



Kansas Maternal and Child Health (MCH) Community Based Grant Advisory Work Group

The purpose of Community-Based Advisory Work Group is to inform the delivery of services to MCH populations within local communities. This Work Group will:

- Collaborate on assuring mothers and children have access to quality MCH services across the state.
- Inform resource needs for local health department, federally qualified health centers, health facilities, and other nonprofit organizations (including universities) to provide community based MCH services.
- Provide feedback on the MCH community-based services grant application process (referred to as “Aid to Local/ATL”).
- Assist with the ongoing needs assessment of MCH populations and community based MCH providers and make recommendations for system and policy changes to improve access and quality of MCH services.

Work Group Facilitation & Engagement

Kansas Association of Local Health Departments (KALHD)

KALHD provides Work Group logistical, membership recruitment and communication, a virtual meeting platform, and meeting supports for the Work Group. KALHD is responsible for disseminating information to the Work Group Members in preparation for meetings, compiling meeting notes, and conducting appropriate follow-up with members to support forward momentum of the Work Group.

Kansas Department of Health and Environment (KDHE)

KDHE provides the guidance and direction to the Work Group to assure recommendations are aligned with federal and state requirements. This includes setting agendas based on current programmatic needs, provision of information and training for Work Group members to support understanding of the MCH service delivery system, and take back information, recommendations, and comments back to appropriate team members and leadership for consideration.

- BFH Point of Contact: Title V System of Care (SOC) Consultant
- BFH Team: MCH Director, CSHCN Director, MCH ATL Consultant, Community Partnership Unit Director, Children & Families Section Director

Other staff will be requested to attend as relevant to job duties and/or meeting agendas.

The **Title V SOC Consultant** will serve as the point of contact for KALHD, communicate with the rest of the internal team, and coordinate meeting agendas. The **Children & Families Section Director** will facilitate the discussion. The **BFH Team** will provide contextual support for convening the meetings, including provision of information, resources, data, etc.

Work Group Meeting Preparations

Preparing for Work Group meetings is a team effort and will include a partnership between all team members to provide input, guidance, and desired outcomes from meeting to meeting. Ideally, agendas will be drafted, discussed, and approved during MCH Leadership Team meetings. The BCHS staff will be consulted as needed to support the Work Group’s purpose and progress.

Membership

Geographic representation (rural, urban, frontier) across the state and representation of organizations actively working to improve systems for each of the five MCH population domains is critical to this process. The Work Group should be comprised of eleven (11) members as follows:

Northeast Public Health Region	Lawrence-Douglas County – Jennifer Bruns, jbruns@ldchealth.org
Northwest Public Health Region	Sheridan County – Monica Reuber, mreuber@schcmcd.com
North Central Public Health Region	Mitchell County – Cortney Murrow, mchddirector@yahoo.com
Southeast Public Health Region	Wilson County – Amy Lell, alell@wilsoncountykansas.org
Southwest Public Health Region	Finney County – Shruti Chhabra, schhabra@finneycounty.org
South Central Public Health Region	Reno County – Karen Hammersmith, karen.hammersmith@renogov.org
Federally Qualified Health Center (FQHC)	Community Health Center of SEK – Julie Laverack, jlaverack@chcsek.org
Federally Qualified Health Center (FQHC)	Care ARC – Melissa Smith, msmith@carearc.org
Hospital System Partner	Kearney County Hospital – Shaylee Mosher, smosher@kearnycountyhospital.com
Nonprofit/Community Organization	Delivering Change/Geary County – Shanea Bea, sbea@gchks.org
Nonprofit/Community Organization	Baby Talk/Sedgwick County – Cari Schmidt, Cschmidt3@kumc.edu

Note: Members do not have to be existing grantees, only an interest in pursuing the delivery of MCH services in the future.

At least one representative from the Local Public Health Program (LPHP) is desired to participate as an “ex officio” member to support coordinated ATL efforts. Other key MCH partners, such as WIC, PMI/TPTCM, Family Planning, SHCN, KPQC, and MIECHV will be invited as “ex officio” members as need to support cross-system connections and the braiding of MCH-related funds, as appropriate and allowable.

Work Group Meetings

Monthly virtual meetings will take place from September 2022 through January 2023 to inform resource needs to advise changes to the MCH community-based services grant application.

Month	Proposed Agenda
September 30, 2022	Member Introductions; Work Group Purpose; Review Data & BFH Proposal; Outline timeline and goals for the work group
October 21, 2022	Member Q & A; Proposal Discussion (e.g., Pros, Cons, Pitfalls, Concerns, Anticipations); Brainstorm MCH ATL application priorities and needs
November 18, 2022	Review proposed application revisions (e.g., form, process, requirements); Discuss widespread communication & messaging needs
December 16, 2022 January 20, 2023	Finalize communication & messaging; Host community/public input sessions

**Note: the above schedule is proposed based on the desire to change the timing of the application process to reflect funding cycles and grant years in alignment with the Federal Fiscal Year (October 1 to September 30). Changes to that timing will require adjustments in the above table.*

Once the FFY2024/FFY2025 application process and awards are established, the Group should consider shifting to every other month to monitor the changes implemented through CY2023 and then quarterly in CY2024.

Work Group Coordination

This work group will serve a specific purpose to inform the future of the MCH ATL grant program and support ongoing monitoring and assessment of needs associated with local MCH service delivery. It is notable that there is some potential overlap with other existing advisory groups, such as the Kansas Maternal and Child Health Council (KMCHC) and the Family Advisory Council (FAC). The below chart can outline the differences between these MCH-related advisory groups.

	Community Based Grant Work Group	Kansas Maternal and Child Health Council	Family Advisory Council
Membership Composition	Local health departments, federally qualified health centers, health facilities, and other nonprofit organizations that have/are/could provide community based MCH services.	Representatives of state, local and private organizations or groups, and those with lived experiences, who serve as a champion for integrated, coordinated services across all systems and sectors.	Individuals with lived experiences, parents, and consumer advocates interested in driving positive changes to MCH services and inform programs for women, children, and families.
Purpose	Collaborate with KDHE on developing the resources, service delivery model, and grant application for the MCH ATL grant program.	Advise KDHE and the overall MCH service delivery system on opportunities to improve the health of MCH populations and their families.	Partner with KDHE to assure individuals and families are engaged in program planning, evaluation, service delivery, and policy development as partners and leaders in their communities.
Scope	Development of the annual grant application and reporting needs; Ongoing assessment and monitoring of the effectiveness and adequacy of the service delivery model funded through the MCH Services Block Grant to fill MCH service gaps in local communities.	Coordination, integration and alignment across all MCH-serving agencies and state programs; Advise on specific MCH population needs; Champions to support improving MCH health outcomes; Focuses efforts among partners and recommends collaborative initiatives.	Similar scope to the KMCHC, however this council is solely comprised of families and individuals with lived experiences and a passion to improve the health of KS children and families; Assures the needs of families and consumers are central to programming, initiatives, and special projects.
Council Structure	1 Focused Work Group; 11 members	7 Work Groups (Aligned with the 7 State MCH Priorities); Currently 31 partners	5 Work Groups (Women/Maternal, Early Childhood, Children, Adolescents, and CSHCN); Currently 36 members
Specific Oversight Expectation	MCH Aid to Local Program (a key strategy to advance several objectives within the MCH Services State Action Plan)	Public/Private Partnerships and the broad MCH service delivery systems across KS; Trends associated with MCH Priorities	Family/consumer partnership and engagement efforts across the Bureau of Family Health/MCH Services
Key Role	Assist with the restructure of the ATL Program and provide annual recommendations.	Monitoring of the Title V MCH Services Block Grant State Action Plan	Dedicated working group to advance the MCH Block Grant State Action Plan

Each group ultimately operates independently, but openness and transparency is crucial to these partnerships. In support of this, KMCHC and FAC members will be invited to the public input sessions to learn of, and provide feedback on, the final recommendations from this Work Group. It is not intended that one group must approve the others' work or recommendations. These are complimentary groups with specific roles and purpose in support of the Kansas Title V Program.