



**Maternal and Child Health Advisory Task Force**  
**Friday, June 14, 2024**  
**9:30 am – 11:30 a.m.**

*The duties of the Maternal and Child Health (MCH) Advisory Task Force are to review and report on the health care needs of mothers and children; review and report on MCH services provided to mothers and children; review and report to the commissioner program guidelines and criteria essential to providing an effective MCH program to low-income populations and high risk persons; make recommendations to the commissioner for the use of other federal and state funds available to meet MCH needs; make recommendations to the commissioner of health on priorities for funding MCH services (prenatal, delivery, postpartum; comprehensive health care; adolescent health; family planning; preventative dental; services for children with special health care needs; and any other services that promote the health of mothers and children); and establish in consultation with the commissioner statewide outcomes that will improve the health status of mothers and children. (MN Statute 145.8811)*

**AGENDA**

AGENDA ITEM	TIME	SPEAKERS
<b>I. Welcome/Introductions and Chair Remarks</b> <i>Introductions (including new members) meeting announcements, approval of June agenda Ice Breaker question (put in chat or during introduction)</i>	15 min. 9:30-9:45	Sameerah Bilal-Roby, Chair
<b>II. Legislative Update</b>	15 min. 9:45-10:00	Autumn Baum, MDH Assistant Legislative Director
<b>III. CFH Updates</b> <i>(Meeting Materials: Director and Child and Family Health Section)</i>	10 min. 10:00-10:10	Noya Woodrich, CFH Division Director
<b>IV. MCH Advisory Task Force Restructure</b>	5 min. 10:10-10:15	Judy Plante, Lanterna Consulting, Inc.
<b>V. MCH Advisory Task Force Subcommittee Updates</b>	15 min. 10-15-10:30	Nicole Brown, CYSHN Manager Section, MDH
<b>5-Minute Break</b>		
<b>VI. Perinatal Subcommittee Update</b>	20 min. 10:35-10:55	Joi Elmore, Perinatal Subcommittee Co-chair Michelle O’Brien, Perinatal Subcommittee Co-chair
<b>VII. Title V Application and Needs Assessment Update</b> <i>(Update includes Q&amp;A)</i>	20 min. 10:55-11:15	Elizabeth Taylor-Schiro, Title V Coordinator, MDH
<b>VIII. Member News and Issues in the Field</b> <i>Share information about issues of interest to Task Force members, including recent successes in your work, emerging issues, challenges</i>	15 min. 11:15-11:30	Task Force Members

**OVER**

AGENDA ITEM	TIME	SPEAKERS
<i>you or your clients are experiencing, or committees on which you serve. This is your time to share.</i>		
<b>IX. Adjourn</b>		

OVER

**MATERNAL AND CHILD HEALTH ADVISORY TASK FORCE  
Membership List (updated 05/15/2024)**

Consumer Representatives	Community Health Board Representatives	Professional Representatives
<p><b>Najoica (Joi) Elmore</b> Wayside Recovery Center 1600 University Ave. W, Suite 500 St. Paul, MN 55104 Tel: 651-747-5525 <a href="mailto:nelmore001@gmail.com">nelmore001@gmail.com</a> Term start date: 1/1/23 Term end date: 1/1/27</p> <p><b>MCH Area(s) of Expertise:</b> Mental health, women’s health, family advocacy, trauma informed care, health equity, community engagement, health promotion and prevention, Child &amp; Teen Checkups</p>	<p><b>Brittany Becker, RN, BSN, PHN, CLS</b> 22182 447th Ave Arlington, MN 55307 Tel: 507-276-3165 <a href="mailto:brittany.becker@mcleodcountymn.gov">brittany.becker@mcleodcountymn.gov</a> Term start date: 4/15/24 Term end date: 1/3/28</p> <p><b>MCH Area(s) of Expertise:</b> Early Childhood, Family Home Visiting, Health Promotions &amp; Prevention, WIC, Prenatal Care</p>	<p><b>Sameerah Bilal-Roby (Chair, Executive Committee)</b> Amherst H. Wilder Foundation 451 Lexington Pkwy. N St. Paul, MN 55104 Tel: 612-309-6874 <a href="mailto:sameerah.bilal-roby@wilder.org">sameerah.bilal-roby@wilder.org</a> Term start date: 1/1/23 Term end date: 1/1/27</p> <p><b>MCH Area(s) of Expertise:</b> Wellbeing wellness promotion, family advocacy, trauma informed care, early childhood, infant mortality, community engagement</p>
<p><b>Andrea Lawson MSA, MPH</b> 9682 Winslow Chase Maple Grove, MN 55311 <a href="mailto:Andrea.lawson725@gmail.com">Andrea.lawson725@gmail.com</a> Tel: 651-491-4272 Term start date: 4/15/24 Term ends 1/3/28</p> <p><b>MCH Area(s) of Expertise:</b> Children &amp; Youth with Special Health Needs, Health Care Administration, Health Equity, Health Promotions &amp; Prevention, Public Health, Well-being Wellness Promotion</p>	<p><b>Rachel Gilbertson (Chair-Elect, Executive Committee)</b> 6690 W. Arrowhead Rd. Saginaw, MN 55779 Tel: 218-213-0161 <a href="mailto:gilbertsonr@communityhealthboard.org">gilbertsonr@communityhealthboard.org</a> Term start date: 4/5/23 Term end date: 1/3/28</p> <p><b>MCH Area(s) of Expertise):</b> Rural/Local Public Health, health equity</p>	<p><b>Stephanie de Sam Lazaro (Executive Committee)</b> St. Catherine University 2004 Randolph Ave. #4240 St. Paul, MN 55105 Tel: 651-690-6622 <a href="mailto:slidesamlazaro@stkate.edu">slidesamlazaro@stkate.edu</a> Term start date: 1/1/23 Term end date: 1/3/28</p> <p><b>MCH Area(s) of Expertise:</b> Wellbeing wellness promotion, disabilities, family advocacy, trauma informed care, health equity, community-based health care, early childhood, community engagement, health promotion &amp; prevention, pediatric oral health, C&amp;TC</p>
<p><b>Eugene Nichols (Executive Committee)</b> 5019 David Ct. Shoreview, MN 55126 Tel: 651-343-2048 <a href="mailto:eugene.nichols@comcast.net">eugene.nichols@comcast.net</a> Term start date: 1/1/23 Term ends date: 1/3/28</p>	<p><b>Stephanie Graves (Executive Committee)</b> Minneapolis Health Department 250 South 4th St. Minneapolis, MN 55415 Tel: 612-673-3735 <a href="mailto:stephanie.graves@minneapolismn.gov">stephanie.graves@minneapolismn.gov</a> Term start date: 1/2/24</p>	<p><b>Nicole Fernandez</b> Wayside Recovery Center 1600 University Ave. W, Suite 500 St. Paul, MN 55104 Tel: 763-843-0524 <a href="mailto:nicole.fernandez@waysiderc.org">nicole.fernandez@waysiderc.org</a> Term start date: 4/5/2023 Term end date: 1/1/27</p>

Consumer Representatives	Community Health Board Representatives	Professional Representatives
<p><b>MCH Areas(s) of Expertise:</b> Past member Ramsey County HFA advisory committee advocacy for mothers with children between ages 0-5; RCCHAC; board member Face to Face; Ramsey County Charter Commission</p>	<p><i>Term ends: 1/3/28</i></p> <p><b>MCH Area(s) of Expertise:</b> Early childhood and school readiness, targeted home visiting, infant mortality prevention, safety net services, and community engagement</p>	<p><b>MCH Area(s) of Expertise:</b> Medical care of women and children including prenatal care, breastfeeding support/promotion, substance use disorders including opiate use disorder in pregnant and parenting women, trauma informed care, resilience/mindfulness/mental wellbeing</p>
<p><b>Elizabeth Pihlaja</b> 821 S. Sheridan St. Fergus Falls, MN 56537 Tel: 701-426-3100 <a href="mailto:epihlaja@gmail.com">epihlaja@gmail.com</a> <i>Term start date (R): 4/5/23</i> <i>Term end date: 1/1/27</i></p> <p><b>MCH Area(s) of Expertise:</b> Health care programs, health care systems, mental health, well-being wellness promotion, women’s health, family advocacy, prenatal care, health equity, early childhood, infant mortality, reproductive health, community engagement, family home visiting, health promotion and prevention</p>	<p><b>Meredith O’Brien</b> Hennepin County Public Health 525 Portland Ave. Minneapolis, MN 55415 Tel: 612-384-7006 <a href="mailto:meredith.obrien@hennepin.us">meredith.obrien@hennepin.us</a> <i>Term start date: 1/1/23</i> <i>Term end date: 1/1/27</i></p> <p><b>MCH Area(s) of Expertise:</b> Mental health, women’s health, public health, early childhood, family home visiting, Child &amp; Teen Checkups, WIC</p>	<p><b>Rachael Joseph</b> 3729 13<sup>th</sup> Ave. S Minneapolis, MN 55407 Tel: 612-710-1160 <a href="mailto:rjoseph@thefamilypartnership.org">rjoseph@thefamilypartnership.org</a> <i>Term start date: 4/5/23</i> <i>Term end date: 1/1/27</i></p> <p><b>MCH Area(s) of Expertise:</b> Gun violence prevention, trauma, and ACEs</p>
<p><b>Candi Seil</b> 1957 Raspberry Lane Shakopee, MN 55379 Tel: 651-291-5303 <a href="mailto:candiwalz@gmail.com">candiwalz@gmail.com</a> <i>Term start date: 4/15/24</i> <i>Term end date: 1/3/28</i></p> <p><b>MCH Area(s) of Expertise:</b> Community Engagement, Children &amp; Youth with Special Health Needs, Disabilities, Early Childhood, Family Advocacy, Family Home Visiting, Health Equity, Prenatal Care, Well-being Wellness Promotion</p>	<p><b>Sadie Swenson</b> Olmsted County Public Health 2100 Campus Dr. SE, Suite 100 Rochester, MN 55904 Tel: 507-273-3239 <a href="mailto:sadie.swenson@olmstedcounty.gov">sadie.swenson@olmstedcounty.gov</a> <i>Term start date: 4/5/23</i> <i>Term end date: 1/1/27</i></p> <p><b>MCH Area(s) of Expertise:</b> Family home visiting, documentation</p>	<p><b>Kadijah Mussa</b> College of Education and Human Development University of Minnesota <a href="mailto:Mussa007@umn.edu">Mussa007@umn.edu</a> <i>Term start date: 4/15/24</i> <i>Term end date: 1/3/28</i></p> <p><b>MCH Area(s) of Expertise:</b> Mental Health</p>

**EX-OFFICIO MEMBERS**

<p><b>Carolyn Allshouse</b>                  Family Voices of Minnesota                  2223 5th Street, Unit 10933                  St. Paul, MN 55110                  Tel: 612-210-5547  <a href="mailto:Carolyn@familyvoicesmn.org">Carolyn@familyvoicesmn.org</a></p> <p><b>MCH Area(s) of Expertise:</b> CYSHN, health care programs, health care systems, public health, disabilities, family advocacy, Medicaid managed care, community engagement.</p>	<p><b>Vanessa Bembridge</b>                  4825 103<sup>rd</sup> Ave. N                  Brooklyn Park, MN 55443                  Tel: 612-596-0719  <a href="mailto:vanessa.bembridge@hennepin.us">vanessa.bembridge@hennepin.us</a></p> <p><b>MCH Area(s) of Expertise:</b> Health equity, quality improvement, population health, maternal and child health, health plan and government relations, and Medicaid policy.</p>	<p><b>Tricia Brisbine</b>                  7201 103<sup>rd</sup> Ave. N                  Brooklyn Park, MN 55445                  Tel: 612-968-2254  <a href="mailto:tkbrisbine@gmail.com">tkbrisbine@gmail.com</a></p> <p><b>MCH Area(s) of Expertise:</b> Children and Youth with Special Health Needs. Master’s degree and a background in clinical psychology with emphasis in early childhood mental health. Disabilities, Healthcare Programs, Healthcare systems, mental health, and family advocacy</p>
<p><b>Sarah Brown</b>                  HealthPartners                  8170 33<sup>rd</sup> Ave. S – MS 21103C                  Bloomington, MN 55425                  Tel:  <a href="mailto:sarah.i.brown@healthpartners.com">sarah.i.brown@healthpartners.com</a></p> <p><b>MCH Area(s) of Expertise:</b> Maternal/child health, fetal alcohol spectrum disorders (FASD), and Medicaid</p>	<p><b>Kara Hamilton-McGraw</b>                  March of Dimes                  Tel: 248-359-1577  <a href="mailto:khamiltonmcgraw@marchofdimes.org">khamiltonmcgraw@marchofdimes.org</a></p> <p><b>MCH Area(s) of Expertise:</b> TBD</p>	<p><b>Marie Malinowski</b>                  Blue Cross Blue Shield of Minnesota                  812 Ivy Ln.                  Eagan, MN 55123                  Tel: 651-662-1952  <a href="mailto:marie.malinowski@bluecrossmn.com">marie.malinowski@bluecrossmn.com</a></p> <p><b>MCH Area(s) of Expertise:</b> Population Health, Maternal Health, Obesity (prevention), Diabetes, Social Determinants of Health (LEP, access to care), health care programs, well-being/wellness, women’s health, Health Equity, reproductive health, Medicaid managed care, community engagement, health promotion/prevention, pediatric oral health</p>
<p><b>Michelle O’Brien, MD, MPH</b>                  258 S. Macalester St., Unit B                  St. Paul, MN 55105                  Tel: 651-342-3034  <a href="mailto:zenirishlass@gmail.com">zenirishlass@gmail.com</a></p> <p><b>MCH Area(s) of Expertise:</b> Medical care of women and children including prenatal care, breastfeeding support/promotion, substance use disorders including opiate use disorder in pregnant and parenting women, trauma informed care, resilience/mindfulness/mental wellbeing.</p>	<p><b>Vacant</b>                  PACER Center</p>	<p><b>Lindsey Wimmer</b>                  11466 Landing Rd.                  Eden Prairie, MN 55347                  Tel: 952-941-0114  <a href="mailto:lindsey@starlegacyfoundation.org">lindsey@starlegacyfoundation.org</a></p> <p><b>MCH Area(s) of Expertise:</b> Health care systems, mental health, well-being wellness promotion, women’s health, public health, family advocacy, prenatal care, community-based health care, early childhood, infant mortality, community engagement, health promotion and prevention.</p>

**MDH Staff**

Brooke Cunningham, Commissioner

Maria Sarabia, Asst. Commissioner

Noya Woodrich

Savannah Riddle

Nicole Brown

Judy Edwards

Jennie Lippert

Elizabeth Taylor-Schiro

Amy Stauter

**Work Groups/Committees**

Family Home Visiting

Perinatal Subcommittee

Infant and Early Childhood

Children and Youth with Special Health Needs

Parent/Youth Work Group

I-MOM Work Group

# Child and Family Health Division Updates for the MCH Advisory Task Force

MAY 2024

## Director's office

A colleague at DHS shared this report, [Dark matter. A creative exploration into Black Education \(www.aalftc.org/insights-center/#dark-matter-community-report\)](http://www.aalftc.org/insights-center/#dark-matter-community-report) with a group of us doing some work around policy and equity for the new Department of Children, Youth and Families. It is an interesting read, so I share with you.

WIC in the news

- WIC manager, Kate Franken, was interviewed and here is a link to the article: [WIC faces a budget shortfall. For millions of women and young children, more than nutrition is at stake \(www.nbcnews.com/news/us-news/wic-faces-budget-shortfall-millions-women-children-nutrition-stake-rcna138974\)](http://www.nbcnews.com/news/us-news/wic-faces-budget-shortfall-millions-women-children-nutrition-stake-rcna138974)
- Secretary Vilsack of the US Department of Agriculture was in town a couple weeks ago visiting a WIC clinic in Ramsey County. There was a press conference that featured a couple WIC participants, our own Kate Franken, and our commissioner. It is 45 minutes long, but worth the watch: [Press conference with USDA Secretary Tom Vilsack at Ramsey County WIC clinic - Feb. 1, 2024 \(www.youtube.com/watch?v=kNUDU-ELquU\)](http://www.youtube.com/watch?v=kNUDU-ELquU)

At our January all-staff meeting Molly Sullivan of the MN Story Collective presented on that effort. Since then, a few of you have had the opportunity to meet with her (or will meet with her) to discuss further partnership. I am sharing with you the report from [MN Story Collective – Phase 1 \(PDF\) \(www.content.govdelivery.com/attachments/MNMDH/2024/02/27/file\\_attachments/2796405/mnstorycoll.pdf\)](#). I have joined the steering committee for this project and look forward to sharing more with you as the project enters Phase II.

Here are some Family Home Visiting videos created by Wellshare International:

- [Parenting Educational Video - Somali \(www.youtube.com/watch?v=Fx5mX0mHOU0\)](http://www.youtube.com/watch?v=Fx5mX0mHOU0)
- [Parenting Educational Video - Oromo \(www.youtube.com/watch?v=1PF1ZOy5iyE\)](http://www.youtube.com/watch?v=1PF1ZOy5iyE)

Early childhood workforce: new resources have been created to support the early childhood workforce in Minnesota. This project was created through PDG and involved staff from MDE, DHS, the Children's Cabinet, and MDH.

- **Document:** Explore the early childhood workforce - career pathways, professional development, degree programs, funding resources, quotes, and stories from the field, and more. [Minnesota's Early Childhood Workforce: Making a Difference in the Early Years \(PDF\) \(www.education.mn.gov/mdeprod/idcplg?IdcService=GET\\_FILE&dDocName=PROD083608&RevisionSelectionMethod=latestReleased&Rendition=primary\)](http://www.education.mn.gov/mdeprod/idcplg?IdcService=GET_FILE&dDocName=PROD083608&RevisionSelectionMethod=latestReleased&Rendition=primary)

## UPDATES FROM CFH

- **Videos:** Hear directly from early childhood workers across Minnesota as they share what inspires them to work with children and families, why they think the workforce is so important, why they love their jobs, and more. English and Spanish subtitles available for all videos.
  - [Stories from the Field: A Tribal Provider and an Early Childhood Mental Health Consultant \(www.youtube.com/watch?v=bvI7fbwLX38\)](https://www.youtube.com/watch?v=bvI7fbwLX38)
  - [Stories from the Field: An Early Childhood Special Education Teacher and an Early Head Start Teacher \(www.youtube.com/watch?v=MhTYH29dleI\)](https://www.youtube.com/watch?v=MhTYH29dleI)
  - [Stories from the Field: A Family Child Care Provider \(www.youtube.com/watch?v=l1P5\\_7eOTvY\)](https://www.youtube.com/watch?v=l1P5_7eOTvY)
  - [Stories from the Field: A Center-Based Child Care Teacher and a Parent Aware Coach \(www.youtube.com/watch?v=gQJgqkm962w\)](https://www.youtube.com/watch?v=gQJgqkm962w)

Association of Maternal & Child Health Programs (AMCHP) Conference – Myself, along with several CFH staff, and others from Minnesota traveled west to Oakland, California for the AMCHP Conference. The photo below is from Sunday evening when we gathered to chat a bit and get our group photo. I was able to spend some in person time with CFH staff, got to connect with friends at the national level, and met a few new people. As a Native person I was pleased to see a few more options in terms of learning about what folks in Indian country have going on in terms of maternal and child health. Elizabeth and I attended a luncheon session (invite only) hosted by the Community Health Acceleration Partnership on “Leveraging Philanthropy for State Initiatives.” I left that session with a couple ideas floating through my head – the goal, I think of attending events like this.



BUILD Initiative – I flew directly from California to Albuquerque, New Mexico to meet with other State partners from the Department of Education, Department of Human Services, and the Children’s Cabinet with other BUILD Initiative partners from Oregon, South Carolina, Texas, Illinois, Wisconsin, and others. It was nice to spend time with fellow State



partners (there were 12 of us total) and talk about early childhood matters that we are working on in Minnesota. Subjects included the MN Story Collective, the Pre-School Development Grant, and the new agency. The BUILD Initiative planners always include a couple nice field trips in the event. On the first day we went to the [Indian Pueblo Cultural Center \(www.indianpueblo.org/\)](http://www.indianpueblo.org/). The next day the President of this organization, along with a few other local folks, attended to talk about the children-oriented initiatives that they operate. On the last day we went to the [Acoma Pueblo and the Sky City Cultural Center \(www.acomaskycity.org/page/home\)](http://www.acomaskycity.org/page/home). Here we learned about the Pueblo's history and their efforts to retain their language and culture for their children. (If you are ever in New Mexico, I highly recommend a visit here – seriously!!)

Title V: The 2025 Title V Needs Assessment is moving along and is currently in Phase 3: Prioritization and Action Planning. Surveys from our staff and partners were due June 7.

## Help Me Connect

### New provider stories

Learn from local early childhood navigators as they share about their work supporting families with young children and using the [Help Me Connect \(www.helpmeconnect.web.health.state.mn.us/HelpMeConnect\)](http://www.helpmeconnect.web.health.state.mn.us/HelpMeConnect) website as a tool to find state and local programs in their communities. Three new videos highlight the relationship between a trusted professional and a parent/guardian as a key component to supporting families and their connections to services.

[Long video Both Providers \(www.youtube.com/watch?v=RGORS9k1FKY\)](http://www.youtube.com/watch?v=RGORS9k1FKY) (2:21)

[Short Video Minneapolis \(www.youtube.com/watch?v=rFvryNZCB0k\)](http://www.youtube.com/watch?v=rFvryNZCB0k)(0:57)

[Short Video Northfield-Faribault \(www.youtube.com/watch?v=oPWbmN-4zQI\)](http://www.youtube.com/watch?v=oPWbmN-4zQI) (0:41)

## Health equity

Here are two examples of how health equity is becoming embedded in staff's work.

### Spotlight: Black, Indigenous, and People of Color (BIPOC) community of practice

The child and family health division's BIPOC community of practice exists to provide a space for BIPOC staff and allies to support one another and amplify the voices and experiences of BIPOC staff and the BIPOC communities we serve. The group also works to create learning opportunities about race, equity, and social justice for division staff; provide recommendations to leadership about how to create a more equitable work environment; and advocate for racial equity in public health practice, systems, and policies. All are welcome who share these goals.

A few highlights of BIPOC community of practice projects in recent years:

In 2022, members participated in developing diversity and equity questions to be included in an interview guide from the human resources team, as well as participated in the hiring process for the director of the Center for Health Equity.

In late 2022 to early 2023, members led an inquiry into division staff's awareness and completion of the Tribal State Relations Training. This led to increased communication and participation across the division in the Tribal State Relations Training, as well as a new activity/measure in our Title V work related to the American Indian Family Health priority.

In 2023, members started a division-wide monthly health equity reflective practice group to reflect on and discuss short materials related to health equity and its' connection to our professional roles. Through May 2024, the health equity reflective practice group will be discussing one characteristic each month from the article "[The Characteristics of White Supremacy Culture](http://www.whitesupremacyculture.info/characteristics.html)" ([www.whitesupremacyculture.info/characteristics.html](http://www.whitesupremacyculture.info/characteristics.html)) by Tema Okun.

### Spotlight: Learning Journey 2.0 reflections

A second group of child and family health team members are participating in a year-long learning experience offered through the [National Maternal and Child Health Workforce Development Center \(www.mchwdc.unc.edu/\)](http://www.mchwdc.unc.edu/) with the goal to embed and elevate equity in all areas of work throughout the division. The experience, called a Learning Journey, strives to connect health department teams to tools, resources, and support for tackling a self-identified challenge.



The new Learning Journey group, which refers to each other as "the squad," strengthened their connections and gained insights in their complimentary skill sets and roles within the team through an in-person [Learning Institute \(www.mchwdc.unc.edu/trainings/learning-institute-2024/\)](http://www.mchwdc.unc.edu/trainings/learning-institute-2024/) in early March. To help drive the change-management mindset, this team has:

- Explored connection circles and casual loop diagrams to examine the root causes of challenges, understand circles of relatedness, and help identify key leverage points for action.
- Reaffirmed the CFH health equity aim statement – *to support system change to counter the inequities and work culture that white supremacy and other systems of oppression have created because people most impacted by disparities deserve the right to optimal health outcomes.*
- Engaged in core conversations – to practice sharing, listening, and asking tough questions.

The Learning Journey squad was also introduced to the equity theory of change model which may help drive the process of how all staff consider health equity in projects and discussions.

The second Learning Journey squad is building upon the efforts of the first Learning Journey team that developed a health equity aim statement, built a 30/30 tool to help prioritize and plan activities, and started a health equity inventory to identify the great work that is already underway to elevate equity work in the division. This initial team also drafted a health equity

workplan from the strategic health equity report developed by an external consultant. A division-wide system support mapping activity was also launched to help all staff understand their role as it relates to health equity.

## Children and Youth with Special Health Needs (CYSHN) section

### June is National Cytomegalovirus Awareness Month

Cytomegalovirus (CMV) is the most common infectious cause of birth defects in the U.S. About 1 out of 5 children with congenital CMV will be born with or develop a serious health condition which can include hearing loss, vision loss, cerebral palsy, seizures, intellectual disability, and developmental delay.

CYSHN will be sharing information about CMV throughout this awareness month and a public awareness campaign is planned to start in June, as well.

To learn more, visit the [cytomegalovirus and congenital cytomegalovirus \(www.health.state.mn.us/cmvmv\)](http://www.health.state.mn.us/cmvmv) or contact [Gina Liverseed \(gina.liverseed@state.mn.us\)](mailto:gina.liverseed@state.mn.us).

### Data from one year of screening all newborns for Cytomegalovirus in Minnesota

Minnesota has been screening newborns for Cytomegalovirus (CMV) for just over one year and has screened approximately 60,000 newborns. Audiologists Kirsten Coverstone and Darcia Dierking and CMV nurse specialist Gina Liverseed from MDH wrote an [article for the Minnesota Academy of Audiology \(www.minnesotaaudiology.org/resources/Newsletters/2024/May%202024%20MAA%20newsletter.pdf\)](http://www.minnesotaaudiology.org/resources/Newsletters/2024/May%202024%20MAA%20newsletter.pdf) presenting data collected in the last year. They also detail audiological guidelines for children born with congenital CMV and information on family support options.

### Local Public Health CYSHN Conference Recap

The recent CYSHN local public health conference, held for the first time in greater Minnesota, marked a significant milestone as the largest CYSHN-hosted event since the annual meeting began in 2013. The conference brought together approximately 105 local public health staff, 25 MDH staff, and 18 speakers, parent panelists, and guests.

The conference featured notable sessions, including "Charting the LifeCourse" with Marcy LaCroix, "When it All Needs to be Done" with keynote Erica Barnes, "Navigating Unconscious Biases" with Rachel Garaghty and Lisa Gemlo, and "Fostering Joy" with Candace Lindow-Davies. Additionally, there were breakout sessions on language acquisition, CMV, and grief and bereavement support, along with two panels featuring parents and family support organizations.

## **CHSTRONG KIDS – Congenital Heart Survey To Recognize Outcomes, Needs, and well-being of KIDS.**

As of May 21, we sent 1097 surveys to parents/caregivers of children with certain congenital heart defects (CHDs) in Minnesota. CHSTRONG KIDS gathers information about healthcare use, education, social experiences, and quality of life from families of children with heart defects. This information will help identify important issues for children and adolescents with heart defects and their parents or caregivers. Surveys will be sent throughout the summer. Additional information about CHSTRONG KIDS can be found at the links below:

[About CHSTRONG KIDS \(www.cdc.gov/heart-defects/chstrong-kids\)](http://www.cdc.gov/heart-defects/chstrong-kids)

[CHSTRONG Kids Survey](http://www.health.state.mn.us/people/childrenyouth/birthdefects/chstrong.html)

[\(www.health.state.mn.us/people/childrenyouth/birthdefects/chstrong.html\)](http://www.health.state.mn.us/people/childrenyouth/birthdefects/chstrong.html)

Posters were sent to pediatric cardiology clinics around the state to encourage eligible parents to complete the survey. If you would like a poster to hang in your office, please email [health.cyshn@state.mn.us](mailto:health.cyshn@state.mn.us) to request one.

## **Maternal and Child Health (MCH) section**

### **New Infant and Child Health unit created**

The Maternal and Child Health section of MDH recently created a new Infant and Child Health unit to expand initiatives that promote infant and child wellbeing and prevent infant mortality. This new unit oversees statewide efforts that address racial inequities in infant health with a growing body of work prioritizing Black/African American and American Indian populations. For more information or questions, email [Health.InfantMortality@state.mn.us](mailto:Health.InfantMortality@state.mn.us).

### **Maternal mortality review committee updates**

The maternal mortality review committee continues to meet regularly to review mortality cases and will be welcoming several new committee members over the summer. We are continuing Next of Kin interviews for maternal mortality cases. For this work, a contracted team conducts interviews and write summaries to help the review committee better understand the descendant. MDH is applying for a new five-year grant from the CDC to expand and improve the state's work related to maternal mortality.

## MDH launches 'Hear Her' campaign to reduce pregnancy-related deaths

The CDC and MDH have launched a [Hear Her](https://www.cdc.gov/hearher/index.html) ([www.cdc.gov/hearher/index.html](https://www.cdc.gov/hearher/index.html)) campaign to raise awareness of the [urgent maternal warning signs](https://www.cdc.gov/hearher/maternal-warning-signs/index.html) ([www.cdc.gov/hearher/maternal-warning-signs/index.html](https://www.cdc.gov/hearher/maternal-warning-signs/index.html)) that can lead to pregnancy-related complications and deaths, particularly for Black people who are pregnant or recently gave birth and too often do not have their concerns taken seriously. Black Minnesotans represent 13% of the birthing population but made up 27% of the 75 pregnancy-associated deaths from 2017 to 2019, according to an [MDH report on maternal mortality](https://www.health.state.mn.us/people/womeninfants/maternalmortality/maternalmortreport.pdf) ([www.health.state.mn.us/people/womeninfants/maternalmortality/maternalmortreport.pdf](https://www.health.state.mn.us/people/womeninfants/maternalmortality/maternalmortreport.pdf)).



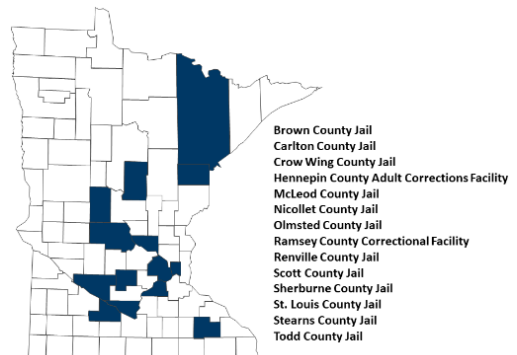
This campaign seeks to encourage partners, friends, family, coworkers, and providers—anyone who supports pregnant and postpartum people—to really listen when a pregnant person tells you something doesn't feel right. Download the ['Hear Her' tools](https://www.health.state.mn.us/people/womeninfants/maternalmort/hearher.html) ([www.health.state.mn.us/people/womeninfants/maternalmort/hearher.html](https://www.health.state.mn.us/people/womeninfants/maternalmort/hearher.html)) to help be aware of warning signs. One of the maternal mortality review committee co-chairs and an MDH staffer Rachael McGraw were interviewed by MPR and by [Channel 5 news](https://www.youtube.com/watch?v=ArcWRLusMlc) ([www.youtube.com/watch?v=ArcWRLusMlc](https://www.youtube.com/watch?v=ArcWRLusMlc)). Contact [Rachael McGraw](mailto:Rachael.McGraw@state.mn.us) ([Rachael.McGraw@state.mn.us](mailto:Rachael.McGraw@state.mn.us)) for more information.

## It's That Easy! training

MCH staff lead an It's That Easy! training for Sexual Risk Avoidance Education (SRAE) grantees and parent educators from other agencies in May. It's That Easy! helps parent educators support parents and caregivers in their role as the primary sexuality educator of their children. This approach and guide, developed in Minnesota, supports young people's healthy sexual development and relationships through providing concrete ways that parents can feel more comfortable and confident having conversations about sexuality with them. The training provided educators with foundational information about topics like parent-child connectedness and healthy sexual development, instruction on how to use the manual and facilitate activities, and tips and lessons from MDH staff as experienced parent educators.

## MDH expands program to 14 counties to support children of incarcerated parents

Thanks to the Minnesota Legislature, MDH and the University of Minnesota have expanded a program to 14 counties across Minnesota to help children impacted by the criminal legal system. The Minnesota model jail practices learning community project brings together local jails and partners quarterly to learn best practices, share resources, and reflect on how parental incarceration impacts the children in their counties. With the support of the Minnesota Sheriff's Association, work continues with county jails in Carlton, Olmsted, Ramsey, Renville, Stearns, and Sherburne, and is now launching in Brown, McLeod, Nicollet, Todd, Hennepin, St. Louis, Crow Wing, and Scott County facilities.



Toolkits, presentations, courses, and details about individual jail efforts from the first three years of the project are available at the [supporting children of incarcerated parents \(www.health.state.mn.us/communities/mentalhealth/jail.html\)](http://www.health.state.mn.us/communities/mentalhealth/jail.html) MDH webpage. Contact [John Eshun \(John.Eshun@state.mn.us\)](mailto:John.Eshun@state.mn.us) for more information.

## Comprehensive overdose grants

Established in 2023, the Comprehensive Drug Overdose and Morbidity Prevention Act ([Minnesota Statutes 144.0528](http://www.revisor.mn.gov/statutes/cite/144.0528)) ([www.revisor.mn.gov/statutes/cite/144.0528](http://www.revisor.mn.gov/statutes/cite/144.0528)) created comprehensive drug overdose and morbidity prevention activities, epidemiologic investigations and surveillance, and evaluation, to monitor, address, and prevent drug overdoses statewide through integrated strategies conducted by MDH. This project's goal is to address the drug overdose epidemic by implementing eight comprehensive strategies for substance use disorder education and intervention. Two of these strategies specifically address drug overdose and morbidity in those who are pregnant or have just given birth and their infants. The [Enhancing outcomes for pregnant/postpartum families impacted by substance use disorders \(EOPI-SUD\)](http://www.health.state.mn.us/people/womeninfants/womenshealth/drugoverdose.html) ([www.health.state.mn.us/people/womeninfants/womenshealth/drugoverdose.html](http://www.health.state.mn.us/people/womeninfants/womenshealth/drugoverdose.html)) grant program released a request for proposals in the spring of 2024 requesting proposals to:

Promote medication-assisted treatment options, support programs that provide focused interventions and services in accord with evidence-based care models for mental health and substance use disorder, and/or neonatal abstinence syndrome, neonatal opioid withdrawal syndrome.

Implement substance use disorder-related recommendations from the maternal mortality review committee.

## Adolescent Health

Mariah Geiger-Williams was hired as the new state adolescent health coordinator for the adolescent health program, including managing the Minnesota Partnership for Adolescent and Young Adult Health (MNPAH) Action Plan

([www.health.state.mn.us/people/adolescent/youth/partnership.html](http://www.health.state.mn.us/people/adolescent/youth/partnership.html)). A monthly newsletter is sent to over 3,500 subscribers, highlighting one priority from the action plan each month as well as a community partner doing work in that topic. The newsletter also includes adolescent health news and updates. To sign up for the MNPAH newsletter, send an email to [Health.AdolescentHealth@state.mn.us](mailto:Health.AdolescentHealth@state.mn.us)

Work continues on an adolescent health data project with staff from within MDH that have interest in adolescent health. This project is a partnership with staff in the child and adolescent health unit. Some of the topics that will be included in the databook include health equity, mental health, and boys and young men's health.

The recent changes to the Minnesota's Minor Consent and Confidentiality laws now allow for young people 16 years of age and older to consent to outpatient mental health treatment. Staff have been working to get this information out to community partners and available to answer questions. Visit the MDH webpage on [consent and confidentiality laws](http://www.health.state.mn.us/people/adolescent/youth/confidential.html) ([www.health.state.mn.us/people/adolescent/youth/confidential.html](http://www.health.state.mn.us/people/adolescent/youth/confidential.html)) to better understand these changes. Plans are underway to convene a workgroup with adolescent health partners to evaluate the best way to communicate with and support professionals working with young people in areas that touch on minor's consent and confidentiality.

## School Health

MDH school nurse consultants offered monthly webinars for school health staff throughout the school year to provide updates, resources and cover specific topics. On average, 130-150 people attend these webinars. Staff also host open office hours monthly offering school nurses and staff an opportunity to ask questions or discuss topics of their choice. Webinars will take a break over the summer and resume in August.

Staff is providing leadership with National Association of School Nurse (NASN) to support MN through a five-year project titled "Advancing Equity in School Health Services by School Nurses" with a focus on school nurses providing mental health supports to student. This project is funded by the CDC.

Staff is continuing to review and redesign the school health services webpages for MDH.

## CDC COVID Workforce Recovery grant

The CDC COVID Workforce Recovery grant is coming to an end in June. Regional school nurses are wrapping up their time on the grant. MDH is still looking for a sustainable funding source to

keep this successful model in place supporting our school nursing staff, school districts and students.

This grant allowed for the collection of student health and school nurse workforce data for the first time ever in Minnesota. This data has been analyzed and education products were created.

MDH partnered with the University of MN Prevention Research Center to create educational tools [www.minnesotaschoolnurses.org/advocacy/advocacy-tools](http://www.minnesotaschoolnurses.org/advocacy/advocacy-tools)

- How are the Children? Minnesota Student Survey: Student Health and Well-being for District Decision Makers
- A Guide for Parents: The State of School Health in Minnesota

## School based health centers

Jennifer Marshall was hired in January as the new program coordinator overseeing the school-based health centers grant program. This grant program has executed six grants to new and emerging clinic with funding through June 2025, and one grant to the MN School-Based Health Alliance for technical assistance and training through June 2028.

## Online music grant

The St. Paul Conservatory of Music has a grant to provide online music instruction. Most of their districts are in rural MN and the programming is being well received. They recently hosted a music festival in Marshall with great success and positive feedback. Programming is funded through June 2025.

## I-MOM perinatal subcommittee

### Strategic plan

The perinatal subcommittee created a multipronged plan to receive community feedback on strategic plan recommendations. Community feedback will be given through a general survey, PSC-led conversations and by partnering with community-based organizations. The PSC has spent several meetings editing questions to solicit feedback and ensuring that this community engagement model is intentional and not burdensome to community members. After the summer, once the feedback is collected, the strategic plan will be revised and finalized. The time frame for this feedback is June to August. To keep up to date with this work, please subscribe to our I-MOM newsletter:

[www.content.govdelivery.com/accounts/MNMDH/bulletins/37ed26a](http://www.content.govdelivery.com/accounts/MNMDH/bulletins/37ed26a).

### Data updates

The second goal of the I-MOM program is to increase timely, high-quality state perinatal health data to support surveillance and inform the development of innovative perinatal health



programs. In late March 2024, MDH released “[The Health of American Indian Families in Minnesota: A Data Book](#)” ([www.health.state.mn.us/people/womeninfants/womenshealth/amerindianreport.pdf](http://www.health.state.mn.us/people/womeninfants/womenshealth/amerindianreport.pdf)) which was created by the state maternal and child health epidemiologist, who is part of the I-MOM data team. For the remainder of year two, the I-MOM data team will continue to plan and develop a public facing perinatal health dashboard and will soon begin a critical data linkage that will allow for more thorough and informative maternal health data. The team will continue to provide data support to the Minnesota Perinatal Quality Collaborative (MNPQC) as needed.

### **AIM update**

The third goal of the I-MOM program is to identify and implement AIM (Alliance for Innovation on Maternal Health) patient safety bundles by providing training to support quality improvement initiatives designed to improve perinatal health outcomes. In September 2023, the Minnesota Perinatal Quality Collaborative began their first AIM bundle focused on the Care for Pregnant and Postpartum People with Substance Use Disorder (SUD). The collaborative will model a similar maintenance period led by their hypertension initiative to sustain ongoing technical assistance offers interactive team opportunities with twelve hospital teams from six health systems represented statewide.

### **Minnesota perinatal quality collaborative**

The collaborative is exploring a tiered approach of quality improvement models to align with hospitals’ level of readiness, priorities, and team availability. Through these approaches, the collaborative will determine the next AIM bundle to meet the I-MOM program goal three dedicated to identifying and implementing AIM bundles designed to improve perinatal health outcomes. From the MNPQC SUD initiative, participating hospital teams demonstrated the need for smaller and more focused quality improvement initiatives. As a next step, MNPQC intends to lead two community of learnings that will offer interested hospital teams the opportunity to expand practices on nonpharmacologic methods (primarily eat, sleep, and console) for infants exposed to opioids in utero and develop and improve plans of safe care for families affected by SUD.

### **Other PQC-led activities:**

Hypertension quality improvement opportunities offered as “sprints” to hospitals, community organizations, public health and/or home visiting. Obstetrical Hypertension: Prevention and Identification Sprint Including Blue Band Project – Minnesota Perinatal Quality Collaborative

Early Hearing Detection & Intervention (EHDI) community of learning provides tools and knowledge to improve rates of timely detection and intervention, stay updated on the latest advancements, and satisfy CMS requirements for PQC participation.

## Event: Joint Perinatal Improvement Summit, Oct. 22-23, 2024

This event is hosted by the Minnesota Hospital Association, the MNPQC, and Hennepin Healthcare and will provide an “All Teach, All Learn” opportunity for education, resources and expertise sharing with a space to make connections across disciplines, hospitals, and statewide geography as all work to improve perinatal health outcomes and experiences for our MN families.

## Updated translated documents for Child and Teen Checkups (C&TC)

Child and Teen Checkups (C&TC) [translated documents \(www.health.state.mn.us/people/childreneyouth/ctc/translation.html\)](https://www.health.state.mn.us/people/childreneyouth/ctc/translation.html) now includes translated document in Arabic, Hmong, Karen, Oromo, Russian, Somali, Spanish, and Vietnamese. Ojibwe translations are under review and will be posted later.

The following documents have been translated:

- Adolescent and Young Adult (AYA) Health Questionnaire
- Child and Family Vision History and Risk Assessment Questionnaire
- Child and Family Hearing History and JCIH Risk Assessment Questionnaire
- Color Vision Advisory Letter
- Fluoride Varnish Treatments and Your Child
- Hearing Referral Letter
- HIV and HIV Screening FAQ
- Parent Confidentiality Letter
- Vision Referral Letter

## Sexual and reproductive health services grant program

The 2023 legislature provided extra funding for the Family Planning Special Projects (FPSP) grant program and changed the grant name to Sexual and Reproductive Health Services (SHRS). Based on a RFP process late fall 2023 and early winter 2024, 31 grants were executed. Twenty-one were to existing FPSP grantees and ten were for new grantees. The grant period is 2024 to 2027. Site visits to orient and connect with new and existing grantees are currently in process.

## American Indian Integrated Care for High-Risk Pregnancies (ICHRP) grant RFP available

DHS is seeking to provide integrated, culturally supportive perinatal care to American Indian people at high risk for low birth weight and preterm births. The work funded by this perinatal care grant ([www.mn.gov/dhs/partners-and-providers/grants-rfps/open-rfps/#/detail/appId/1/id/624547](https://www.mn.gov/dhs/partners-and-providers/grants-rfps/open-rfps/#/detail/appId/1/id/624547)) must be spent on initiatives to serve American Indian Medicaid enrollees during the perinatal period (from conception through one-year post-partum). The lead organization must be a Tribal or non-profit community-based organization whose board members and staff reflect the community of focus. This opportunity is for an initial two-year grant with the ability to be renewed for up to five years total before having to

reapply. The funding available is approximately \$870,000 per fiscal year. The State anticipates awarding one or more contracts to qualified grantees, and funding does not need to be split equally among the grantees. The RFP must be submitted electronically on June 17, 2024, by 4 p.m. Submit questions in writing by June 3, 2024, before 4 p.m. to [Jordon Barthel \(Jordon.Barthel@state.mn.us\)](mailto:Jordon.Barthel@state.mn.us).

## CDC funded Minnesota Project to Prevent Sudden Unexpected Infant Deaths (SUID)

MDH has initiated work on a joint five-year, multi-component CDC grant that maternal and child health and the injury and violence prevention sections received in fall 2023 to improve case ascertainment, completeness, and timeliness of sudden unexpected infant deaths (SUID) data. The grant also seeks to reduce the incidence of sudden unexpected sleep related tragedies and address inequities in Minnesota's Black/African American and American Indian populations. MDH is currently in the process of creating a community safe sleep leadership team to oversee the project. Once formed, the leadership team will be tasked with guiding and planning the implementation phases of the project, including overseeing four community listening sessions beginning in summer 2024 to identify evidence-based, data-driven culturally appropriate SUID prevention strategies to inform the creation and implementation of an action plan to prevent SUID in the American Indian and Black/African American populations, and provide feedback on projects implemented by community action teams. For more information, contact [Michelle Chiezah \(michelle.chiezah@state.mn.us\)](mailto:michelle.chiezah@state.mn.us).

## Minnesota Partnership to Prevent Infant Mortality grants

MDH recently awarded grants to 27 nonprofit organizations and community health boards across Minnesota through the Minnesota Partnership to Prevent Infant Mortality. These grants will support efforts to improve infant health outcomes by addressing the leading causes of infant mortality. Organizations will focus on efforts to promote safe sleep, prevent congenital malformations, improve access to prenatal care, and address social and economic determinants of health. For a full list of grantees, please visit the [MDH Healthy Beginnings Healthy Families: Infant Health](http://www.health.state.mn.us/people/womeninfants/infantmort/hbhfinfant.html) webpage ([www.health.state.mn.us/people/womeninfants/infantmort/hbhfinfant.html](http://www.health.state.mn.us/people/womeninfants/infantmort/hbhfinfant.html)).

## Task Force on Pregnancy Health and Substance Use Disorder updates

In 2023, the Minnesota Legislature established a Task Force on Pregnancy Health and Substance Use Disorder. The Task Force's goal is to recommend protocols for when physicians, advanced practice registered nurses, and physician assistants should administer a toxicology test and requirements for reporting for prenatal exposure to a controlled substance. The Task Force began the fall of 2023 and will end their work December 1, 2024, with the submission of a report of recommended policy guidelines to the Minnesota Legislature.

The Task Force on Pregnancy Health and Substance Use Disorders has twenty appointed positions representing a wide assembly of disciplines including medical, social services,

addiction and recovery, and members with lived experience. Appointments were also made using an equity lens.

Currently the task force has two working subgroups including testing and reporting. Both subgroups have begun to meet and gather best practices and policy work from several states successful in navigating this issue. General task force meetings also are incorporating expert information/update sharing with the members.

Task force meetings are held bimonthly and livestreamed through YouTube. For more information about meeting dates and time, how to access meetings live, and general information about the Task Force, visit the [pregnancy health and substance use disorders \(www.health.state.mn.us/people/womeninfants/womenshealth/tfpsud/meeting.html\)](http://www.health.state.mn.us/people/womeninfants/womenshealth/tfpsud/meeting.html) webpage.

## Women, Infants, and Children (WIC) section

### Fruits and Vegetables Benefits increase and food package changes

Minnesota WIC is providing increased cash value benefits for fruits and vegetables for women and children permanently:

- \$26 monthly for children.
- \$47 to \$52 monthly for women.

The increase is part of the [U.S. Department of Agriculture Food and Nutrition Service WIC Food Package changes \(www.fns.usda.gov/wic/food-packages\)](http://www.fns.usda.gov/wic/food-packages). Some highlights of the changes include:

- Allowing fresh herbs with the CVB,
- Reducing the amount of juice for children and women,
- Allowing substitution of juice for \$3 CVB,
- Reducing the amount of milk for children and women,
- Adding plant-based yogurt and cheese,
- Allowing infant CVB to begin at 6 months of age,
- Increasing the CVB substitution amounts for infants,
- Allowing more flexibility for amount of infant formula for the first month,
- Requiring that states offer 75% of breakfast cereals that meet whole grain criteria,
- Adding canned fish to food packages for all children, and
- Allowing greater flexibility in package sizes offered as long as at least one package size or a combination of package sizes add up to the full nutritional benefit.

WIC State agencies have up to two years to implement most of the changes to the food packages for participants. Minnesota WIC will be working with our Food Package workgroup and our SPIRIT coalition partners to develop a timeline for implementing the changes.

## Multi-state WIC participant satisfaction survey

Minnesota WIC participated in a National WIC Association-led WIC participant satisfaction survey. Minnesota was one of nineteen states, one Indian Tribal Organization, and one territory that recruited WIC participants to complete an online survey in English or Spanish between July and September 2023.

Respondents were asked about their experiences with appointments, enrollment, and recertification; shopping for WIC foods and using the WIC Card and App; perceptions of the CVB; and proposed changes to the WIC food packages. View results: [2023 WIC Multi-State WIC Participant Satisfaction Survey \(PDF\)](#) ([www.media.nwica.org/2023%20multistate%20wic%20survey%201.pdf](http://www.media.nwica.org/2023%20multistate%20wic%20survey%201.pdf)).

## Minnesota WIC news release

MDH communications distributed a news release highlighting the importance of the Minnesota WIC program and encouraging those who are eligible, but not participating, to apply.

News Release: [Minnesota families urged to join WIC to benefit from long-standing program offerings](#) ([www.health.state.mn.us/news/pressrel/2024/wic052124.html](http://www.health.state.mn.us/news/pressrel/2024/wic052124.html))

## Family Home Visiting (FHV) section

### Staffing updates

Evan Piepho began as the MIECHV Specialist on April 4, 2024. He will be supporting reporting and federal requirements for MDH's federal MIECHV award.

### General updates

Family home visiting recently applied for FY 2024 MIECHV funding to HRSA. The total amount requested is \$10,286,509, which includes \$9,560,616 in base grant funding and \$725,893 in federal matching funds. MDH is using state general funds allocated for evidence-based home visiting under [MN Stat 145.87](#) ([www.revisor.mn.gov/statutes/cite/145.87](http://www.revisor.mn.gov/statutes/cite/145.87)) to draw the federal matching funds. This is the first year that applicants can obtain federal matching funds under the MIECHV program.

### Grants

Expansion: application has closed, and 27 grantees have been awarded caseload expansion funds totaling 411 increased home visiting slots.

Promising Practices: two new grantees started May 1, and two more will start July 1, for a total of 14 PP grantees.

## Practice

Motivational interviewing training is scheduled for June 5 and 6, expecting almost 30 participants, the vast majority of whom have never had any prior motivational interviewing training.

ASQ training: 60 home visiting staff have attended ASQ trainings so far this year. We will be hosting two more (one in Q3, one in Q4).

SCRIPT tobacco cessation trainings: Partnered with the MDH tobacco prevention and control program as well as the Society of Public Health Education (SOPHE) to offer two trainings on best practices for helping pregnant people quit smoking. 37 home visiting staff trained, lots of positive reviews on the applicability of this content.

CQI Open Office Hours in June: This month the focus is to brainstorm change ideas for increasing prenatal enrollment.

## MECSH Updates

MECSH Foundation Training was held in St. Paul May 6-10/ 11 participants successfully completed training.

The updated MECSH Addendum has been fully reviewed internally by MDH-FHV staff and is ready for the FHV Subcommittee within the MCH Task Force to review before being released to LIAs.

The MECSH Learning to Communicate Abridged version and Oral Health Screening Tools are currently being translated into 8 languages. Once complete, the materials will be available for LIAs to request for use for their MECSH programs. This project is being supported through partnership from MDH Cultural Communications. Project completion is estimated to be June 2024.

A MECSH Supervisor CoP is scheduled for June 4 from 9-10:00 a.m. The topic is the Navigating the MECSH Zoho Analytics platform.

A MECSH General CoP is scheduled for June 11, from 9-10:00 a.m. The topic is Parent Child Interactions.

## Evaluation and Continuous Quality Improvement

FHV will release a report summarizing outcomes from the first year of the Strong Foundations grant program in early summer. The report will be available on the MDH website at [family home visiting reports \(www.health.state.mn.us/communities/fhv/reports.html\)](https://www.health.state.mn.us/communities/fhv/reports.html) webpage. An announcement will be made in the Tuesday Topics e-newsletter when the report is released.

# Maternal and Child Health Advisory Task Force Restructure (February 2024)

Chair: Sameerah Bilal-Roby, Professional Representative

Chair-elect: Rachel Gilbertson, Community Health Board Representative

## **MDH Agency Staff:**

Nicole Brown, CYSHN Section Manager and Title V CYSHN Director

Judy Edwards, MCH Assistant Section Manager

Jennie Lippert, Family Home Visiting Manager

Savannah Riddle, MCH Section Manager and Title V MCH Director

Elizabeth Taylor-Schiro, Title V Coordinator

Noya Woodrich, Child and Family Health Division Director

## **Purpose:**

The Maternal and Child Health (MCH) Advisory Task Force was created by the Minnesota Legislature in 1982, and reestablished in 2012, to advise the Commissioner of Health on:

- the health care services/needs of maternal and child health populations in Minnesota
- the use of funds for maternal and child health and children with special health needs administered through MDH
- and the priorities and goals for maternal and child health activities.

## **Deadlines:**

- 2024 Biannual Report: The Task Force prepares and presents to the Commissioner.
- 2024 Betty Hubbard Annual Maternal and Child Health Leadership Award: Betty (Elizabeth) Hubbard, a longtime advocate for the health needs of mothers and children and an original member of the Task Force, died in 1989. In 1990, the Task Force and the Minnesota Department of Health honored her work and her memory by establishing the Annual Betty Hubbard Leadership Award. This award of recognition is presented to individuals or organizations in Minnesota making significant contributions to maternal and child health.

## **Maternal and Child Health Task Force Committees**

### **Executive Committee**

MDH Agency Staff: Judy Edwards

Task Force Members: Sameerah Bilal-Roby (Chair), Gene Nichols, Stephanie Graves, Rachel Gilbertson, Stephanie de Sam Lazaro

#### **Role/Responsibility:**

- The Executive Committee is responsible for conducting the interim business of the Task Force, which includes recommending appointments for statutory vacancies and ex-officio memberships,
- The Executive Committee will consist of the chair, chair-elect or past chair, and up to four additional Task Force members. All members of the Executive Committee must be commissioner appointed members.

Meeting information/frequency: At a minimum, the Executive Committee will meet approximately one month prior to a Task Force meeting to conduct business and plan the full Task Force meeting agenda.

### **Betty Hubbard MCH Leadership Award Committee**

MDH Agency Staff: Judy Edwards

Members: Stephanie de Sam Lazaro, Rachel Gilbertson, Lindsey Wimmer

#### **Role/Responsibility:**

- Assisting in the annual review of the award policy and procedures and to determine and recommend any needed changes.
- Providing input into the annual open nominations process, including recommending changes to the eligibility criteria, nomination and scoring forms, and announcement flyers.
- Reviewing and scoring nominations received and making recommendations of final nominees to Executive Committee.
- Participating in the selection process for final award recipients.



# Maternal and Child Health Advisory Task Force Sub-Committees

## Child and Adolescent

MDH Agency Staff: Mariah Geiger- Williams (support from Julie NeitzelCarr & Kristin Teipel)

### Charge to the Subcommittee:

Develop meeting schedule, workplan, and timeline to include the following activities:

1. Monitor and advise on the Minnesota Partnership Adolescent and Young Adult Health Plan. (Originally implemented in 2019 and updated in 2023 to reflect data and community input during the COVID pandemic).
2. Participate in MCH Title V 5-year needs assessment prioritization (if not completed) and make recommendations on priorities identified related to child and adolescent health.
3. Review and advise on implementation of strategies and activities identified in the Title V MCH 2025 Needs Assessment throughout the grant cycle.
4. Identify and recommend engagement with community partners that work with youth or youth serving organizations that will assist in implementation or improving needs identified in the needs assessment.
5. Review and provide feedback to MN Title V Action Plan or CFH Statewide Strategic Plan related strategies or activities related to populations or communities most affected by the priority needs identified in the 2025 needs assessment.
6. Review MDH's Statewide Health Assessment and MCH 5-year needs assessment to identify gaps in services or needs identified for populations experiencing inequities. Provide recommendations to address inequities that may impact children and adolescents.
7. Review and provide feedback to the Minnesota Student Survey and related research and surveys on the health status of Minnesota's children and adolescents.
8. Review and provide feedback on adolescent mental health/mental well-being, teen pregnancy and STI. Monitor CFH programs designed to improve adolescent health outcomes, reduce teen pregnancy and STI rates. Provide recommendations to address or reduce disparities among populations and communities with the highest discrepancies and health inequities.
9. Submit recommendations for review, feedback, and vote to approve to full task force.
10. Advise the commissioner of health on priorities for funding for child and adolescent health.

11. Establish in consultation with the commissioner statewide outcomes that will improve the health status of child and adolescent health.
12. Monitor the Children’s Cabinet work on priority areas of children’s mental health and youth justice and opportunity.

## **Children and Youth with Special Health Needs (CYSHN)**

MDH Agency: Heather Stillwell, CYSHN Section (subcommittee staff),  
Nicole Brown (CYSHN Manager)

### **Charge to the Subcommittee:**

The subcommittee will:

- Advise on and review the federally mandated Maternal and Child Health Needs Assessment and priority maternal and child health indicators every five years related to the core area of Children and Youth with Special Health Needs
- Advise and provide recommendations for the strategies and activities included within Minnesota’s Title V (MCH) Block Grant related to the core area of Children and Youth with Special Health Needs
- Advise on the type, frequency, and impact of health care services provided to Children and Youth with Special Health Needs under existing MCH programs, including programs administered by the commissioner of health
- Advise the commissioner of health on priorities for funding for Children and Youth with Special Health Needs
- Establish in consultation with the commissioner statewide outcomes that will improve the health status of Children and Youth with Special Health Needs

### **Tasks/Deadlines:**

- Recommendations for Title V Needs Assessment Priorities to be brought to the full committee by Aug 2024
- Recommendations for Title V Strategies and Activities to be brought to the full committee by

## **Family Home Visiting (FHV)**

MDH Agency Staff: Jennie Lippert, FHV Manager

### **Charge to the Subcommittee:**

1. The purpose of the FHV subcommittee will be to advise and provide recommendations to the MDH-FHV program from a community and home visiting professional standpoint. The subcommittee may assist in the evaluation of the overall performance of MDH-FHV, including:
  - review/monitor/assess specific FHV models, grants and data
  - serve as an advocate as it pertains to FHV and the community it serves
  - gather input from/serve as a liaison with relevant constituencies
  - provide feedback to MDH-FHV leaders from the community
  - provide technical expertise
2. Serve as an independent/unbiased sounding board and assist staff in determining important activities and priorities.

## **Infant and Early Childhood**

MDH Agency Staff: Mary Ottman

### **Charge to the Subcommittee:**

1. Become knowledgeable about CFH infant and early childhood programs and initiatives.
2. Participate in MCH Title V 5-year needs assessment prioritization (if not completed) and make recommendations on priorities identified related to infant and early childhood.
3. Monitor and advise on implementation of strategies and activities identified in the Title V MCH 2025 Needs Assessment throughout the grant cycle.
4. Identify and recommend engagement or networking opportunities with community partners working to improve infant health outcomes and reduce infant mortality and low birthweight.
5. Review and provide feedback to MN Title V Action Plan or CFH Statewide Strategic Plan related strategies or activities related to infants and young children (early childhood) most affected by the priority needs identified in the 2025 needs assessment.
6. Review MDH's Statewide Health Assessment and MCH 5-year needs assessment to identify gaps in services or needs identified for populations experiencing inequities. Provide recommendations to address inequities that may impact children and adolescents.
7. Review and provide feedback on action plans developed by MDH Safe Sleep and Sudden Unexpected Infant Death initiatives. This is new work; so, you may want to have CFH provide periodic status reports.
8. Submit recommendations for review, feedback, and vote to approve to full task force.
9. Advise the commissioner of health on priorities for funding for infant and early childhood.

10. Establish in consultation with the commissioner statewide outcomes that will improve the health status of women health.

## **Perinatal (I-MOM)**

Subcommittee Lead: Joi Elmore/Michelle O'Brien

MDH Agency Staff: Ramya Palaniappan (Anne Walaszek)

### Charge to the Subcommittee:

1. Develop and participate in the implementation of a statewide perinatal health strategic plan. The maternal health strategic plan will promote innovative program development, identify policy needs, and other activities to address and support improved maternal health outcomes.
2. The I-MOM perinatal subcommittee will be co-led by an MCH Advisory Task Force member and community leader(s).
3. I-MOM will provide regular updates to the full Task Force on its work, which is expected to continue through September 29, 2027.
4. This work will also support key issues identified by the Task Force in the Commissioners report, and its work will be added to the Task Force workplan.
5. Advise on and review the federally mandated Maternal and Child Health Needs Assessment and priority maternal and child health indicators every five years related to the women health.
6. Advise and provide recommendations for the strategies and activities included within Minnesota's Title V (MCH) Block Grant related to the core area of women health.
7. Advise on the type, frequency, and impact of health care services provided to women under existing MCH programs, including programs administered by the commissioner of health.