

2021 Title V RFA

Notice of Funding Opportunity Webinar
February 16, 2021



Division of
**Maternal &
Child Health**



IN IT TOGETHER

Indiana Title V Needs Assessment

Notice of Funding Opportunity

- ▶ Welcome!
- ▶ New State Action Plan & Needs Assessment Findings
(<https://www.in.gov/isdh/28508.htm>)
- ▶ Funding Opportunity: Open now – March 31
(<https://www.in.gov/isdh/22430.htm>)
- ▶ Changes & Goals of Funding Opportunity



Primary and Secondary Contact Information

- ▶ The primary and secondary contacts are the individuals who are working on this program/initiative.
 - These individuals should be the main point of contacts throughout the grant period

Primary Contact Information	
Name:	
Organization:	
Address:	
Phone:	
E-mail Address:	

Submission Overview

- ▶ Please answer the questions to the best of your ability.
- ▶ Funding Cap: please only ask for the amount of funding your program/initiative requires.
- ▶ If you are including salaries, please only list staff who are working directly on the program/initiative
 - Please ensure salaries and staff do not overlap with other funding streams

Submission Overview	
What is the name of your program or initiative?	
Provide a one-sentence description of your program or initiative.	
Is the proposed program or initiative new and not yet started OR current and existing?	<input type="checkbox"/> New/ Not yet started. <input type="checkbox"/> Current/Existing
What is the estimated cost per year of your proposed program or initiative?	
What is the reach of your program or initiative? Please provide the county/counties and the number of individuals to be served per year.	<input type="checkbox"/> County/Counties Served: _____ <input type="checkbox"/> Number of individuals to be served: _____

Program/Initiative Overview

- ▶ One application per organization
- ▶ Please select a population health domain.
 - You may select all that apply
- ▶ Please select a National Performance Measure(NPM) and/or a State Performance Measure
 - You may select up to 2
- ▶ We intend to fund a variety of different programs/initiatives across Indiana

Program/Initiative Overview	
<p>What Title V Block Grant population health domain(s) is your program/initiative serving?</p>	<input type="checkbox"/> Women/Maternal Health – Women before, during, and beyond pregnancy/across their life course. <input type="checkbox"/> Perinatal/Infant Health – Babies immediately before birth through the first year of life (<365 days). <input type="checkbox"/> Child Health – Children ages 1 through 9. <input type="checkbox"/> Adolescent Health – Adolescents ages ten through twenty-one.
<p>Which Title V National Performance Measure (NPM) or State Performance Measure (SPM) does your program/initiative address?</p> <p><i>Check up to two that apply</i></p> <p>Click here for a description of each NPM.</p>	<input type="checkbox"/> NPM 1: Well-Woman Visits: Percent of women, ages 18 through 44, with a preventive medical visit in the past year. <i>Examples of potential programs/initiatives can be:</i> <ul style="list-style-type: none"> • Group Prenatal and Postpartum Care • Postpartum Care • Parenting Support • Well-woman annual visits • Access to trusted, family-centered care. <input type="checkbox"/> NPM 7.1: Injury Hospitalization – Ages 0 to 9: Number of hospital admissions with a primary diagnosis of unintentional or intentional injury among children, ages 0 through 9 (excludes in-hospital deaths). <i>Examples of potential programs/initiatives can be:</i> <ul style="list-style-type: none"> • Child Fatality Review • Fetal-Infant Mortality Review • Community Action Team Building • Sudden Unexpected Infant Death (SUID) Prevention • Community-Level Injury Prevention (e.g. - Abusive Head Trauma, Drowning, ATV, Home Safety) <input type="checkbox"/> NPM 7.2: Injury Hospitalization - Ages 10 through 19: Number of hospital admissions with a primary diagnosis of unintentional or intentional injury among adolescents, ages 10 through 19 (excludes in-hospital deaths). <i>Examples of potential programs/initiatives can be:</i> <ul style="list-style-type: none"> • Suicide prevention for teens (evidence-based prevention programs, school and/or community-based initiatives) • Child Fatality Review • Community Action Team Building • Community-Level Injury Prevention (e.g. - drowning, ATV accidents) • Adverse Childhood Experiences (ACEs) and Social Determinants of Health • Mental Health programming for adolescents <input type="checkbox"/> SPM 1: Prevent substance use - including alcohol, tobacco, and other drugs - among pregnant women. <i>Examples of potential programs/initiatives can be:</i> <ul style="list-style-type: none"> • Additional support for substance use and linking MCH populations to care. <input type="checkbox"/> SPM 3: Reduce disparities in Infant Mortality. NOTE: proposals in this category must demonstrate how they will deliberately work on reducing infant mortality in the non-Hispanic Black population. <i>Examples of potential programs/initiatives can be:</i> <ul style="list-style-type: none"> • Safe Sleep Initiatives • Breastfeeding Initiatives • Fetal-Infant Mortality Review • Child Fatality Review • Community Action Team Building <input type="checkbox"/> SPM 5: Promotion of optimal health development and well-being. <i>Examples of potential programs/initiatives can be:</i> <ul style="list-style-type: none"> • Connecting children to care • Developmental milestones • Oral health initiatives • Adverse Childhood Experiences (ACEs) and Social Determinants of Health <input type="checkbox"/> SPM 6: Strengthen mental, social, and emotional well-being through partnerships and programs that build capacity and reduce stigma. <i>Examples of potential programs/initiatives can be:</i> <ul style="list-style-type: none"> • Programs/initiatives to connect/strengthen MCH population with support for improved mental, social and emotional health

Questions 1 – 4 Instructions

- ▶ For the following questions, please give an overview of your proposal.
- ▶ Please respond to the questions 1 – 4 using the box provided.

- 1. Program/Initiative Description:** Please provide an overall description of your program/initiative and how it intends to help achieve the goals of the selected NPM or SPM.
- 2. Need:** What does your program/initiative address and how specifically does it address this need?
 - In your response, be sure to include how you identified the need, who was involved in the identification process, and sources of information that support the identified need.
- 3. Intended Benefit:** How does your program/initiative benefit the key population you identified in your program/initiative description?
- 4. Health Equity:** In what ways does your program/initiative address health inequities and discrimination in your key population?
 - The Robert Wood Johnson Foundation defines health equity as "*everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.*"

Next Steps

- ▶ **Step 1:** All proposals will be reviewed by IDOH staff. After review, some applicants will be asked to move on to Step 2 by **April 9**
- ▶ **Step 2:** Applicants in this round will be asked to present your program/initiative in a more detailed 15- minute presentation with a 15- minute question and answer.
 - A PowerPoint presentation template will be provided
 - Presentations will be held the week of **April 19 – 23**
- ▶ **If you are selected for funding:**
 - You will be asked to provide a scope of work and budget to being the contract with IDOH
 - Your funding will begin on October 1, 2021

FAQs

- ▶ Can my organization submit more than 1 application?
 - ▶ Can I apply for more than 1 program/initiative?
 - ▶ Is there a funding cap?
 - ▶ How long is the contract for?
-
- ▶ We will post and update FAQs to the website until **March 24**

THANK YOU

If you have any questions, please contact ISDHMCH@isdh.in.gov.

