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**Invitation to Apply - 2021 Cohort**

**Applications due to Rebecca Greenleaf (** [**rebecca\_greenleaf@unc.edu**](mailto:rebecca_greenleaf@unc.edu) **) by 5 p.m. local time on March 15, 2021**

Working in a Title V agency in 2021 is no easy task; from the COVID-19 pandemic to the naming of racism as a public health crisis, there are numerous challenges to navigate. Do you have a particular problem or challenge that could benefit from an expert eye? Have you been struggling to navigate all of the transformations happening in health and health care? Do you have a “wicked” problem or complex challenge that might benefit from tailored technical assistance and ongoing support? This learning opportunity provides guidance and structured support to move from the ‘current state’ to the ‘desired state’ on an MCH health priority challenge of your choice.

The National MCH Workforce Development Center invites state/jurisdictional Title V agencies to submit applications for its upcoming Cohort learning opportunity. Accepted teams will participate in a 7-month Cohort with other state/jurisdictional teams, during which time the Center will support their work on an existing (or planned) transformational challenge as a way to increase workforce skills and capacity.

While health transformation projects can be dynamic and complex, our application process is not! You will identify team members and submit a two-page project description by **March 15, 2021 at 5:00 pm**. We will follow up with a one-hour exploratory telephone call to complete the process.

If you need ideas, see Appendix A for a listing of recent cohort project summaries, or consider:

* Is there an opportunity to collaborate with education agencies in your state to plan for re-opening of schools?
* Is there momentum related to improving health equity that make this a good time to revisit planning or programs for MCH populations in your state?
* Is your agency ready to support local health departments or other community organizations in planning for equitable COVID vaccination roll out to MCH populations?
* Are you engaging organizations serving adolescents experiencing increases in inequitable poor health outcomes related to the myriad of challenges facing adolescents during COVID (ATOD, mental health, unintended pregnancy, etc.)?
* Is your state taking advantage of changes to telehealth policies to support pregnant and parenting populations and address inequitable access to services?

Interested applicants can attend an optional informational call on February 17th from 3 to 4 pm EST. No pre-registration is required; dial 888-363-4735, code 6600416.

Please reach out to Amy Mullenix at [amy\_mullenix@unc.edu](mailto:amy_mullenix@unc.edu) if you have questions or would like to talk about your ideas before applying. More information is available at mchwdc.unc.edu.

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**National MCH Workforce Development Center Overview**

Major transformations in the public health landscape offer opportunities to improve public health systems, state/jurisdiction and community health care delivery, and ultimately, key health outcomes for MCH populations. Title V programs are uniquely positioned to help lead and influence major health system transformations as they affect children, youth, women, families and communities. The MCH Workforce Development Center offers a range of tools and resources to strengthen MCH workforce capacity and skills in **three strategic skill areas.** In addition, Family Engagement and Health Equity are cross cutting priorities that we integrate into all Center assistance.

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| **Strategic Skill Areas** | | | |
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| * Helps identify systems patterns and identify approaches to drive system change      * Provides tools to understand and describe the structure of the systems that require change to influence outcomes * Provides insight on the transition from service delivery to systems strengthening * Helps strengthen stakeholder relationships, focused on developing mutually beneficial goals and outcomes | * Helps lead change effectively * Increases capacity to frame challenges, ask strategic questions, and prioritize action steps * Includes information about the role of leaders in championing and communicating a shared vision * Provides tools to convene stakeholders, discover individual strengths and focus on learning as a pathway to change * Assists in optimizing financial and human resources to implement change | | * Improves evidence-informed program delivery – ranging from needs assessment to program selection, effective program implementation to measurement, improvement and dissemination * Provides feasible tools drawn from quality improvement, implementation science, evaluation, communication, and more * Supports development/selection of an evaluation method or design of a performance monitoring system in a way that embraces systems complexity |
| **Cross Cutting Priorities** | | | |
| Health Equity  Helps states/jurisdictions with the intentional inclusion of health equity | | Family Engagement  Assists states/jurisdictions with creating  authentic family partnerships | |

**Benefits of Working with the Center**

See Appendix A or [click here](https://mchwdc.unc.edu/impact/) to read about previous state projects and impact. Previous cohort participants report:

* This experience helped them to participate in health transformation activities such as engaging new partners, developing and implementing block grant activities, or continuing CoIIN work.
* The Cohort experience increased cross-sector collaborations that extend beyond the formal engagement with the Center.
* The knowledge and skills gained continue to be applied in their daily work.

In addition to enhanced workforce skills and progress on their own projects, Cohort participants can also expect additional benefits:

* Leadership coaching for team co-leads
* Peer and Center support for consumers/family partners
* Assistance in thinking about the health equity implications of the selected project
* Relevant webinars and other resources to support your team’s project
* National recognition and opportunities to present at national events such as the AMCHP annual conference
* Liaison/alignment services from the Center on behalf of the state/jurisdiction with other national Centers

All Center training and consultation services are free of charge, including the Learning Institute in May 2021 for up to 10 team members, as well as a 2-4 day in-state or remote consultation at your location with relevant transformation experts.

**What to Expect when Working with the Center**

Cohort participants should plan to actively pursue their goals with support from the Center according to the timeline below. Each team accepted into the Cohort will be assigned a Center Coach who will serve as the primary liaison with the Center and as a broker of all Center resources. Opportunities to connect with other states/jurisdictions to share knowledge, ideas and problem-solve will be provided during and after active engagement with the Center. The Center is also able to assist states/jurisdictions in promoting authentic family partnerships and the intentional inclusion of health equity in their work.

**Timeline**

Applicants should carefully review the timeline below and prepare to commit to each of the components.

**Cohort 2021 Timeline**

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| --- | --- |
| January 11 | Application opens |
| February 17th at 3:00 pm EST | Informational Call for Potential Applicants - Optional  888-363-4735 code 6600416 |
| March 2, 4, 9, and 11th | Spring Skills Institute – Optional  Optional Office Hours - March 3, 5, 10, and 12th |
| March 15 at 5 p.m. | Applications due via email |
| March 16 - 18 | All applicants will participate in a one hour exploratory call with Center staff |
| March 19 | Accepted teams notified |
| March 31, 3:00 pm EST | Welcome Webinar for all accepted teams |
| April 2021 | Accepted teams will begin preliminary work with Center staff.   * Hold initial meeting with Center Coach * Clarify learning goals & team member roles * Hold full-team meeting to introduce coach, clarify project & prepare travel team with any needed information for the Learning Institute * Complete pre-training assessment |
| May 3-6 | Virtual Learning Institute |
| May – October | Teams work with Center Coach and staff to advance goals |
| May - October | Tailored single and multi-team workshops designed to build on and advance learning and skill development. Schedule to be determined based on participant/team needs. |
| Monthly learning webinars for full state/jurisdiction teams:  May 26, June 16, July 7, July 28, August 18, September 8, September 29, and October 20.  All held from 3-4pm EASTERN | |
| September – October | In-state or virtual consultation (1-4 day visits) with Coach & relevant Center experts |
| November 10  3-5 pm EASTERN | Teams present accomplishments to date on Celebration Webinar |

**Application Guidance**

**Eligibility**

A state/jurisdiction Title V program must be the lead applicant. Only one application per state/jurisdiction will be considered. All states and jurisdictions are eligible and encouraged to apply, even if they have participated in a previous Cohort or received assistance from the Center in the past.

**Participation Requirements**

The key element of the application process is the description of the transformational challenge that the applicant would like to work on in collaboration with the Center. The challenge described in the application will serve as a “practice laboratory” in which to apply the workforce skills provided by the Center. The challenge should encompass an existing real-world health priority from the Block Grant Action Plan or other MCH policy/programmatic plans. The timing may be right for your state to consider opportunities for centering equity or for responding strategically to the COVID-19 pandemic. **You don’t need to identify a “new” challenge to participate in the Cohort.** In fact, many states take advantage of the Cohort opportunity to receive support as they begin a new phase of activities related to Block Grant Action Plans or other transformational efforts within their MCH programs. Adaptive, “wicked” or complex challenges that might benefit from ongoing support and adaptive assistance are welcome. The Center’s role is to support enhanced workforce capacity in each of the three strategic skill areas and two cross cutting priorities to push progress toward your goals and provide new skills. Long-term goals must be related to the improvement of population health outcomes for women and children.

Title V programs should select team members with a strong interest in learning and the ability to support change. At least half must be working in the state’s Title V program; the other team members should come from other sectors relevant to the challenge selected. Title V programs may register up to 10 leadership team members as part of the Learning Institute Team to attend the May Learning Institute. These individuals should be able to commit to attending all five days of the virtual Learning Institute, and the individuals who are most critical to the launch of the project activities.

Title V programs may also establish a larger planning team if that is appropriate for their project. Similar to the leadership team, **at least half of the planning team members must be Title V/Children & Youth with Special Health Care Needs (CYSHCN) staff members.** All teams should reflect the diverse populations they serve, and must include at least one consumer (e.g., family member, youth, advocate, affected individual). Other team members should be those most likely to provide active support to the work as it moves forward, such as colleagues in other state agencies (e.g., Medicaid), relevant technical experts, academic partners, local health department leaders, etc. A unique feature of the Center cohort experience is our support for cross-sector teams that can effectively advance complex health transformation efforts.

Please indicate each team member’s anticipated role on the team in your application.

* Team Co-leads: These two individuals are responsible for providing leadership for the state/jurisdictional team, convening team meetings, responding to Center requests, etc. The co-leads can share these duties per their preferences. Co-leads will have the opportunity to receive peer coaching led by a Center change management expert throughout the course of the engagement with the Center. Time commitment: 2-3 hours per week per individual.
* Measurement Liaison: The team should select an individual to coordinate the team’s evaluation efforts. This individual should be willing to help the team consider how to measure progress and success throughout the course of their project work. Time commitment: 3-4 hours per month.
* Learning Institute Leadership Team: The Learning Institute Leadership Team must be composed of 8-10 individuals; to include the team co-leads plus the up to 8 additional individuals who are most critical to the successful launch of the project. We strongly encourage teams to include a person or people with lived experience relevant to the challenge (i.e., a family, consumer, or community partner) on the Learning Institute leadership team. The Learning Institute Leadership Team is a subset of the full planning team. All Learning Institute Leadership Team members must be able to fully commit to attending the virtual Learning Institute held in May 2021. The team should identify two additional back-up team members in case primary team members should have last-minute cancellations. Time commitment: 2-3 hours per month per individual as member of the full team (as described below), plus four full and one half day at the Learning Institute in May 2021.
* Planning Team: Title V does not engage in health transformation activities on its own; therefore, we require cross-sector partnerships to apply the workforce skills learned. This is the multi-sector team needed to move the proposed work forward, and may require up to 20 individuals for complex challenges. **At least 50 percent of the full Planning Team must be Title V staff members and include at least one consumer**. All members of this group are expected to meet regularly and participate in as many Center training activities as possible (except the Learning Institute). The composition of the Planning Team may change over time as the team makes progress, but please attempt to name all individuals who will complete Center trainings and meet on a regular basis to work toward deliverables. Time commitment: 2-3 hours per month per individual.
* Senior Leader or Sponsor: The Sponsor is the team member(s) responsible for supporting the work of the team, “clearing the path,” removing administrative obstacles to change, and providing consultation to the team. (The Sponsor can also serve as a co-team lead if desired.) The senior leader/sponsor should be the Title V director and/or his/her supervisor, or a senior leader most relevant to the implementation of the state project. The senior leader/sponsor will receive regular reports from the team co-leads. Time commitment: 1-2 hours per month

**Application Process**

Engagement with the Center is customized to the workforce development needs of the teams participating in Cohort 2021; the Center does not provide “cookie-cutter” services and the training curriculum is modified each year to meet the needs of the current cohort. In order to assess the readiness of potential applicants to enroll in Cohort 2021, the Center will use a two-part process.

**Step 1: Submit your Statement of Interest & Intent to Support**

***Applicants should complete and submit the Statement of Interest and Intent to Support sections below by March 15, 2021 at 5 pm local time*** to Rebecca Greenleaf, Training Coordinator, at [rebecca\_greenleaf@unc.edu](mailto:rebecca_greenleaf@unc.edu)***.*** This portion of the process is intended to help you clarify your goals and identify team members. It should be short and clear so that reviewers can begin to develop plans to support your team if accepted into Cohort 2021.

**Step 2: Participate in an Exploratory Telephone Conversation**

Applicants will participate in a one-hour exploratory conversation with a Center representative on March 16, 17, or 18, 2021. No additional in-depth preparation will be expected on the part of the applicant prior to the telephone conversation. However, those joining should have information about the Center and a copy of the application prior to the call so that they are able to participate. In addition to answering applicant questions, the following topics will be discussed: 1) state/jurisdiction’s current health transformation landscape and context for the work, 2) state/jurisdiction’s self-assessment of workforce status and goals for the three key areas, 3) strategies for authentic consumer/family partnership, and 4) opportunities for advancing health equity within the project. Accepted applicants will be notified by March 19, 2021.

Please include the following two sections in your application by cutting and pasting the forms provided below into a new document.

**1. Statement of Interest**

1. **Information for Team’s designated Point of Contact**

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| --- | --- |
| State/Jurisdiction |  |
| Name |  |
| Position/Title |  |
| Agency |  |
| Phone Number |  |
| Email Address |  |

1. **Team Table** (Please insert additional rows as necessary)

Please provide a list of team members based on how you currently understand your project. Additional team members may be identified later in the process and roles may shift as the project gets underway.

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| **Name** | **Title** | **Agency** | **Email & phone**  **(PLEASE CHECK FOR ACCURACY!)** | **Role**  Title V/CYSHCN staff,  Consumer/family partner,  Partner agency | **Level of involvement**  (indicate all that apply)  Co-lead,  Measurement Liaison, Learning Institute Leadership Team, Planning Team, Senior leader/sponsor |
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Have any of these team members worked with the Center in the past?

If so, please provide the name of the individual and briefly describe their Center-related activities.

1. **Health Transformation Challenge Description**

This section of the Application should describe your challenge and follow the guiding questions below. Please use 1-inch margins and 12-point font. Please use no more than two pages for this section (approximately 1-2 paragraphs per question listed below). Include any other relevant information that will help the Center team understand the context of your work.

1. **What current or planned health transformation challenge do you propose to use as a “practice laboratory”?** The challenge should be limited enough to be able to implement some components within 6-9 months, but expansive enough to have long-term goals related to internal program and/or policy changes, systems-level changes and population health outcomes.
2. **Is this health transformation challenge related to any of your state/jurisdiction’s NPMs, SPMs or ESMs?** If so, please describe briefly.
3. **What will success look like for your work with the Center?** (i.e. What will change for your workforce? What outcomes will be achieved? What is the “desired state” if you are successful in addressing this challenge? What will success look like from the consumer/community perspective? ) Please describe success in the short-term (6 months-2 years) as well as your vision of how this work will impact MCH populations in the long term.
4. **What are your workforce development goals?** (i.e. How will the team benefit from training and support in the following areas: change management/adaptive leadership, systems integration, and/or evidence-based decision making? Do you have workforce development goals related to health equity or family engagement?)
5. **How will family/consumer/community partnership be leveraged to further the goals of the proposed work with the Center?**
6. **What are the intersections between the health transformation challenge and health equity?**

Please indicate at least 5 possible times for your exploratory telephone conversation, and hold your selected times in the calendars of your team co-leads (or any other team members who can represent your team’s application). You will be notified of your timeslot as soon as possible.

\_\_ Tuesday, March 16: 9 - 10 am ET

\_\_ Tuesday, March 16: 10 - 11 am ET

\_\_ Tuesday, March 16: 11 am - 12 pm ET

\_\_ Tuesday, March 16: 12 - 1 pm ET

\_\_ Tuesday, March 16: 1 - 2 pm ET

\_\_ Tuesday, March 16: 2 -3 pm ET

\_\_ Tuesday, March 16: 3 - 4 pm ET

\_\_ Tuesday, March 16: 4 - 5 pm ET

\_\_ Wednesday, March 17: 9 - 10 am ET

\_\_ Wednesday, March 17: 10 - 11 am ET

\_\_ Wednesday, March 17: 11 am - 12 pm ET

\_\_ Wednesday, March 17: 12 - 1 pm ET

\_\_ Wednesday, March 17: 1 - 2 pm ET

\_\_ Wednesday, March 17: 2 -3 pm ET

\_\_ Wednesday, March 17: 3 - 4 pm ET

\_\_ Wednesday, March 17: 4 - 5 pm ET

\_\_ Thursday, March 18: 9 - 10 am ET

\_\_ Thursday, March 18: 10 - 11 am ET

\_\_ Thursday, March 18: 11 am - 12 pm ET

\_\_ Thursday, March 18: 12 - 1 pm ET

\_\_ Thursday, March 18: 1 - 2 pm ET

\_\_ Thursday, March 18: 2 -3 pm ET

\_\_ Thursday, March 18: 3 - 4 pm ET

\_\_ Thursday, March 18: 4 - 5 pm ET

**2. Intent to Support**

Please ensure all potential team members are aware of their participation in the learning process. The Center requires documentation of support from key team members as well as senior leaders who can help “clear the path” for the work to move ahead. We ask that the following individuals sign below to indicate their support:

1) Title V and/or CYSHCN Director

2) Any additional senior leaders who will be key to supporting the work

3) Team co-leads

4) At least one proposed team member from each agency involved in the proposed work

5) Person or people with lived experience if they have already been identified

By agreeing to have my name, title and organization listed below, I confirm that:

1. I have participated in the development and/or careful review of this application,
2. I agree with the content of this application,
3. If selected, my organization will make a good faith effort to participate fully in all Cohort activities with the National MCH Workforce Development Center, including:
   1. Webinar trainings
   2. In-state consultation visits
   3. Center evaluation activities throughout the Cohort experience
   4. Peer mentoring opportunities as appropriate
4. If selected, my organization will make a good faith effort to meet our agreed upon goals.

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| --- | --- | --- | --- |
| **Organization Name** | **Agency Representative Name** | **Agency Representative Title** | **Agency Representative Signature** |
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| Appendix A: Cohort 2020 Health Transformation Challenges | |
| **Alabama** | Alabama’s Team embarked on a planning process to use information gained through analysis of the current direct health care service delivery model to explore options for expanding to more population-based and infrastructure-building services. |
| **Indiana** | The Team from Indiana worked to broaden the Title V portfolio of activities using a systematic approach to strengthen partnerships, include the family voice, and create a new 5-year state action plan with performance measures that truly span the life course. |
| **Michigan** | Michigan’s Team worked to develop and implement a comprehensive evaluation plan to measure the Children’s Special Health Care Program’s capacity and ability to provide effective, efficient, and high-quality services. |
| **North Carolina** | North Carolina’s Team explored options for reducing the adverse effects of substance use, including opioids, on MCH populations by focusing on integrating best practices within existing streams of work both within the agency and through the work of other state partners. |
| **Texas** | The Team from Texas explored options for increasing collaboration for child, adolescent, and CSHCN populations in Texas by breaking down program silos and by implementing a comprehensive initiative promoting nutrition and healthy eating behaviors. |
| **Virginia** | Virginia’s Team worked to plan for, implement, scale, and sustain a mental health care navigation system for children connected to regional hubs to promote screening and facilitate access to mental health resources. |
| **Wisconsin** | Wisconsin’s Team worked on aligning adolescent health efforts to ensure the burden of accessing services and supports does not land on the youth and families served. |



Appendix B: Cohort 2020 Learning Institute Curriculum

**Day 1:**

* The National MCH Workforce Development Center Overview
* What does Health Transformation Look Like in 2020?
* Improving Your Conversational Capacity

**Day 2:**

* Leading Change: Building your Team for Collaborative Learning and Transformation
* Creating an Infrastructure for Effective Change
* Considering Your Challenge Through a Systems Lens

**Day 3:**

* Transforming your Leadership and Team Work with Strengths-Based Leadership
* Using Systems Tools to Support Complex Collaborations
* Viewing Your Challenge through an Implementation Lens
* Finding and Testing Potential Solutions

**Day 4:**

* Evidence-Based Strategies for Building and Sustaining Momentum
* Effective Partnerships Across Systems
* Monitoring Project Work to Inform Evaluation

Cohort 2020 Monthly Webinars

* Month 1: Welcome Webinar
* Month 2: Making Use of Project Measures
* Month 3: Leading Up and Across MCH Teams
* Month 4: Strategies for Promoting Health Equity in Your State
* Month 5: MCH in All Big P / little p Policies
* Month 6: Engaging Families and Consumers as Partners in MCH Work
* Month 7: Systems Integration Methods in Action
* **Month 8**: Celebration Webinar