevention programs by phone and/or email to request a copy of their state injury prevention plan. Some of these plans might be found easily posted on the internet. A table will be developed in MS Excel to

conduct qualitative analysis on the major topics found in these state plans; descriptive statistics will then be generated from the qualitative analysis (i.e. 80% of states focus on older adult fall prevention). State objectives will be compared and contrasted to help NH decide on our major topics and write SMART objectives to address them. A SMART Object is: Specific, Measurable, Achievable, Relevant, and Time Bound.

Objective 3: Construct focus groups with stakeholders to determine injury prevention topics that are important to them and assist in decisions regarding feasibility of addressing these injury prevention topics in the coming five year period

This will also be qualitative analysis with descriptive statistics as a result of intern-lead focus groups. The preceptors will work with the interns to help them develop the format for the focus groups. One preceptor can be present to assist with facilitation of the focus groups.

**Skills required to complete project(s):**

- Microsoft Word
- Microsoft Excel
- Microsoft PowerPoint
- Program Planning
- Literature Review Skills
- Community Assessment
- Qualitative Methods (Implementation)
- Qualitative Methods (Analysis)
- Facilitation Skills
- Survey Development
- SAS
- Synthesis of Information
- Communication Skills
- Presentation Skills

**Deliverables or Products:**

The deliverables that are expected of the internship team include the following:

- A stakeholder survey and results of the survey
- Qualitative analyses of stakeholder focus group meetings
- An Excel table and PowerPoint presentation comparing and contrasting NH’s plan to other state injury prevention plans organized by national injury prevention objectives.
- A draft of the updated NH State Injury Prevention Plan

**Preceptors:**

- Title Injury Prevention Program Manager
- Title Manager, Injury Prevention Center at Children's Hospital at Dartmouth-Hitchcock
- Title Injury Prevention Surveillance Coordinator

**Is there affordable temporary housing available for the students near your agency or affordable housing easily accessible by public transportation?**

Yes

**What is the typical cost of a short-term rental or sublet near your agency?**

\$901-\$1100/per person

**Is your state agency easily accessible by public transportation?**

Yes

**Housing Resources:**

<http://www.hodgescompanies.com/>

Either Alton Woods or Salisbury Green is fairly close to the work site. Bus available, walking possible.

Salisbury Green

(603) 224-9130

203 Loudon Road

Concord, NH 03301

Studio 1 \$785

1 Bedroom 1 \$910

2 Bedroom 1 \$1,030

2 Bedroom Ex 1 \$1,055

Alton Woods

(603) 224-4701

241 Loudon Road, Concord, NH 03301

1 Bedroom 1 \$945 - \$1,000

2 Bedroom 1 - 1.5 \$1,095 - \$1,200

Alton Woods has fully furnished executive rentals that run \$1,350 to \$1,975.

Eagles Bluff

<http://www.hmrproperties.com/property/eagles-bluff-concord-new-hampshire/>

Walking distance from worksite, 2 Bedroom \$1,064 per month

1 Canton Circle, Concord, New Hampshire 03301

Phone: (603) 225-4702

Also check the Concord Monitor newspaper online: <http://classifieds.concordmonitor.com/>

Also may be a possibility of one of preceptor's hosting in home

Concord Community College

Dormitory at NHTI (<https://www.nhti.edu/>)

Dormitories can house 2 interns between May 28 and August 10<sup>th</sup> for about \$2,000 for both students. If student interns choose to take a summer class at the college, the cost will be almost half of that. There is bus service from the campus to a stop about 1/4<sup>th</sup> mile from office.

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# Ohio Department of Health, Bureau of Maternal, Child and Family Health

## **Project Description:**

The students will work as a team on two complimentary projects related to infant mortality. Both projects include linking Vital Statistics (VS) data (birth and infant death files) to a separate data sources. One focuses on linking and analyzing new state data on in-hospital safe sleep screening with vital statistics infant death data. The other focuses on linking and analyzing new state survey data on birth hospital level of care with vital statistics data to assess the occurrence of premature births in the recommended level facility, and associated outcomes. Both projects will assist Ohio's Title V program with more full and timely use of available data to guide activities and meet objectives.

Ohio's has identified "Reduce the rate of Infant Mortality and disparities statewide" as the first of 9 current Title V block grant priorities. The commitment of the state to reducing infant mortality is echoed in Ohio's selection of infant mortality as one of 10 priority outcomes in Ohio's 2017-2019 State Health Improvement Plan. The leading cause of infant death in Ohio is prematurity and Sudden Infant Death Syndrome (SIDS) is another leading cause. Ohio's Child Fatality Review has determined that over 15% of infant deaths are sleep-related and identified a number of related unsafe sleep practices including sleep position and sleep surface.

In our Title V action plan, Ohio has linked the following outcome measures to this priority:

- NOM 9.3 Post neonatal mortality rate per 1,000 live births

Ohio has linked the following performance measures to this priority:

- NPM 5 - Percent of infants placed to sleep on their backs
- SPM 1 Black infant mortality rate (IMR) per 1,000 live births

The five strategies under this priority include a) "Increase safe sleep initiatives", and b) "Training and Implementation on a comprehensive risk assessment screening tool" to "increase the number of at-risk women and infants that receive a comprehensive assessment of risk factors & evidence based/best practice interventions to address them." Related to safe sleep initiatives, and required by Ohio legislation effective May 2015, ODH has developed and implemented a screening tool for hospitals to identify infants without a safe sleep environment. If the infant is determined not to have a safe sleep environment by hospital discharge, the hospital may refer the parent, guardian, or other person the appropriate, locally available resources to obtain a safe crib. Hospitals are required not only to screen but also reporting infant safe sleep data to ODH.

Related to risk assessment screening, Ohio's maternity licensure rules include gestational age and weight restrictions for level I, level II, and certain level III newborn care services, with certain allowable exceptions. These restrictions maximize preterm infant's chances of survival by being born in facilities best equipped to care for them at birth. To apply the restrictions, pregnant women must be screened for risk before delivery occurs. While the levels of newborn care services are defined to reflect current standards, there is not exact alignment. To assess levels as defined by current national, the state will implement the CDC-developed Levels of Care Assessment Tool (LOCATe) in early 2018.

## **Objectives:**

Objective 1: Study the frequency and association of hospital safe sleep screening on infant deaths

To facilitate hospitals with this reporting requirement, a new "Crib" tab was launched on January 1, 2017 in the State's vital statistics records system (IPHIS), to capture safe sleep screening data. There are 2 questions on the crib tab:

1. Did you screen the patient? Yes/no
  - a. If you did not screen the patient, why not? Choices can be selected from a drop-down list
2. Did the patient need a crib? Yes/no
  - a. Crib or resources provided? Choices can be selected from a drop-down list

Because this data is entered into the State's vital statistics records system, the crib tab data are automatically linked to birth certificate data, and preliminary analyses to assess the demographic characteristics of families who need cribs are underway. Beyond these analyses, additional death certificate data can be merged and analyzed via a link between the birth and death certificate numbers. By linking the crib tab data to birth and death certificates, we can determine if:

1. Hospital screenings occurred more/less often among those infants who died
  - a. Associated characteristics of not being screened and subsequent infant death (hospital, geography, maternal characteristics, etc.)
2. Hospital screenings were associated with infant deaths

**Objective 2:** In the first quarter of 2018, ODH MCH subject matter experts (SME) will administer the LOCATe survey to gather the data needed for this objective. In the following quarter, CDC will clean the data and complete an initial analysis of the LOCATe survey data to assign levels to each Ohio facility. A linkage between the survey data and VS using hospital/facility ID will also the following questions to be answered:

1. What babies are not being born at the appropriate level nursery (based on birth outcomes such as gestational age, birthweight)?
2. How do current hospital level designations compare to recommendations?
3. What are outcomes of babies born at each level?

**Objective 3:** There is not a 3rd objective. However, the activities and timelines for objectives 1 and 2 are similar so they are presented together below:

**General Orientation (Week 1):** The interns will initially become familiar with the organizational structure, functions, and personnel associated with the ODH Safe Sleep Program and Maternity Licensure Program through supervision, guidance, and support from the Primary and Secondary mentors. Orientation will also include familiarization with the social, political, and cultural environment of safe sleep and maternity licensure in Ohio and with background information about key partners and stakeholders in safe sleep and licensure (e.g., Ohio Hospital Association). Meetings will be arranged to orient the interns with broad awareness about Title V MCH priorities, MCH SMEs, and MCH public health partners (e.g., the Ohio Collaborative to Prevent Infant Mortality).

**Project Orientation (Weeks 1-2):** A series of meetings and presentations will be provided to most efficiently transfer knowledge to interns regarding the safe sleep, LOCATe, and VS data. Prior to the summer internship, ODH MCH SMEs will complete foundational landscape assessment work to inform the data linkage. This will include compiling historical data linkage code and success rates for linkage.

**Implementation (Weeks 3-9):** Interns (with support from mentors) will conduct the data linkage, merging, and analyses. In collaboration with mentors and public health partners, interns will synthesize the analyses and summarize findings. This includes providing recommendations for improved data collection to expand infant mortality related analyses. Interns will disseminate their findings to ODH and key partners in safe sleep and maternity licensure.

**Ongoing orientation and mentorship (Weeks 1-9):** Interns will meet regularly with mentors for ongoing orientation, mentorship, and input to/updates about ongoing development of components of the data linkage and analyses. As meetings and events occur related to MCH and public health, the students will be invited to attend. Tours of the state public health laboratory and vital statistics facility will be scheduled in advance of student arrival.

**Skills required for the project(s):**

- Microsoft Word
- Microsoft Excel
- Microsoft PowerPoint
- SAS

**Deliverables or Products:**

Deliverables Objective 1: A report on the LOCATe assessment methods, findings, and recommendations for ODH and a presentation to be given at ODH to MCH SMEs and key partners in maternity licensure.

Deliverables Objective 2: A report detailing the methodology for data linkage, summarizing the findings, highlighting the main findings, and a presentation to be given at ODH to MCH SMEs and key partners in safe sleep.

While the graduate student will focus on the data linkage, merging, and analyses, undergraduate students will produce the following deliverables related to both Objective 1 and 2:

- Complete a literature review and written summary on either maternity licensure/levels of hospital care or safe sleep
- Present the findings of the literature review to ODH MCH SMEs; the presentation should incorporate data display as a way to learn more about presenting data to a wide audience
- Draft a fact sheet to be posted on the ODH website on either maternity licensure/levels of hospital care or safe sleep

**Preceptors:**

Title Epidemiology Investigator Project Manager

Title State MCH Epidemiologist/CDC Epidemiology Assignee

**Is there affordable temporary housing available for the students near your agency or affordable housing easily accessible by public transportation?**

Yes

**What is the typical cost of a short-term rental or sublet near your agency?**

\$500-\$700/per person

**Is your state agency easily accessible by public transportation?**

Yes

**Housing Resources:**

<https://offcampus.osu.edu/off-campus-living/finding-off-campus-housing/>

<https://www.rentcollegepads.com/off-campus-housing/ohio-state/subleases>

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## Texas Department of State Health Services, Division of Community Health Improvement-Maternal and Child Health Unit

### **Project Description:**

The student interns will jointly oversee development of an implementation plan for an activity or activities that are components of a social and behavior change communication strategy to increase infant sleep safety in Texas. Specifically, the interns will engage stakeholders and apply communication inquiry, design, testing, and/or mobilization and monitoring concepts to support implementation of the DSHS Safe Sleep Messaging Interagency Workgroup's (SSMIW) strategic plan.

This joint project directly supports implementation of the Texas' Title V action plan to implement state Strategies 1, 3, and 4 for National Priority Measure (NPM) 5, Safe Sleep. Strategy 1 is to assess needs, gaps and opportunities to strengthen systems for support of recommended sleep safety and SIDS risk reduction practices. Strategy 3 is to partner to expand, coordinate, and integrate sleep safety and SIDS risk reduction programmatic efforts and outreach across health and human service programming, and Strategy 4 is to develop and disseminate materials, communications, outreach methods, and programmatic strategic plans for promotion of sleep safety and SIDS risk reduction. These strategies address State Priority Needs to ensure use of culturally and linguistically appropriate Maternal and Child Health education and outreach efforts and to reduce health disparities for maternal and child health populations. NPM 5 is closely aligned with NPM 4, Breastfeeding and with State Performance Measure 3, Infant Mortality Disparities and work on this project will integrate and impact strategies and outcomes for these Measures.

In addition to the joint project, interns may choose to select an additional mentored experience including shadowing a maternal and child health (MCH) subject matter expert (SME) and completing a relevant mini-project of their choosing, as developed in collaboration with the appropriate MCHE SME. Examples of MCH SME topical areas are reflected in Texas-selected Title V national and state performance measures, including focus on women's health, breastfeeding, sleep safety, developmental screening, injury prevention, adolescent transition, medical home, tobacco prevention and reduction of exposure to environmental tobacco smoke, community integration of children with special health care needs, childhood obesity, reduction of disparities in infant mortality, and preventive health care among young adults. Interns may also choose to participate in the DSHS Blue Ribbon Internship Program, which offers enhanced experiential opportunities to learn about state health systems and to develop leadership.

### **Objectives :**

Objective 1: Operationalize implementation of safe sleep messaging strategic actions.

Anticipated activities and timeline:

Weeks 1-3:

- **General Orientation:** The initial task of the interns will be to become familiar with the organizational structure, functions, and personnel of the FCHS Division as relevant to infant health and safety. The interns will be provided with supervision, guidance, and support from the Primary, Secondary, and backup mentors while receiving a general orientation to the agency, especially to those areas of DSHS that intersect with infant health. Orientation will also include familiarization with the social, political, and cultural environment of infant sleep safety in Texas and with background information about key partners and stakeholders in infant health and safety. Meetings will be arranged to orient the interns with broad awareness about Title V MCH priorities, MCH SMEs, and MCH public health partners.

- **Project Orientation and Scope Development:** A series of meetings and presentations will be provided to most efficiently transfer knowledge to interns regarding best practices in development of social and behavior change communication strategies as well as about the DSHS SSMIW, its strategic planning, and assessment and program

development work to date. Prior to the summer internship, DSHS MCH SMEs will be working to build capacity for implementation of the SSMIW strategic plan. This will include working with SSMIW members to finalize and selection of a communication channel mix, program approaches, and a prioritized activities matrix. Mentors will work with the SSMIW to identify a selection of priority areas of focus from within the strategic plan for the interns to choose from. Interns will be oriented to the communication theories, strategy development processes, and partnerships used in the plan's development, and will work with the mentors to identify, prioritize, and develop a focused scope for discrete, time limited processes and projects (e.g. development of an implementation plan for a particular interpersonal- or community based communication strategy) that could realistically be implemented within the project period.

- Optional mini-project identification: Interns and MCH SMEs will discuss potential mini-project and/or Blue Ribbon Internship opportunities during the orientation process. Interns will choose, if they wish their preferred mini-project opportunity by the 2nd week and will work with the mentor(s) and appropriate MCH SME to develop a work plan to outline the project, responsibilities, and timeline.

Weeks 1-9:

- Ongoing orientation and mentorship: Interns will meet regularly with mentors for ongoing orientation, mentorship, and input to/updates about ongoing development of the strategic planning priority area(s) that will be implemented as a result of the joint project.

Weeks 2-4:

- Identification of planning development methods
  - o In consultation with mentors and informed by the interns' orientation, interns will identify methods for developing an implementation plan, including partner roles and responsibilities, activities, timeline, budget and management considerations, for their chosen project.
  - o Interns will complete formative work to understand the audiences, communication objectives, strategic approaches, positioning and strategy concepts, and key partners and will oversee identification of methods and timeline for working with public health partners to develop the implementation plan.

Weeks 4-8:

Operational development: Interns (with support from mentors) will implement chosen methods to collect information from public health partners to develop an operational implementation plan.

**Objective 2:** Communicate implementation strategies to community public health partners, key decision makers, and other infant sleep safety stakeholders.

Weeks 1-3: Interns will become oriented to the potential audiences (including public health partners, key decision makers and stakeholders). Interns will work with mentors to identify the target audience(s) and preferred method(s) (e.g. presentation, webinar, written report, material) for communication of finding and recommendations. A timeline will be developed and any needed meetings or events will be scheduled.

Weeks 4-7: Interns will develop materials and communication strategies to support implementation of the plan.

Weeks 8-9: Interns will disseminate communication(s) to target audience(s).

**Skills required for the project(s):**

- Microsoft Word
- Microsoft PowerPoint
- Program Planning
- Program Evaluation
- Literature Review Skills

Community Assessment  
Qualitative Methods (Analysis)  
Facilitation Skills  
Synthesis of Information  
Communication Skills  
Presentation Skills

**Deliverables or Product:**

The MCH Title V internship team will collaborate with project mentors to complete a written implementation plan(s) and communication materials to support activity implementation, and will deliver completed products by the end of the summer internship.

**Preceptor(s):**

Title Women’s, Maternal, Perinatal, and Infant Health Nurse Consultant and Team Lead / State Breastfeeding Coordinator  
Title State Perinatal and Infant Health Coordinator / Healthy Texas Babies Coordinator  
Title Women’s and Perinatal Health Coordinator

**Is there affordable temporary housing available for the students near your agency or affordable housing easily accessible by public transportation?**

Yes

**What is the typical cost of a short-term rental or sublet near your agency?**

\$701-\$900/per person

**Is your state agency easily accessible by public transportation?**

Yes

**Housing Resources:**

1. Student oriented face book pages (there are some specific Facebook pages that our previous interns used that I can ask them for)
2. University of Texas (UT) (e.g. Daily Texan paper; Student Union)-other area higher ed campuses include Austin Community College, Concordia University, and St. Edwards University in Austin and regional campuses for multiple universities in Georgetown.
3. Craigslist

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## Vermont Department of Health, Division of Health Surveillance

### **Project Description:**

As a state that is heavily reliant on medical homes to provide the vast majority of all pediatric vaccines, the Vermont Immunization Program strives to meet all Centers for Disease Control and Prevention (CDC) requirements and provide all recommended vaccines to primary care provider practices for use in all children 0-18 years.

The Vaccines for Children (VFC) Program is a federally mandated, state run program that provides vaccines at no cost for use in children from birth through 18 years of age who are on Medicaid, uninsured, underinsured, American Indian or Alaskan native. Vaccines are purchased from the CDC at 15% to 60% less than private purchase costs. As a universal state with funding from health insurers, Vermont has expanded the population served through the VFC Program to include insured children. This eliminates the need for providers to maintain two different stocks of vaccine and eliminates cost.

In the past three years, the Vermont Immunization Program has made changes in the implementation of the VFC Program to improve efficiency and ensure its ability to meet CDC requirements. The Program has regulatory, quality improvement, and educational components. Multiple staff interact with primary care providers (PCPs) to complete compliance and quality improvement visits, vaccine ordering, Immunization Registry training and educational outreach to meet CDC Cooperative Agreement requirements.

The relationship with primary care providers is very important as high provider enrollment in the VFC Program ensures children can be vaccinated in their medical home, and contributes to increased immunization rates in Vermont. Although the State has changed the VFC Program with the aim of improving efficiency and its ability to meet CDC requirements, the Immunization Program has not evaluated the VFC Program to determine whether these aims were met. Additionally, the Immunization Program has not evaluated the VFC Program to determine whether it is meeting the needs of Vermont's primary care providers.

In January 2018, Vermont is participating in the Harvard School of Public Health and CDC Program Evaluation Practicum, sponsored by the Association of Maternal and Child Health Programs, to develop a structured evaluation plan of the VFC Program. Title V internship students would play a key role in conducting a portion of the evaluation. Their work would focus on collecting and analyzing qualitative data obtained from Vermont primary care providers enrolled in the VFC program. During the summer, Title V internship students will have the opportunity to work across multiple divisions and programs within the Vermont Department of Health, including the Division of Maternal and Child Health, the Immunization Program, and the Division of Health Surveillance. Students also will have an opportunity to work with pediatric practices across the state. Students will receive interdisciplinary support to carry out elements of the evaluation and build upon qualitative research skills.

The Vermont Title V systems work closely with the Immunization Program to increase immunization rates for children and adults. Several partnerships, such as home visitation and working with school nurses, can help increase the number of children receiving recommended vaccinations. The percent of adolescents ages 13 to 17 who have received at least one dose of HPV, Tdap and meningococcal conjugate vaccine is a Title V national outcome measure for the state priority need: youth choose healthy behaviors and thrive. This project also supports the Title V state priority of achieving a comprehensive, coordinated and integrated state and community system of services for children.

### **Objectives:**

Objective 1: Assess primary care providers level of satisfaction with the Immunization Program. Students will engage primary care providers (PCPs) during phone interviews and online surveys to assess their level of satisfaction with the

Immunization Program. The exact format of the interview and the chosen participants will be determined in advance of the students' arrival, so they are able to begin the work immediately. Students will collaborate to efficiently implement the evaluation plan. They also will actively increase their communication and research skills by taking the lead on scheduling and conducting interviews with PCPs.

**Objective 2:** Identify services that are the most/least valuable. Students will use qualitative research skills to identify repeated themes of barriers and assets of the VFC Program while synthesizing data from phone interviews and/or surveys. Students will be responsible for managing the data collected and translating it into a concise format that is easily understood. Identified services may be summarized in a one-page write up or brief presentation for key stakeholders.

**Objective 3:** Identify strategies to enhance collaboration between the Immunization Program and PCPs while meeting CDC requirements. Students will familiarize themselves with current CDC requirements for the VFC program and work with program staff to review current processes of the Immunization Program. After interviewing PCPs, students will be able to recommend strategies to overcome gaps in the collaboration of providers and the Immunization Program to fulfill CDC requirements.

**Skills required for the project(s):**

- Microsoft Word
- Microsoft Excel
- Microsoft PowerPoint
- Program Evaluation
- Literature Review Skills
- Qualitative Methods (Implementation)
- Qualitative Methods (Analysis)
- Facilitation Skills
- Survey Development
- Synthesis of Information
- Communication Skills
- Presentation Skills

**Deliverables or Products:**

The exact deliverables of the Title V MCH team will be determined after the evaluation plan has been created in January 2018. However, the team will be expected to create a brief report and/or a presentation of their findings. Preceptors will support them in the development and refinement of these products. Information collected and synthesized by the team will be disseminated the Division of MCH, the Immunization Program and participating primary care providers. Evaluation results will help the Immunization Program and Division of Maternal and Child Health address areas of improvement in the VFC.

**Preceptors:**

- Title Immunization Program Epidemiologist
- Title CSTE Applied Epidemiology Fellow
- Title Senior MCH Epidemiologist / CDC Assignee

**Is there affordable temporary housing available for the students near your agency or affordable housing easily accessible by public transportation?**

Yes

**What is the typical cost of a short-term rental or sublet near your agency?**

\$701-\$900/per person

**Is your state agency easily accessible by public transportation?**

Yes

**Housing Resources:**

The greater Burlington area is conveniently home to several colleges and universities such as the University of Vermont, Champlain College, and Saint Michaels College. During the summer, there is student housing in the neighborhoods surrounding the downtown area of Burlington and nearby colleges and universities. The Department of Health is within biking and walking distance of most of the housing that the student may find convenient / desirable for living during the summer. It is also adjacent to the main terminal for public transportation in Chittenden County. Vermont Department of Health staff are willing and able to provide recommendations on where to look for housing.

A few resources that may help students find temporary housing include:

[craigslist.com](http://craigslist.com)

<http://www.uvm.edu/~ues/?Page=accommodations.html&SM=submenu1.html>

<https://www.rentcollegepads.com/off-campus-housing/vermont/subleases>

Previous interns found sublets at University of Vermont associated housing, Redstone Lofts.

<http://www.redstonelofts.com/>

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## Wisconsin Department of Health Services, Division of Public Health

### **Project Description:**

The Wisconsin Title V Family Health Section has a strong history of successfully hosting students and fellows. Interns will be included in regular staff meetings, Family Health Data Team meetings, and have the opportunity to interact with staff and learners from a variety of programs including University of Wisconsin students, CDC Public Health Associate, MPH students, Council of State and Territorial Epidemiologists (CSTE) Applied Epidemiology Fellow, and many others.

The Family Health Section, Children and Youth with Special Health Care Needs Program called Wisconsin Sound Beginnings (WSB) works to: 1) Ensure All Babies Are Screened or Have Documented Refusal; 2) Reduce Loss to Follow-Up (LTFU) for Babies Who Did Not Pass their Newborn Hearing Screening; 3) Improve the Time to Diagnosis for Babies Who Need Diagnostic Services; and 4) Reduce Loss to Follow-Up and Improve Outcomes for Babies Referred to Early Intervention. WSB monitors, manages and measures Wisconsin's hearing screening, loss-to-follow-up, diagnosis and early intervention referral through its web-based data system.

The WSB Program has implemented a comprehensive early hearing detection and intervention information system (EHDI-IS). The Wisconsin EHDI-IS enables WSB to report to the Center for Disease Control and Prevention (CDC) hearing screening and follow-up data on every occurrent birth and allow the WSB program to promote adherence to quality assurance standards within hearing screening programs and successful family follow-through. The EHDI-IS is also the platform on which the Critical Congenital Heart Disease (CCHD) screening data is collected and analyzed.

The EHDI-IS collects and integrates data from the State Vital Record birth events data system and the Wisconsin Part C early Intervention data system. The result is an EHDI-IS system that contains individual birth, screening, diagnostic and early intervention data on each baby, in order to assist WSB in assuring that families have timely, effective screening, diagnostics, family support and services.

An evaluation plan will be developed in January 2018 as part of the CDC/Harvard Program Evaluation Practicum. The summer MCH Title V intern will assist the WSB program to implement the evaluation of the EHDI-IS developed in this plan.

This project supports two key priority areas of Wisconsin's Title V Program: 1) Receiving preventive screening and follow-up, and 2) Building and sustaining infrastructure to assure data-informed policy, systems, and environmental strategies. This evaluation could help secure funding for broader implementation and expansion of our data system to include a more comprehensive critical congenital heart disease (CCHD) screen and birth defects surveillance module, as well as newborn blood screening data.

\*Because the evaluation plan is scheduled to be developed in January, activities have intentionally been left broadly described. Additional detail can be provided for the objectives in early 2018.

The students may have additional opportunities within the EHDI and Title V programs. Additional projects opportunities could include conducting focus groups with Parents of children who are deaf or hard of hearing to evaluate family support opportunities and resources, conducting program evaluation for the early intervention component of Wisconsin Sound Beginnings called CARES, or assist in the development of a parent support website.

### **Objectives:**

Objective 1: Conduct an evaluation of the EHDI-IS, utilizing the evaluation plan developed in January 2018.

1. Become familiar with the drafted evaluation plan

2. Become familiar with the CDC Updated Guidelines for Evaluating Public Health Surveillance Systems
3. Become familiar with the EHDI program in Wisconsin and the EHDI-IS
4. Design and conduct a survey of EHDI-IS end users
5. Identify information that needs to be collected to address each of the system attributes to be assessed in the CDC Guidelines
6. Collect identified information for system attributes

Objective 2: Analyze data and information collected during the evaluation process.

1. Analyze end user survey
2. Analyze additional information collected on the system attributes

Objective 3: Summarize and present evaluation findings and recommendations.

1. Draft evaluation report, in conjunction with program staff and epidemiologic support
2. Create a presentation summarizing evaluation findings and recommendations
3. Present evaluation findings and recommendations to Title V, EHDI, and family health staff and facilitate a discussion of next steps.

**Skills required for the project(s):**

- Microsoft Word
- Microsoft Excel
- Microsoft PowerPoint
- Program Evaluation
- Survey Development
- Synthesis of Information
- Communication Skills
- Presentation Skills

**Deliverables or Products:**

The students would be expected to provide a comprehensive evaluation report, including a summary of findings and recommendations, as well as a presentation to internal staff on the findings in the report, and facilitation of a discussion of those findings and recommended next steps for the program.

**Preceptors:**

- Title Program Director
- Title Epidemiologist
- Title CDC Assigned MCH Epidemiologist or Organization Epidemiologist

**Is there affordable temporary housing available for the students near your agency or affordable housing easily accessible by public transportation?**

Yes

**What is the typical cost of a short-term rental or sublet near your agency?**

\$701-\$900/per person

**Is your state agency easily accessible by public transportation?**

Yes

**Housing Resources:**

[www.uwsublets.com](http://www.uwsublets.com)

campusareahousing.wisc.edu

And many other through specific property management companies

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## Wyoming Department of Health, Division of Public Health Division

### **Project Description:**

The student interns will work with the Maternal and Child Health (MCH) Unit (e.g. Wyoming Title V program) and Wyoming Medicaid to develop a two-pronged implementation plan for Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents, 4th Edition with a focus on engaging providers and families/consumers. On October 25, 2017, the Wyoming Medicaid Medical Advisory Group (MAG) voted to adopt the Bright Futures Guidelines, 4th Edition. Between November 2017 and June 2018, Wyoming Medicaid and the MCH Unit will build departmental infrastructure (e.g. develop policies, provider manuals) to implement Bright Futures in preparation for the students' arrival in June 2018. Specifically, the interns will facilitate interviews with key stakeholders including Wyoming Medicaid leadership, Title V leadership, Wyoming Department of Health (WDH) leadership, pediatric and family practice providers, pediatric and family practice billing/coding specialists, family leaders, and Wyoming Chapter of American Academic of Pediatrics (AAP) representatives to understand opportunities and barriers to implementing Bright Futures. The interns will synthesize results and communicate findings and recommendations for action to key decision makers and other stakeholders. The interns will also gather best practice information from national AAP and other states related to Bright Futures implementation. Lastly, information from stakeholder interviews and experts in Bright Futures implementation across the nation will be compiled and used to inform development of a Wyoming-specific Bright Futures implementation plan which targets and engages two key groups: providers and families/consumers.

This joint project supports Wyoming's 2016-2020 Title V priority to improve preventive and quality care for children and adolescents, a priority which directly aligns with four (4) Title V National Performance Measures (NPM). These include NPM 6: Developmental Screening, NPM 10: Adolescent Well Visit, and NPM 11: Medical Home, and NPM 12: Transition. The student-developed plan to implement Bright Futures will specifically include education of providers and families/consumers on these key topics of preventive care for children and adolescents as well as a plan to evaluate the impact of implementation on the measures themselves at the clinic and State level.

In Wyoming, Title V and Medicaid are housed within one agency, WDH, which will provide the interns a unique opportunity to observe and understand each program's specific roles in implementing Bright Futures. The partnership is formalized by a 2013 interagency agreement which states that both entities shall "coordinate and collaborate in planning and implementing services related to maternal and child health populations including well-child checkups" [(e.g. Early and Periodic Screening, Diagnostic and Treatment (EPSDT)]. Collaboration on EPSDT and implementation of Bright Futures is essential in order to improve Wyoming EPSDT rates; Wyoming currently ranks 44th in the Nation.

In addition to the joint project, interns may choose to select an additional mentored experience including shadowing an MCH Unit Program Manager and/or MCH Epidemiologist and completing a relevant mini-project of their choosing, as developed in collaboration with the appropriate MCH Program Manager. Examples of relevant mini-project topical areas are reflected in Wyoming-selected Title V national performance measures, including focus on low-risk cesarean delivery, breastfeeding, maternal smoking, developmental screening, childhood physical activity, adolescent well visit, medical home, and transition. The interns may also focus their project on parent/consumer engagement, a Title V agency required activity.

### **Objectives:**

Objective 1: (a) Solicit and collect input from key public health partners and providers about barriers and opportunities for implementation of Bright Futures, 4th Ed. (b) Solicit and collect information from family leaders about knowledge of EPSDT and Bright Futures and suggestions for implementation. Anticipated activities and timeline:

### Weeks 1-3

**General Orientation:** With guidance and support provided by the primary and secondary preceptors, the interns will become oriented to the organizational structure, functions, and personnel of WDH, with a specific emphasis on the Public Health Division where Title V is housed and the Division of Healthcare Financing where Medicaid is housed. Since the project's topic of EPSDT is a priority across divisions, the interns may also have an opportunity to meet with WDH leadership and with members of the Director's Unit for Policy, Research, and Evaluation (DUPRE). The interns will also meet with staff familiar with the broad public health and health care delivery system in Wyoming including but not limited to staff from the WDH Rural and Frontier Health Unit, the Wyoming Primary Care Association, and Wyoming Medical Society, as well as parent leaders identified by Wyoming Family Voices and/or the Wyoming Parent Leadership Training Institute.

**Title V and Medicaid Orientation:** The preceptors will arrange meetings with key staff members within Title V and Medicaid to provide a more specific orientation to Title V and Medicaid priorities and operations. Emphasis will be placed on orienting the interns to the structure and priorities of Title V. The students may be connected to additional MCH subject matter experts and MCH public health partners as needed or requested by the interns.

**Project Orientation:** The interns will meet with Title V and Medicaid staff to understand EPSDT, a Medicaid benefit providing comprehensive and preventive health care services for children under age 21 who are enrolled in Wyoming Medicaid, and program efforts to improve preventive and quality care for all children and adolescents in Wyoming. The interns will also meet with a representative from Wyoming Chapter or national AAP to learn about the history and purpose of Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents, 4th Edition. After gaining a solid understanding of EPSDT and Bright Futures content, the interns will meet with MCH epidemiology staff to review EPSDT data available at the state level and provider level as well as current data on NPMs related to the project topic. The information above will be shared in a variety of methods including meetings, presentations, and required reading.

**Mini-project identification:** Interns and preceptors will discuss potential mini-project opportunities. If an additional project is selected, a plan for completion will be finalized by end of week 2.

### Weeks 2-6

**Planning of Assessment:** Between November 2017 and June 2018, Title V and Medicaid staff will build departmental infrastructure (e.g. develop policies, provider manuals) to implement Bright Futures, 4th Ed., in preparation for the students' arrival. Staff will also gather information from other states who have already implemented Bright Futures, 4th Ed., to understand successes and challenges. Lastly, staff will initiate contact and communication with key public health partners who the interns will interview about Bright Futures implementation. Together, the preceptors, MCH Epidemiology staff, and the interns will plan an interview guide and/or survey which will include a SWOT analysis. Two interview guides and/or surveys will be developed, one to focus on providers/public health partners and the other to focus on families/consumers.

**Implementation of Assessment:** The interns will conduct interviews with key stakeholders including Wyoming Medicaid leadership, Title V leadership, WDH leadership, pediatric and family practice providers, pediatric and family practice billing/coding specialists, Wyoming Chapter of AAP representatives, and family leaders/consumers to understand opportunities and barriers to implementing Bright Futures. The interns will synthesize results and communicate findings and recommendations for action to key decision makers and other stakeholders and include within the implementation plan. Data will be separated by provider/public health partners and families/consumers to inform two separate sections of the implementation plan.

### Weeks 1-9

Ongoing orientation and mentorship provided to interns by preceptors.

**Objective 2:** Compile best-practices from national AAP and other state Title V and Medicaid programs related to implementation of Bright Futures, 4th Edition. Anticipated activities and timeline:

#### Weeks 5-6

Interns will be provided with a list of state Title V and/or Medicaid programs to contact and/or research to learn more about their experiences implementing/launching Bright Futures, 4th Ed. The interns will specifically target informants with experience implementing the guidelines in rural states and communities. Based on interviews and/or research, the interns will compile a list of best practices for Bright Futures implementation with a specific

#### Weeks 1-9

Ongoing orientation and mentorship provided to interns by preceptors.

Objective 3 Project Objective 3: Develop a Wyoming-specific Bright Futures, 4th Edition, implementation plan targeting providers and families/consumers. Anticipated activities and timeline:

#### Weeks 6-9:

Interns will prepare draft implementation plan. The plan will include two separate sections, one targeting provider/public health partners and the other targeting families/consumers. Preceptors and key stakeholders (e.g. Wyoming Medicaid, Wyoming Chapter of AAP) will review and provide feedback before submission and presentation of a final plan. Interns will present the plan to interested stakeholders selected jointly by the interns and preceptors.

#### Weeks 1-9

Ongoing orientation and mentorship provided to interns by preceptors.

#### **Skills are required for the project(s):**

- Microsoft Word
- Microsoft Excel
- Microsoft PowerPoint
- Program Planning
- Community Assessment
- Qualitative Methods (Implementation)
- Qualitative Methods (Analysis)
- Facilitation Skills
- Survey Development
- Synthesis of Information
- Communication Skills
- Presentation Skills

#### **Deliverables or products:**

The interns will collaborate with preceptors to complete a written plan for implementing Bright Futures, 4th Edition, for two target audiences: providers and families/consumers. The plan will detail engagement strategies specific to both audiences, informed by input collected through interviews with key stakeholders. The product will be completed by the end of the summer internship and presented to MCH, PHD, and WDH leadership.

#### **Preceptors:**

- Title MCH Unit Manager/Title V Director
- Title Child Health Program Manager
- Title MCH Epidemiology Program Manager

**Is there affordable temporary housing available for the students near your agency or affordable housing easily accessible by public transportation?**

Yes

**What is the typical cost of a short-term rental or sublet near your agency?**

\$701-\$900/per person

**Is your state agency easily accessible by public transportation?**

Yes

**Housing Resources:**

Laramie County Community College (LCCC)

Local Airbnb short-term rentals available

\*There is a city bus stop near the agency at the corner of Yellowstone and Story Blvd.

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