



## **A Crosswalk of the Maternal, Infant, and Early Childhood Home Visiting Program and the Title V Maternal and Child Health Services Block Grant Program Needs Assessments**

## About the Maternal, Infant, and Early Childhood Home Visiting Program

The [Maternal, Infant, and Early Childhood Home Visiting Program](#) (MIECHV) supports voluntary, evidence-based home visiting services for at-risk pregnant women and parents with young children up to kindergarten entry. The MIECHV Program builds on decades of scientific research showing that home visits by a nurse, social worker, early childhood educator, or other trained professional during pregnancy and in the first years of a child's life improve the lives of children and families. Home visiting helps prevent child abuse and neglect, supports positive parenting, improves maternal and child health, and promotes child development and school readiness. States, territories, and tribal communities receive funding through the MIECHV Program and have the flexibility to select the home visiting service delivery models that best meet their needs. The MIECHV Program is administered by the Health Resources and Services Administration (HRSA) in partnership with the Administration for Children and Families (ACF).



## About the Title V Maternal and Child Health Services Block Grant Program

As one of the largest federal block grant programs, the Title V Maternal and Child Health (MCH) Services Block Grant Program is a key source of support for promoting and improving the health and well-being of the nation's mothers, children (including children with special needs), and their families. To ensure optimal health and development across the lifespan of the target population (women, infants, and children), all programs and efforts focus on five key areas:

- [Maternal and Women's Health](#)
- [Perinatal and Infant Health](#)
- [Child Health](#)
- [Adolescent Health](#)
- [Children with Special Health Care Needs](#)

This document was prepared for the U.S. Department of Health and Human Services (HHS), Health Resources and Services Administration (HRSA), by Education Development Center, under HRSA contract number HHS250201600001C.

## Needs Assessments

Awardees of both MIECHV and Title V MCH Block Grant programs are mandated by law to conduct needs assessments. Title V MCH Block Grant programs are required to conduct a needs assessment every five years. MIECHV programs are conducting a required statewide needs assessment update. Both needs assessments are due in 2020, thus awardees have a unique opportunity to leverage and align key activities of the needs assessments. Combining efforts to gather the information and data required for both needs assessments can help leverage staff and fiscal resources across the two programs and align the data collected by each to better meet the needs of women, infants, and children in the state or territory. Coordinating the two needs assessments, which is also required by law, can help avoid duplication of effort and strengthen a statewide approach to addressing the needs of young children and their families. States are responsible for determining the process that serves them best for conducting the Five-Year Needs Assessment for the Title V MCH Block Grant program. The Maternal and Child Health Bureau (MCHB) recently released a detailed guide to assist MIECHV awardees in conducting the statewide needs assessment update.

## Purpose of this Resource

This resource is a companion to [A Guide to Conducting the Maternal, Infant, and Early Childhood Home Visiting Program Statewide Needs Assessment Update](#). It is designed to be used by MIECHV awardees, but may provide helpful guidance to State Title V MCH Block Grant program leaders. It consists of two parts. Part 1 is a crosswalk of elements of each needs assessment, spelling out the similarities and differences between the two. Part 2 suggests opportunities for coordination.

Some states and territories may be considering whether to conduct a single needs assessment that meets both MIECHV and Title V MCH Block Grant requirements. This resource can help them decide whether to do so. Whether the needs assessments are conducted together or separately, the opportunities for coordination identified in Part 2 can strengthen system-wide collaboration, ultimately resulting in stronger statewide service delivery for women, infants, children, and their families.





## Crosswalk of the MIECHV and Title V MCH Block Grant Needs Assessments

While the purposes and requirements of the two needs assessments are different, the activities undertaken to meet the requirements of each overlap significantly. This crosswalk summarizes the elements of both needs assessments and notes their similarities and differences.

### A: Purpose and Requirements

This section of the Crosswalk spells out the purpose, statutes and federal guidance, requirements, and timelines for the needs assessments.

**Share resources.** Encourage LIAs to review [Recruitment and Retention of Home Visiting Staff](#), [Creating a Trauma-Informed Home Visiting Program](#) and [Trauma-Informed Approaches to Support Children, Families, and the Home Visiting Workforce \(HV-ImpACT Webinar\)](#). Invite them to complete the reflection and planning tool in [Infusing Cultural and Linguistic Competence into Recruitment and Retention of Home Visitors](#). Discuss with LIA leaders how to make their organizations more trauma-informed and culturally competent. Share the [Institute for the Advancement of Family Support Professionals website](#).



	MIECHV Statewide Needs Assessment Update	Title V MCH Block Grant Needs Assessment	Considerations
Purpose	<p>The needs assessment as a critical and foundational resource for awardees in identifying at-risk communities, understanding the needs of families, and assessing services in their early childhood systems. This update may reveal population trends, identify areas of increasing or decreasing risk, and outline resources to support families in need the needs assessment as a critical and foundational resource for awardees in identifying at-risk communities, understanding the needs of families, and assessing services in their early childhood systems. This update may reveal population trends, identify areas of increasing or decreasing risk, and outline resources to support families in need the needs assessment as a critical and foundational resource for awardees in identifying at-risk communities, understanding the needs of families, and assessing services in their early childhood systems. This update may reveal population trends, identify areas of increasing or decreasing risk, and outline resources to support families in need the needs assessment as a critical and foundational resource for awardees in identifying at-risk communities, understanding the needs of families, and assessing services in their early childhood systems. This update may reveal population trends, identify areas of increasing or decreasing risk, and outline resources to support families in need MIECHV awardees use the needs assessment to identify communities with concentrations of defined risk factors, assess the quality and capacity of home visiting services in the state, and assess the state’s capacity for providing substance abuse treatment and counseling services.</p> <p>The purpose of updating the statewide needs assessment is for awardees to gather more recent information on community needs and ensure that MIECHV home visiting programs are being implemented in areas of high need. The results of the needs assessment update should also inform strategic decision making among MIECHV awardees and their stakeholders and identify opportunities for collaboration to strengthen and expand services for at-risk families.</p> <p>After submission of the statewide needs assessment update, MIECHV awardees will use formula grant applications to describe how needs assessment update findings will inform use of MIECHV grant funds.</p>	<p>Title V MCH Block Grant programs use the needs assessment to review MCH population needs; examine statewide capacity to fully address these needs; identify and select MCH priorities for the coming five-year period; develop strategies to address the MCH priorities; select measures for monitoring progress in addressing MCH priorities; set targets and identify activities to accomplish the targets; allocate available resources; and monitor progress over the five-year planning cycle.</p> <p>Findings derived from the comprehensive Five-Year Needs Assessment serve to inform the Title V MCH Block Grant program’s strategic planning, decision-making, and resource allocation efforts. These findings also provide a benchmark against which states can compare and assess the progress that they have achieved during the five-year reporting period.</p>	<p>The MIECHV needs assessment assists awardees in identifying and understanding how to meet the diverse needs of eligible families living in at-risk communities and in determining the communities’ capacity for meeting these needs. The Title V MCH Block Grant needs assessment describes the status of the maternal and child health population within five population health domains inclusive of the entire state. In addition, the Title V MCH Block Grant needs assessment examines program capacity and partnerships for responding to the identified needs of the MCH population.</p> <p>The MIECHV needs assessment identifies counties that are at risk for statutorily defined risk factors used to set statewide priorities for both geographic targeting of services and selection of evidence-based home visiting models to implement in the state. States are also required to assess quality and capacity of home visiting services and the capacity for providing substance use disorder treatment and counseling services.</p> <p>The Title V MCH Block Grant needs assessment examines capacity at the state level; this information is then used to identify statewide MCH priorities, which inform the development of a Five-Year Action Plan.</p>

MIECHV Statewide Needs Assessment Update	Title V MCH Block Grant Needs Assessment	Considerations
<p>The <a href="#">statutory requirements for MIECHV</a> are found in section 511 [42 U.S.C. 711] of the Social Security Act.</p> <p>The <a href="#">Supplemental Information Request (SIR) for the Submission of the Statewide Needs Assessment Update</a> spells out the requirements of the needs assessment update for states. The <a href="#">Supplemental Information Request (SIR) for the Submission of the Territory Statewide (“Territory-wide”) Needs Assessment Update</a> spells out the requirements of the needs assessment update for territories.</p>	<p>The Title V MCH Services Block Grant program is authorized under the Social Security Act: <a href="#">Title V—Maternal and Child Health Service Block Grant</a>. Section 505(a)(1) requires states to conduct a statewide needs assessment every five years that identifies (consistent with the health status goals and national health objectives referred to in section <a href="#">501(a)</a>) the need for—</p> <ul style="list-style-type: none"> <li>(A) preventive and primary care services for pregnant women, mothers, and infants up to age one;</li> <li>(B) preventive and primary care services for children; and</li> <li>(C) services for children with special health care needs (as specified in section 501(a)(1)(D));</li> </ul> <p>As specified in the Title V MCH Block Grant Application/ Annual Report Guidance, States are also required to report annually, as part of the Application, on ongoing needs assessment activities and findings.</p> <p><a href="#">Block Grant Guidance</a> is provided through the Maternal and Child Health Bureau Title V Maternal and Child Health Services Block Grant to States Program Guidance and Forms for the Application/Annual Report.</p>	<p>Both programs are authorized through <a href="#">Title V of the Social Security Act</a>. Ongoing needs assessment is integral to the Title V MCH Block Grant program. Findings from the Five-Year Needs Assessment serve as the cornerstone for the development of a Five-Year Action Plan. States have flexibility in how they conduct the Five-Year Needs Assessment and other ongoing needs assessment activities to best serve their unique MCH populations.</p>

	MIECHV Statewide Needs Assessment Update	Title V MCH Block Grant Needs Assessment	Considerations
Requirements	<p>To meet the statutory requirements for the needs assessment, you must do the following:</p> <ul style="list-style-type: none"> <li>• <b>Identify communities with concentrations of risk</b>, including: premature birth, low-birth-weight infants, and infant mortality, including infant death due to neglect, or other indicators of at-risk prenatal, maternal, newborn, or child health; poverty; crime; domestic violence; high rates of high-school drop-outs; substance abuse; unemployment; or child maltreatment.</li> <li>• <b>Identify the quality and capacity of existing programs or initiatives for early childhood home visiting</b> including (a) the number and types of programs and the numbers of individuals and families who are receiving services under such programs or initiatives; b) the gaps in early childhood home visitation services in the state/territory; and c) the extent to which such programs or initiatives are meeting the needs of eligible families.</li> <li>• <b>Discuss the capacity for providing substance abuse treatment and counseling services</b> to individuals and families in need of such treatment or services.</li> <li>• <b>Coordinate with and take into account requirements in:</b> <ul style="list-style-type: none"> <li>– The Title V MCH Block Grant program needs assessment</li> <li>– The communitywide strategic planning and needs assessments conducted in accordance with section 640(g)(1)(C) of the Head Start Act</li> <li>– The inventory of current unmet needs and current community-based and prevention-focused programs and activities to prevent child abuse and neglect, and other family resource services operating in the state or territory required under section 205(3) of Title II of Child Abuse. Prevention and Treatment Act (CAPTA).</li> </ul> </li> </ul>	<p>The Title V MCH Services Block Grant legislation (section 505[a][1]) requires the state, as part of its application, to prepare and transmit a comprehensive statewide needs assessment every five years that identifies (consistent with the health status goals and national health objectives) the need for the following:</p> <ul style="list-style-type: none"> <li>• Preventive and primary care services for pregnant women, mothers, and infants up to age one</li> <li>• Preventive and primary care services for children</li> <li>• Services for children with special health care needs</li> </ul> <p>A state’s assessment of its Title V MCH Block Grant program’s capacity should examine current resources, staffing and organizational structure, state agency coordination, and family partnerships.</p>	<p>Both needs assessments have overlapping requirements related to identification of need for services for pregnant women and young children.</p> <p>Awardees in both programs are required to assess statewide capacity to provide necessary services to pregnant women and families with young children. This capacity assessment may reveal information about gaps in care. Capacity assessment also addresses the capability of the State Title V MCH Block Grant agency to respond to identified MCH needs in implementing a Five-Year Action Plan.</p> <p>MIECHV awardees identify the quality and capacity of community-based programs that provide home visiting services and of related community services; Title V MCH Block Grant programs assess the state Title V MCH Block Grant agency’s capacity to promote and protect the health of all mothers and children.</p> <p>Both MIECHV and Title V MCH Block Grant programs emphasize the importance of formal and informal collaborative efforts with a range of federal, state, and local entities.</p> <p>Statute specifically requires that the MIECHV needs assessment be coordinated with and take into account the requirements of the Title V MCH Block Grant needs assessment, in addition to other needs assessments in the state.</p>



	MIECHV Statewide Needs Assessment Update	Title V MCH Block Grant Needs Assessment	Considerations
Timelines	MIECHV awardees are required to submit their needs assessment update to HRSA by October 1, 2020, as a condition of receiving Title V Block Grant allotments.	Title V MCH Block Grant programs are required to conduct a comprehensive needs assessment every five years, as well as an annual needs assessment update during interim years. The submission of the 2020 Five-Year Needs Assessment on July 1, 2020, will begin a new five-year reporting cycle.	Both the MIECHV needs assessment updates and the Title V MCH Block Grant comprehensive five-year needs assessments are due to HRSA in 2020, so needs assessment activities are occurring during the same timeframe.





## B: Process and Activities

This section of the Crosswalk spells out the processes for completing the needs assessments, including the key stakeholders, methodology, data collection and reporting.

	MIECHV Statewide Needs Assessment Update	Title V MCH Block Grant Needs Assessment	Considerations
Key stakeholders	<p>MIECHV programs are encouraged to include representatives of key stakeholders on their needs assessment teams. <a href="#">A Guide to Conducting the Maternal, Infant, and Early Childhood Home Visiting Program Statewide Needs Assessment Update</a> includes a list of potential partners.</p> <p>In light of the requirement to assess the capacity for providing substance use disorder treatment and counseling services, the Single State Agency that oversees the state’s Substance Abuse Prevention and Treatment Block Grant is a key stakeholder.</p> <p>In addition to coordinating the MIECHV needs assessment with the Title V MCH Block Grant needs assessment, awardees must coordinate and take into account the community-wide strategic planning and needs assessment conducted in accordance with the Head Start Act and the inventory of unmet needs and current community-based prevention-focused programs operating under section 205(3) of Title II of the Child Abuse Prevention and Treatment Act.</p> <p>Recipients of the Preschool Development Birth Through Five Grants are also engaged in developing a comprehensive needs assessment of the availability and quality of early childhood services in their state.</p>	<p>The Title V MCH Block Grant program needs assessment assesses the breadth of the state’s partnerships and collaborations with other federal, tribal, state, and local entities who serve the MCH population. Title V MCH Block Grant programs partner with these entities to complement and strengthen the state agency’s capacity to meet the needs of its MCH population.</p> <p>Title V MCH Block Grant programs include information about the level and extent of involvement of stakeholders, including families, individuals, and family-led organizations in their reports.</p>	<p>MIECHV and Title V MCH Block Grant programs have many shared partners at the federal, tribal, state, and local levels. The needs assessments provide an opportunity to bring together expertise in maternal and child health and related issues across the state and to get buy-in from key stakeholders.</p>

	MIECHV Statewide Needs Assessment Update	Title V MCH Block Grant Needs Assessment	Considerations
Methodology	<p>The SIR guidance for the MIECHV needs assessment update specifies that there are two allowable methods for identifying at-risk communities -- the simplified method and an independent method. Each allows for flexibility to tailor the method to meet the needs of each state or territory. Each method is detailed in the <a href="#">Supplemental Information Request (SIR) for the Submission of the Statewide Needs Assessment Update</a> and <a href="#">The Supplemental Information Request (SIR) for the Submission of the Territory Statewide ("Territory-wide") Needs Assessment Update</a>.</p> <p>The methods are also described in <a href="#">A Guide to Conducting the Maternal, Infant, and Early Childhood Home Visiting Program Statewide Needs Assessment Update</a>.</p>	<p>There is no prescribed approach to conducting the Title V MCH Block Grant needs assessment. States describe their methodology in their Title V MCH Block Grant application narrative.</p> <p>Title V MCH Block Grant programs include information about the quantitative and qualitative methods used to assess the strengths and needs of the MCH population in each of the five identified population health domains, MCH program capacity, and supportive partnerships and collaborations in their reports.</p>	<p>Data elements collected for the Title V MCH Block Grant needs assessment can be used to support the modified simplified or independent methods of the MIECHV needs assessment. Conversely, MIECHV needs assessment data and MIECHV home visiting service utilization data can be used to inform the Title V MCH Block Grant needs assessment.</p>



	MIECHV Statewide Needs Assessment Update	Title V MCH Block Grant Needs Assessment	Considerations
Data collection	<p>For the simplified method, HRSA provided nationally available county-level data for the statutorily defined risk factors to MIECHV state awardees, who can use these data, modify them as needed, or supplement them with data from other sources.</p> <p>HRSA worked with territories individually to help them obtain available data.</p> <p>The simplified method may be modified by adding additional local data to reflect the state context, meet the needs of the stakeholders, and overcome limitations of the method.</p> <p>Awardees that choose an independent method identify alternate data and data sources. Alternative methods must include the use of rigorous methods to collect new data and/or statistical methods to analyze data.</p> <p>In addition to analyzing data to identify at-risk communities, awardees will gather data to assess the quality and capacity of current home visiting programs, assess community readiness, and assess capacity for providing substance use disorder treatment and counseling services.</p> <p>Qualitative data can supplement the quantitative data used in the needs assessment. Key informant interviews, focus groups, and surveys are commonly used methods for collecting qualitative data.</p>	<p>Title V MCH Block Grant programs have access to Federally Available Data (FAD) provided by HRSA's MCHB, but also may collect (or obtain) and compile their own data. Most Title V MCH Block Grant programs collect and analyze data according to race, ethnicity, and language of origin. These data may be part of the routine collection of participant information across programs.</p> <p>Title V MCH Block Grant programs examine available data for each MCH priority area to determine which areas are of most concern in their state.</p> <p>Title V MCH Block Grant programs include information about the data sources used to inform the needs assessment process in their reports.</p>	<p>Both needs assessments collect and/or analyze data related to the health and well-being of key populations, including women, infants, and children.</p> <p>Title V MCH Block Grant programs will be doing quantitative and qualitative data collection. MIECHV awardees using either a modified simplified or an independent method for the needs assessments will be engaged in data collection as well. This presents opportunities for collaborating around data collection and accessing available data sources.</p> <p>The county-level data collected for the MIECHV needs assessment can contribute to the statewide data collected for the Title V MCH Block Grant needs assessment.</p> <p>The statewide Title V MCH Block Grant data provide a reference point for the MIECHV county-level data.</p>



<p><b>MIECHV Statewide Needs Assessment Update</b></p>	<p><b>Title V MCH Block Grant Needs Assessment</b></p>	<p><b>Considerations</b></p>
<p>Awardees submit a Needs Assessment Update Narrative and a completed Needs Assessment Data Summary Excel file.</p> <p>Nonprofit awardees additionally provide documentation that they are authorized to submit the needs assessment on behalf of the state where they provide services.</p> <p>An outline for the Needs Assessment Update Narrative is included in the state and territorial Supplemental Information Requests.</p>	<p>States report on both the process and findings of the needs assessment.</p> <p>For the process, states provide a high-level summary that includes the following:</p> <ul style="list-style-type: none"> <li>• The goals, framework, and methodology that guided the needs assessment process</li> <li>• The level and extent of involvement by stakeholders, including families, individuals, and family-led organizations</li> <li>• The quantitative and qualitative methods used to assess the strengths and needs of the MCH population in each of the five identified population health domains, MCH program capacity, and supportive partnerships and collaborations</li> <li>• The data sources used to inform the needs assessment process</li> <li>• The interface between the collection of needs assessment data, the finalization of the state’s Title V priority needs, and the development of the Five-Year Action Plan</li> <li>• A description of the MCH population health status within each of the five population health domains (Women/Maternal Health, Perinatal/Infant Health, Child Health, Adolescent Health, and Children with Special Health Care Needs)</li> <li>• An assessment of the state Title V program capacity, including organizational structure, agency capacity, and MCH workforce capacity</li> <li>• A description of Title V program partnerships, collaboration, coordination, and relevant organizational relationships that expand the capacity and reach of the state Title V program in meeting the needs of its MCH population, including family partnerships</li> <li>• The identification of 7-10 highest MCH priority needs for the five-year reporting cycle.</li> <li>• The linkage of the MCH priority needs with selected national and state performance measures</li> </ul>	<p>MIECHV awardees report the results of their needs assessment update by submitting their Needs Assessment Update Narrative and their needs Assessment Data Summary Excel file to HRSA. Title V MCH Block Grant programs report the results of their needs assessment in their annual application.</p>

	MIECHV Statewide Needs Assessment Update	Title V MCH Block Grant Needs Assessment	Considerations
Reporting		<p>For the findings, the Needs Assessment Summary should highlight the state's noted MCH strengths/needs in three main areas:</p> <ul style="list-style-type: none"> <li>• MCH Population Health Status -- The state should clearly describe the health status of the MCH population within each of the five population health domains (i.e., Women/Maternal Health, Perinatal/Infant Health, Child Health, Adolescent Health, and CSHCN), based on the quantitative and qualitative analyses conducted.</li> <li>• Title V Program Capacity -- A state's assessment of its Title V program capacity should examine current resources, staffing and organizational structure, state agency coordination and family partnerships.</li> <li>• Title V Program Partnerships, Collaboration and Coordination -- the state should describe relevant organizational relationships that serve to expand the capacity and reach of a state Title V program in meeting the needs of its MCH population, including CSHCN.</li> </ul>	

## C: Resources

This section of the Crosswalk spells out the resources to support the needs assessments, including funding and technical assistance.

	MIECHV Statewide Needs Assessment Update	Title V MCH Block Grant Needs Assessment	Considerations
Funding	In FY 2018, HRSA allotted up to \$200,000 to each awardee to complete the needs assessment update. Awardees could also budget for the needs assessment in their FY 2019 formula grant applications as long as it did not result in a reduction in home visiting services compared to the previous year.	There is no earmarked funding provided for conducting the needs assessment. Title V MCH Block Grant funding is contingent on submission of the needs assessment.	
Technical assistance (TA) resources	<p><a href="#">A Guide to Conducting the Maternal, Infant, and Early Childhood Home Visiting Program Statewide Needs Assessment Update</a> describes a recommended 10-step process for conducting the needs assessment update.</p> <p>HRSA will release a Frequently Asked Questions document.</p> <p>Home Visiting Improvement Action Center Team (HV-ImpACT) and Home Visiting Performance Management Continuous Quality Improvement (HV-PM/CQI) TA Specialists will provide individualized TA to awardees.</p> <p>Additional TA resources are forthcoming which can be accessed here. HV-ImpACT will host a series of peer sharing dialogues on topics related to the needs assessment.</p>	<p>The Title V MCH Block Grant Guidance describes a conceptual framework for conducting the needs assessment.</p> <p>State Title V MCH Block Grant programs may request technical assistance related to the needs assessment from HRSA MCHB's Division of State and Community Health.</p> <p><a href="#">The Association of Maternal and Child Health Programs (AMCHP) Needs Assessment Toolkit is an online resource on the Title V MCH Block Grant needs assessment.</a></p> <p>HRSA's MCHB and AMCHP have partnered to conduct a series of didactic webinars and learning labs to support states in completing the Title V MCH Block Grant needs assessment. These webinars and learning labs have been archived for easy reference by states.</p> <p>The <a href="#">National MCH Workforce Development Center</a> includes a systems-level overview of the needs assessment process and a number of useful tools.</p>	HRSA is committed to providing ongoing TA to both programs.



# Opportunities for Collaboration Between the MIECHV and Title V MCH Block Grant Needs Assessments

There are a number of opportunities for collaboration between the two needs assessments. Specific ideas for collaboration are suggested below, using the 10 steps for conducting the MIECHV needs assessment described in A Guide to Conducting the Maternal, Infant, and Early Childhood Home Visiting Program Statewide Needs Assessment Update as a framework.

## Step 1:

### Assemble Your Team

- Include staff from each program on the other's needs assessment team to ensure a consistent point of contact and clear channels of communication across the programs.
- Consider convening one joint needs assessment team to maximize expertise, avoid duplicative efforts, and leverage key stakeholder participation.
- Share staff, when possible. For example, can the Title V MCH Block Grant epidemiologist provide subject-matter expertise on developing additional indicators for the MIECHV Program to include in their simplified method?

## Step 2:

### Create Your Work Plan

- Leverage resources across the needs assessment efforts to offset costs. For example, identify common activities to carry out together, such as conducting focus groups or developing a written report of findings. Be mindful of federal grants management requirements to ensure appropriate allocation and tracking of funds.
- Consider how to incorporate and address state public health and health care delivery priorities for MCH populations.
- Engage families, individuals, and other caregivers in the information-gathering process for both programs. Work together to gather important information needed from families for both needs assessments, including how easy or difficult it is to navigate community services, families' perceptions of coordination between partners, and families' needs that are not being met by home visiting and community partners.

## Step 3:

### Determine Your Methodology

- Share and compare statewide and county-level needs data to explore geographic variation in needs across the state.
- Identify the types of qualitative data that would be most useful to both programs, and combine efforts to collect these data.
- Harness the collective knowledge of community partners by designing specific home visiting-related questions for surveys, encouraging key informant interviews with home visiting partners, guiding exploration of specific topics related to home visiting in focus groups, and profiting from the expertise and experiences of the MCH and MIECHV advisory council members by interviewing them about their perceptions of home visiting.

## Step 4:

### Identify the Quality and Capacity of Current Home Visiting Programs

- Ensure that the needs assessments identify home visiting programs funded by both MIECHV and state funds.
- Evaluate the range of service utilization and performance data from both programs that may inform an assessment of quality and capacity of programs for pregnant women and families with young children.
- Identify barriers faced by both MIECHV and Title V MCH Block Grant programs in at-risk counties, including geographic barriers and gaps in the availability and accessibility of health and social services and family supports.
- Determine the presence of local early childhood systems, coordination entities or councils, and public support and community support for maternal and child health and home visiting.

## Step 5:

### Assess Community Readiness

- Create an inventory to identify organizations in the community that can support service delivery to young children and their families, including services offered through the MIECHV and Title V MCH Block Grant programs.
- Collaborate with local agencies to map a diverse array of community assets well-suited to support implementation of home visiting and other Title V MCH Block Grant programs.
- Collect information about each relevant service organization in at-risk communities—for example, organizations for children identified through developmental screening, for women identified through depression screening as needing referrals, or for people who have experienced intimate partner violence.
- Assess how MIECHV local implementing agencies and Title V MCH Block Grant-supported local programs coordinate to improve care and services for their overlapping target populations.



## Step 6:

### Assess Capacity for Providing Substance Use Disorder Treatment and Counseling Services

- Collect and share information about the experiences of pregnant women and families impacted by substance use disorder in accessing and navigating services.
- Jointly analyze substance use treatment capacity data to understand how specific communities compare to the state or territory's overall capacity. For example, a community may have a robust network of substance use disorder treatment providers compared to the state overall, or a lack of providers compared to the state overall.
- Collaborate to determine the capacity of local resources, identify geographic barriers, and assess gaps in availability and accessibility of substance use disorder services for MCH populations.
- Connect with home visiting implementing agencies and Title V-supported local programs, including home visitors and front line staff, to better understand their strengths and challenges in meeting the needs of families impacted by substance use.

## Step 7:

### Coordinate with Other Needs Assessments

- Identify other needs assessments being conducted throughout the state and territory. Jointly reach out to those involved in other needs assessment efforts in the state or territory to form a work group that can identify opportunities to leverage and align key activities of the various needs assessments.
- Use information collected through any available needs assessments to learn more about (1) how the state or territory's systems of care are meeting the needs of underserved and vulnerable populations, (2) the state or territory's unique strengths and challenges regarding the availability and accessibility of health care services, and (3) how this impacts the health status of women, infants, and children.

## Step 8:

### Synthesize Your Findings

- Jointly analyze data (e.g., by race, ethnicity, and language) that are part of the routine collection of participant information across programs. These data can be used by both programs to identify disparities; assess the trends impacting the health status of women, infants, and children; understand how specific programs may be enhanced to better meet participants' diverse needs; and better target service delivery.
- Convene a meeting of key needs assessment stakeholders from the MIECHV and Title V MCH Block Grant programs (and others if applicable) to present findings and discuss the results of each, consider if findings are consistent, and note if there are any critical gaps; investigate and understand differences.



## Step 9:

### Report and Share Your Findings

- Develop a joint distribution plan for needs assessments findings.
- Create a combined report or a one-page summary for stakeholders of key findings (e.g., on the health status of the most vulnerable mothers and infants in the state and/or in specific communities). Describe how home visiting can positively impact that population.
- Jointly message and share the combined report or summary using a variety of media, meetings, and written products.



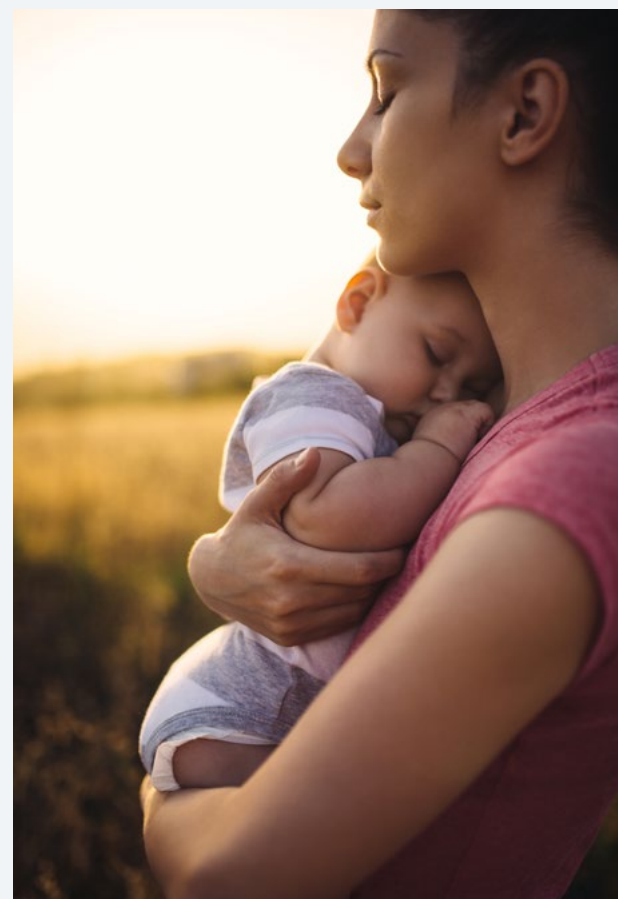
## Step 10:

### Use Your Needs Assessment Data and Findings

- In the FY 2021 MIECHV formula funding application, describe your plans to use the results of the needs assessment update to inform the use of MIECHV funds. Provide information about which at-risk communities you intend to serve with MIECHV funds.
- Use the findings to improve and update referral processes for each program.
- Direct workforce development resources to collaboratively enhance MIECHV and Title V MCH Block Grant service delivery and improve coordination of services.
- Use needs assessment findings to apply for new funding that benefits both programs.
- Use the needs assessment data, findings, and the relationships built during the process to support further integrated data systems efforts.
- Use information gathered in the MIECHV needs assessment to support the Title V MCH Block Grant program in assessing the impact of proposed activities on the mothers, infants, and children being served by the home visiting program.

## Conclusion

The MIECHV and Title V MCH Block Grant programs have shared goals, serve many of the same populations, and seek to improve aligned performance measures. Understanding the similarities and differences across the needs assessments, as well as areas for close collaboration, can serve to strengthen the state or territory's needs assessments for both MIECHV and MCH. In addition, programs are encouraged to continue their collaboration beyond the needs assessment, ensuring a statewide approach to addressing maternal and child health concerns common to both programs.



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