

# Division of Maternal and Child Health Workforce Development

## MCH Training Program Handbook

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Winter 2020



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## Director's Welcome – Trainee Handbook



Lauren Raskin Ramos, Director  
Division of Maternal and Child Health Workforce Development (DMCHWD)  
Maternal and Child Health Bureau (MCHB)  
Health Resources & Services Administration (HRSA)

Dear MCHB Trainees:

It is my pleasure to welcome you to the Maternal and Child Health Bureau's (MCHB) Division of Maternal and Child Health Workforce Development (DMCHWD)!

DMCHWD's mission is to provide national leadership and direction in educating and training our nation's current and future leaders in maternal and child health. DMCHWD supports interdisciplinary graduate training and MCH workforce development programs for the practicing workforce. These programs assure that health professionals are trained in the unique needs of MCH populations. As trainees, you will help advance our mission.

Your acceptance as a trainee places you into a network with MCH professionals around the country who have incredible clinical, academic, public health and policy expertise that will shape the future of MCH. DMCHWD training programs are dedicated to advancing exemplary practice and leadership in the field of maternal and child health. Their emphasis is on the core principles of interdisciplinary training, diversity, family leadership, and support for Title V and other MCH systems.

DMCHWD encourages you to connect both with trainees in your program and with trainees across the nation. This Trainee Handbook will provide current and former trainees, training programs, and MCH stakeholders with online and downloadable resources in one convenient location. It contains resources to orient you to the training program and a list of frequently used acronyms.

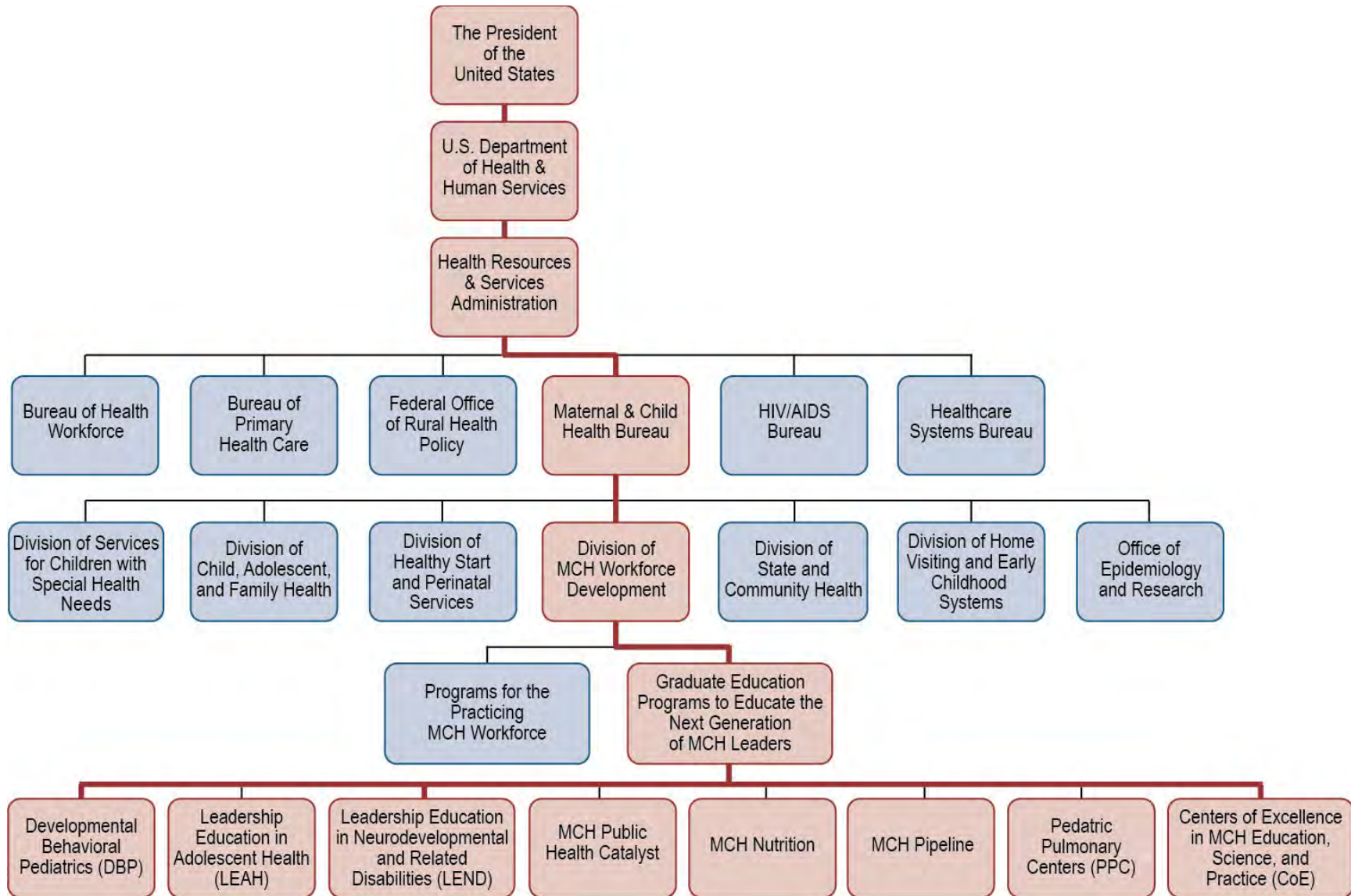
We want to ensure you know about resources available to support your development as an MCH professional and your continued connection to the training program as you navigate through your training and beyond. We hope it will be a resource to you as you embark on a path to shape the health and care of our nation's women, children, and families.

Sincerely,

A handwritten signature in black ink that reads "Lauren Raskin Ramos".

Lauren Raskin Ramos, Director  
Division of Maternal and Child Health Workforce Development (DMCHWD)

# DMCHWD Contextual Organizational Chart



[Text description of organizational chart](#)

# MCH Training Program 101

The [Division of MCH Workforce Development](#) (DMCHWD) provides national leadership and direction in educating and training our nation's future leaders in maternal and child health. Special emphasis is placed on the development and implementation of interprofessional, family-centered, community-based and culturally competent systems of care across the entire life course with experiences in one life stage shaping health in later stages.

The Division, part of HRSA's Maternal and Child Health Bureau, supports programs established in federal legislation ([Title V of the Social Security Act](#) and the [Autism CARES Act](#)) to complement state and local health agency efforts. In partnership with state MCH programs, academic institutions, and professional organizations, the Division collaborates with other health training programs of the federal government to ensure that MCH initiatives are based on emerging and evidence-based practices.

In FY 2018, the Division of MCH Workforce Development awarded 189 grants, an investment of approximately \$60 million. Grants are awarded to develop trainees for leadership roles in the areas of MCH teaching, research, clinical practice, and/or public health administration and policymaking.

## [Graduate Education Programs to Educate the Next Generation of MCH Leaders](#)

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### **Centers of Excellence in MCH (CoE)**

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The mission of the [Centers of Excellence in MCH in Education, Science and Practice](#) (Centers of Excellence) is to improve the health of women, infants, children, youth, and their families. Administered within accredited Schools of Public Health, these programs support the training of public health professionals for leadership in MCH through exposure to the knowledge and skills needed to achieve MCH leadership competencies. MCHB currently funds 13 Centers of Excellence programs.

### **Developmental Behavioral Pediatrics (DBP)**

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The intent of the [Developmental-Behavioral Pediatrics](#) (DBP) Training Program is to train the next generation of leaders in developmental-behavioral pediatrics and build capacity to evaluate, diagnose or rule out, develop, and provide evidence-based interventions to individuals with autism spectrum disorders (ASD) and other developmental disabilities (DD). The MCHB DBP Training Program is concerned with the broad range of behavioral, psychosocial, and developmental issues that present in primary care pediatric practice. This is accomplished through supporting fellows in developmental-behavioral pediatrics by preparing them for leadership roles as teachers, investigators, and clinicians advancing the field, and providing pediatric practitioners, residents, and medical students with essential biopsychosocial knowledge and clinical expertise. MCHB currently funds 12 programs in eight states.

### **Leadership Education in Adolescent Health (LEAH)**

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The [Leadership Education in Adolescent Health](#) (LEAH) program provides interdisciplinary leadership training in adolescent and young adult health for five core disciplines including medicine, nursing, nutrition, psychology, and social work. Graduate and post-graduate training prepares health professionals for leadership roles in public health practice, clinical care, research, education, and organization of health care services by integrating biological, developmental, mental health, social, economic, and environmental issues within a public health framework. Through training, technical



assistance, and continuing education, LEAH programs work to improve family- and youth-centered, community-based care for adolescents and young adults and enhance the capacity of Title V and other maternal and child health programs to improve young people's health. MCHB currently funds 7 LEAH projects in schools of medicine and teaching hospitals.

### **Leadership Education in Neurodevelopmental and Related Disabilities (LEND)**

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[Leadership Education in Neurodevelopmental and Related Disabilities](#) (LEND) provides interdisciplinary training to enhance the clinical expertise and leadership skills of professionals dedicated to caring for children with neurodevelopmental and other related developmental disabilities (DD), including autism spectrum disorder (ASD). Funded through the Autism CARES Act, LEND programs promote education, early detection, and intervention in ASD. LEND program trainees participate in academic, clinical, leadership and community opportunities and receive training in cultural and linguistic competence using a family-centered approach. LEND programs improve the health of children who have, or are at risk for, neurodevelopmental or related disabilities by preparing trainees from a wide variety of professional disciplines to assume leadership roles and to ensure high levels of clinical competence. Through the grant, LEND programs increase awareness of ASD, reduce barriers to screening and diagnosis of ASD and DD, promote evidence-based interventions for individuals with ASD and other DD, and train professionals to utilize valid screening tools to diagnose and rule out ASD and DD. MCHB currently funds 52 LEND programs.

### **MCH Public Health Catalyst Program**

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The purpose of the [Catalyst Program](#) is to: 1) provide an increased focus on fundamental MCH content and competencies within schools of public health where no concentration currently exists, and 2) provide MCH content exposure to an increased number of public health students, introducing students to careers in the maternal and child health field. The Catalyst programs provide MCH exposure to graduate students, including individuals from underrepresented backgrounds (including racial and ethnic minorities), who are also underrepresented in the maternal and child health field. MCHB currently funds 5 Catalyst programs in schools of public health.

### **MCH Nutrition**

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The [Leadership Education in MCH Nutrition](#) projects provide long-term graduate education and short-term continuing education in MCH nutrition through graduate programs. Students at any of the 8 funded projects nationwide are trained in leadership skills, core public health principles, epidemiology, environmental approaches to population intervention, and the development and evaluation of nutrition-related, cost-effective interventions for specific populations. Training is provided in identifying and designing outcome evaluations and in evaluating the potential physiological and biochemical mechanisms linking diet and nutritional status with risk or disease status. This training focuses on leadership in pediatric and maternal nutrition and is designed to provide both clinical and public health approaches to working with the pediatric and maternal populations. Examples of areas of emphasis include specialized neonatal intensive care training, children with special health care needs, breastfeeding promotion and maternal nutrition, adolescent nutrition, and pediatric obesity.

## MCH Pipeline

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The [Maternal and Child Health Pipeline Training Program](#) (MCHPTP) promotes the development of a culturally diverse and representative health care workforce by recruiting undergraduate training students from economically and educationally disadvantaged backgrounds (including racial and ethnic minorities) into maternal and child health (MCH) professions. It recruits undergraduate students enrolled at institutions that have a demonstrated record of training individuals who are from disadvantaged backgrounds and who are underrepresented in the MCH field. MCHPTP educates, mentors, guides and provides enriching experiences to increase students' interests and entry into MCH public health and related fields. The program encourages and motivates students to seek careers in MCH by making the appropriate undergraduate didactic research, clinical and/or field experiences available and exposing students to Title V and other MCH agencies that serve children and families. In addition, MCHPTP develops leadership skills, fosters a broader public health perspective, and explores the integration of primary care and public health to improve population health. MCHB currently funds 6 Pipeline programs.

## Pediatric Pulmonary Centers (PPC)

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The [Pediatric Pulmonary Centers](#) (PPCs) serve as models of excellence in interdisciplinary training, systems integration, and research for core disciplines, including pediatric pulmonary medicine, nursing, nutrition, and social work. The 6 funded PPCs provide a critical link in assuring that the next generation of health care providers contribute to MCHB's mission to assure access to care for maternal and child health populations by developing interdisciplinary leaders who improve the health status of infants, children, and youth with chronic respiratory and sleep-related conditions.

## Programs for the Practicing MCH Workforce

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### Collaborative Office Rounds (COR)

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[Collaborative Office Rounds](#) (COR) support small discussion groups that meet at regular intervals over sustained periods to address the mental health aspects of pediatric care. Developmental-behavioral pediatricians and child psychiatrists jointly lead the groups. Participants include primary care practitioners, fellows, and residents. COR groups aim to improve the ability of primary care providers to address the day-to-day psychosocial issues, and collaborate with developmental-behavioral pediatricians and child psychiatrists. MCHB currently funds 10 COR programs.

### Children's Healthy Weight Collaborative Improvement and Innovation Network (CoIIN)

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Using a state-to-state network, the [CHW CoIIN](#) supports MCH State Title V Programs to adopt evidence-based or evidence-informed policies and practices related to nutrition, physical activity, and breastfeeding to promote healthy weight among all children, including those with special health care needs. This program strengthens states' efforts to address the National Performance Measures (NPMs) as well as the National Outcome Measure (NOM) related to childhood obesity management and prevention. MCHB currently funds one Children's Healthy Weight CoIIN. There are currently 13 states participating in the CoIIN.

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## Healthy Tomorrows Partnership for Children

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The [Healthy Tomorrows Partnership for Children](#) grant program (HTPCP) supports community-based partnerships and collaborations aimed at improving the health status of disadvantaged children, youth, and families nationwide by increasing their access to health services. Innovative community-based programs and models of care that build on existing community resources are implemented and evaluated. HTPCP funds programs that incorporate preventive health, communication, education, coordination and integration of care, and access to psychosocial supports into their innovative models of care. In addition, grantees in community practice often support the development of family-centered, culturally competent pediatric clinicians and public health professionals. Currently, Healthy Tomorrows funds 40 grants across 22 states and the District of Columbia.

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## MCH Navigator

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The [MCH Navigator](#) is a centralized portal for pursuing continuous learning in MCH and is designed to help emerging and established MCH professionals map professional growth pathways. The MCH Navigator links learners to existing open-access training, organized in areas consistent with nationally endorsed public health and MCH leadership competencies. In this way, the MCH Navigator is able to meet the ongoing training needs of a diverse MCH workforce by providing a one-stop shop for high quality, relevant training. Key site features include a searchable, web-based resource inventory of free learning opportunities, training spotlights on hot topics in the field of MCH, and a library of learning opportunities to support implementation of the MCH Block Grant.

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## MCH Workforce Development Center

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The purpose of the [MCH Workforce Development Center Program](#) is to support workforce development for State Title V program leaders and partners to meet current public health MCH policy and programmatic imperatives around health transformation, including ongoing transformation of the Title V Block Grant. This national training hub prepares the current and future MCH workforce with skills and knowledge to succeed in a transformed public health system and is engaged with key academic, policy, and public health practice partners to build capacity of MCH leaders and partners in the 59 states and jurisdictions.

A secondary audience for the center's activities is undergraduate and graduate students that are engaged in MCH Training Programs. The Center provides both didactic and internship opportunities for MCH students, building skills in the three focus areas of the Center. The Center supports a Title V Internship Program, which pairs undergraduate and graduate students to undertake health transformation projects identified by state Title V MCH agencies. The internships provide students with real world maternal and child health experience and provide states with the opportunity to both acculturate the future workforce and to benefit from the new knowledge and skills of current trainees.

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## Pediatric Mental Health Care Access (PMHCA) Program

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The [Pediatric Mental Health Care Access](#) (PMHCA) Program promotes behavioral health integration into pediatric primary care using telehealth. State or regional networks of pediatric mental health teams provide teleconsultation, training, technical assistance, and care coordination for pediatric primary care providers to diagnoses, treat and refer children with behavioral health conditions. The PMHCA Program



uses telehealth modalities to provide timely detection, assessment, treatment, and referral of children and adolescents with behavioral health conditions, using evidence-based practices and methods such as web-based education and training sessions. There are currently 21 funded PMCHA programs.

### **Reaching Practicing MCH Professionals in Underserved Areas through Education and Training Program**

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The [Reaching Practicing MCH Professionals in Underserved Areas through Education and Training Program](#) is dedicated to serving diverse MCH public health professionals in isolated geographic areas of the country who are underserved through traditional education programs and who may not otherwise have access to pursue advanced education. The program helps working MCH professionals obtain training that focuses on MCH content and skills development while maintaining their responsibilities to their family and work through short-term continuing education such as distance-learning modules, webinars, and in-person workshops. In addition, trainees have the opportunity to earn credit towards a certificate or degree. MCHB currently funds 4 Reaching Practicing MCH Professionals in Underserved Areas through Education and Training programs.

## Trainee Perspectives

### **Alena M. Clark, PhD, MPH, RD, CLC – University of Minnesota, 1998-1999 Nutrition Trainee, MCH Nutrition; Colorado State University, 2004-2005 Nutrition Trainee**



When I started my career as a Registered Dietitian Nutritionist in 1997, my interest area was in Public Health. Upon being admitted into the University of Minnesota's MPH Program and offered a MCH Traineeship, I did not realize at that time how the training, education and experiences I received would lead me to where I am today. I am currently a Professor in the Department of Nutrition and Dietetics at the University of Northern Colorado; I have been at UNCO since 2007. I teach and mentor students in courses such as Lifecycle Nutrition, Breastfeeding: Support and Promotion, and Maternal and Child Nutrition. I am the immediate past Treasurer for the Academy of Nutrition and Dietetics Women's Health Dietetic Practice Group.

My areas of research including breastfeeding support, mental health and nutrition and international nutrition. My colleague and I have established a successful lactation support program at the University of Northern Colorado and because of the success, we have developed a toolkit to assist other universities on establishing a lactation support program based on our model. In 2015, I was able to go to Cameroon, Africa and provide education to nutrition counselors who work with mothers, infants and children in their communities on how to encourage and support breastfeeding, and appropriate infant feeding practices.

My interest in Maternal and Child Nutrition was heightened through the work that I completed during the MCH Traineeship while attending the University of Minnesota under the direction of my two mentors at the time - Dr. Mary Story and Dr. Jamie Stang. I also had the opportunity to complete another MCH Traineeship while attending Colorado State University under the leadership of Dr. Liz Adams. The opportunities I received during the MCH Traineeship included program planning, teaching and counseling experiences, research and policy development, all of which are skills that I continue to use with all of the "hats" that I wear in my current position. I am extremely grateful to have received a MCH Traineeship as the experiences in maternal and child health provided the foundation for who I am today.

### **Mark Batshaw – Kennedy Krieger Institute, Former Trainee (1975), Leadership Education in Neurodevelopmental and Related Disabilities (LEND)**



I am the director of the Children's Research Institute and serve as the Executive Vice President, Physician-in-Chief and Chief Academic Officer of Children's National Health System. I also act as the chairperson of pediatrics and associate dean for academic affairs at the George Washington University School of Medicine and Health Sciences, hold the Professorship "Fight for Children Chair in Academic Medicine," and was elected President of the American Pediatric Society in 2016.

I completed my undergraduate degree at the University of Pennsylvania and attended medical school at the University of Chicago. I completed my residency in pediatrics at the Hospital for Sick Children/University of Toronto

in Toronto, Ontario, and my postdoctoral fellowship in neurodevelopmental pediatrics at the Kennedy Institute of Johns Hopkins University School of Medicine.

I've spent my entire career in the care of children with developmental disabilities. My research is inborn errors of urea synthesis. I published more than 200 articles and reviews and am the senior editor of the classic textbook *Children with Disabilities*, now in its seventh edition. I continue development in the fields of neurodevelopmental disabilities and developmental-behavioral pediatrics, programs that address issues that confront children with disabilities.

My ability to develop the infrastructure to support child development is what I consider the outstanding contribution of my career. I am responsible for establishing training programs, funded by the Maternal and Child Health Bureau, in Philadelphia and Washington D.C. that train professionals to assume leadership positions in the care of children with neurodevelopmental and related disorders. I have successfully developed the research infrastructure and successfully competed for Intellectual Developmental Disabilities Research Centers at the University of Pennsylvania and Children's Hospital National Medical Center.

These successes, in no small measure, are the result of the experiences gained as a LEND trainee at the Kennedy Krieger Institute.

### **Lauren DePaola - University of Florida, 2010 Social Work Trainee, Pediatric Pulmonary Centers (PPC)**

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I started my work as a UF PPC Social Work trainee in 2010. I now have a private practice with a focus on Perinatal Mood and Anxiety Disorders (PMADs). I established the Alachua County Perinatal Mental Health Coalition (ACPMHC) and am now the Executive Director. The ACPMHC is a 501 (c) 3 nonprofit, with a mission to improve awareness of PMADs in Alachua County, Florida, and expand resources, education and support systems for those at risk for PMAD in our community and to provide professional development resources to increase provider screening and referral.

The incidence and prevalence rates of PMADs in Alachua County were unknown until last year. Over the past year, the ACPMHC has completed an extensive Maternal Mental Health community needs assessment. The findings of this survey indicate that there is wide-ranging need for services related to perinatal mood disorders, including raising awareness for professionals and community members alike, training for health and mental health professionals, and direct services to at-risk mothers.

I am actively involved in advocacy at the national, state, and local levels by participating on the state PMAD coalition. I testified in the Florida Senate on the topic of PMADs and provided testimony at the Florida Governor's Children and Youth Council on this topic. I am currently working with Senator Lauren Book on Florida's first legislative bill addressing maternal mental health. She also works with the National Board of Postpartum Support International.

My UF PPC traineeship contributed to my awareness of the importance of advocacy and increased my confidence to pursue this. I feel the interdisciplinary aspect of PPC training has been helpful in many ways.

## Alicia Dixon Docter, MS, RDN, CD - University of Washington, 1986-1988 Trainee, Leadership Education in Adolescent Health (LEAH)

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As I finalized my undergraduate studies, I decided to become a registered dietitian. I took a path that was relatively different from the traditional clinical dietitian at the time – I spent the first 8 years of my career developing nutrition education programs for schools in California and then disseminating them through the state and across the U.S. When the University of Washington (UW) MCH multidisciplinary traineeship presented itself in 1986, I embraced my dream of learning about, experiencing and melding all of my interests in the direction of supporting this incredible part of our population.

My MCH-funded adolescent health traineeship opened up doors I never would have anticipated.

Since completing my fellowship, I have had many experiences that have allowed me to help adolescents develop a voice and meet their nutrition and health needs:

- A successful multi-disciplinary private practice seeing adolescents and their families from all over the greater Seattle greater area;
- Staffing the state’s only co-ed prison and working with incarcerated youth; working with sports teams at the high school, collegiate and professional levels;
- Helping open the UW Adolescent Medicine Clinic at Seattle Children’s Hospital (SCH);
- Developing programming in eating disorder and obesity treatment;
- Training new dietitians, medical providers, social workers as the clinic expanded;
- Developing training in communication methods that are supportive of adolescents (motivational interviewing, etc.); and,
- Developing and evaluating an innovative approach to obesity treatment that incorporates a developmental model in addition to a strengths-based approach.

My current position as a manager in ambulatory nutrition at SCH allows me to influence dietitians in other sub-specialties to incorporate adolescent-centered communication styles and techniques allowing interactions to be more satisfying, for teens and providers. My career dream is being Core Nutrition Faculty for the MCHB-funded LEAH training program these last 5 years. Not only do I have the opportunity to mentor amazing nutrition students and dietitians within the traineeship, I am involved in program development and administration as a faculty and training director where I can work with trainees from all disciplines. As Chair of the Nutrition committee for the Society for Adolescent Health and Medicine (SAHM), I have been involved in the development of several position papers, articles, book chapters, and numerous workshops. Earlier in 2017, I received the Outstanding Preceptor Award from the UW Nutritional Sciences/School of Public Health.

What a run it’s been – and I owe it to my amazing MCH funded adolescent medicine traineeship, my wonderful mentors, Jane Rees and Catherine Holman. Thanks to you from my family and me.

**Scott Harpin, MS, MPH - University of Minnesota, 2003 Trainee, Centers of Excellence in MCH Education, Science and Practice (Schools of Public Health)**

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When I entered the Maternal and Child Health Master of Public Health (MPH) Program, I was already working toward a master's in adolescent nursing at the University of Minnesota. I was taking a handful of public health classes and it became apparent how interdisciplinary the public health, nursing, and adolescent health faculty were. I wanted to be steeped in maternal and child health and, having been a nurse for a long time already, I wanted to be immersed in a different paradigm. I knew public health would give that to me.

I am helping to shape the future of public health through the creation of a one-of-a-kind dual degree program at the University of Colorado. My colleagues and I received an Advanced Nursing Education Program Grant from the Health Resources and Services Administration's Bureau of Health Professions. With those funds, we will develop a program in which nurses will complete an MPH and then transition immediately into a doctorate of nursing practice program.

For most of our students, the advanced nursing education program is fulfilling a need for an education they probably didn't know existed. So many nurses tell me how much they value what an MPH can bring them professionally, including the possibility for new career options. This new program will give students the opportunity to merge their nursing and public health backgrounds.

There are many logistics to deal with when doing a dual degree, but in retrospect, it was so efficient. I had some great mentors and advisors in Minnesota who modeled the type of academic professional that I want to be, so I am happy to have this mix of teaching and research that is meaningful and clinically applicable.

**Alison Schonwald, MD - Boston Children's Hospital, 2001-2004 Fellow, Developmental Behavioral Pediatrics (DBP)**

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I knew I wanted to work with children, but my DBP fellowship opened the door to a world I did not know existed. I liked complicated children and working with families, long-term relationships and meaningful projects. Through my fellowship, I found a place where I could make a difference. Clinical care was the focus of my first decade as faculty at a large academic center, staying in the same program where I trained. I spent the next decade refocused on education and training others. My initial clinical interest and research in broadening the practice of developmental screening morphed into educating others on the topic. Through local, regional and national opportunities, I spend more and more time educating others on topics across our field. I have been involved in multiple roles regarding

education and developmental screening at the American Academy of Pediatrics, and I currently serve on the sub-board of the American Board of Pediatrics. I also sit on the MA Board of Early Education and Care. As I move into the next chapter of my career outside of an academic setting, I remain committed to interdisciplinary care of children with developmental disabilities across the lifespan, and to contributing to a workforce that will continue to best meet the needs of this vulnerable population.



## List of Common Acronyms

| Acronym          | Organization   |
|------------------|--|
| AAP              | American Academy of Pediatrics   |
| ACF              | Administration for Children and Families                                   |
| ACL              | Administration for Community Living  |
| ACO              | Accountable care organization  |
| ADA              | Americans with Disabilities Act  |
| ADDM             | Autism and Developmental Disabilities Monitoring (Network)                 |
| AHRQ             | Agency for Healthcare Research and Quality                                 |
| AIDD             | Administration on Intellectual and Developmental Disabilities              |
| AIM              | Alliance for Innovation on Maternal and Child Health                       |
| AMCHP            | Association of Maternal and Child Health Programs                          |
| APA              | American Psychological Association   |
| APHA             | American Public Health Association   |
| ASD              | Autism spectrum disorder   |
| ASPHN            | Association of State Public Health Nutritionists                           |
| ASPPH            | Association of Schools and Programs of Public Health                       |
| ASTHO            | Association of State and Territorial Health Officials                      |
| ATMCH            | Association of Teachers of Maternal and Child Health                       |
| AUCD             | Association of University Centers on Disabilities                          |
| Autism CARES Act | Autism Collaboration, Accountability, Research, Education, and Support Act |
| AYAH             | Adolescent and young adult health  |
| BF               | Bright Futures   |
| BHW              | Bureau of Health Workforce   |
| BPHC             | Bureau of Primary Health Care  |
| CDC              | Centers for Disease Control and Prevention                                 |
| CEU              | Continuing education unit  |
| CFR              | Code of Federal Regulations  |
| CISS             | Community Integrated Service Systems                                       |
| CityMatCH        | City and County Health Departments' Maternal and Child Health Programs     |
| CME              | Continuing medical education   |
| CoE              | Centers of Excellence in MCH Education, Science, and Practice              |
| CoIIN            | Collaborative Innovation and Improvement Network                           |
| COR              | Collaborative office rounds  |
| CPE              | Continuing professional education  |
| CYSHCN           | Children and youth with special health care needs                          |
| DBP              | Developmental behavioral pediatrics or pediatrician                        |
| DD               | Developmental disabilities   |
| DMCHWD           | Division of MCH Workforce Development                                      |
| DSCH             | Division of State and Community Health                                     |
| DSM              | Diagnostic and Statistical Manual of Mental Disorders                      |
| ECCS             | Early Childhood Comprehensive Systems                                      |
| ECTA             | Early Childhood Technical Assistance Center                                |
| EHDI             | Early Hearing Detection and Intervention                                   |

| <b>Acronym</b>    | <b>Organization</b>   |
|-------------------|---|
| <b>EMSC</b>       | Emergency Medical Services for Children                             |
| <b>EPSDT</b>      | Early Periodic Screening, Diagnosis, and Treatment                  |
| <b>ESMs</b>       | Evidence-based strategy measures                                    |
| <b>FERPA</b>      | Family Educational Rights and Privacy Act                           |
| <b>FIRST</b>      | MCH Field-Initiated Innovative Research Studies                     |
| <b>FQHC</b>       | Federally-Qualified Health Center                                   |
| <b>GME</b>        | Graduate medical education  |
| <b>HHS</b>        | U.S. Department of Health and Human Services                        |
| <b>HIPAA</b>      | Health Insurance Portability and Accountability Act                 |
| <b>HRSA</b>       | Health Resources and Services Administration                        |
| <b>HS</b>         | Healthy Start   |
| <b>HTPCP</b>      | Healthy Tomorrows Partnership for Children Program                  |
| <b>HV R&amp;D</b> | Home Visiting Research and Development (Platform)                   |
| <b>HWRN</b>       | Healthy Weight Research Network                                     |
| <b>ICD</b>        | International Classification of Diseases                            |
| <b>IDD</b>        | Intellectual and developmental disabilities                         |
| <b>IDDRC</b>      | Intellectual and Developmental Disabilities Research Center         |
| <b>IDEA</b>       | Individuals with Disabilities Education Act                         |
| <b>IEP</b>        | Individualized Education Program                                    |
| <b>IFSP</b>       | Individualized Family Service Plan                                  |
| <b>ITP</b>        | Infant Toddler Program  |
| <b>LEAH</b>       | Leadership Education in Adolescent Health                           |
| <b>LEND</b>       | Leadership Education in Neurodevelopmental and Related Disabilities |
| <b>MCH</b>        | Maternal and child health   |
| <b>MCHB</b>       | Maternal and Child Health Bureau                                    |
| <b>MCHBG</b>      | (Title V) Maternal and Child Health Block Grant                     |
| <b>MCHPTP</b>     | Maternal and Child Health Pipeline Training Program                 |
| <b>MCO</b>        | Managed care organization   |
| <b>MIECHV</b>     | Maternal, Infant, and Early Childhood Home Visiting                 |
| <b>MLC</b>        | Making Lifelong Connections   |
| <b>NAPPSS</b>     | National Action Partnership to Promote Safe Sleep                   |
| <b>NACCHO</b>     | National Association of County and City Health Officials            |
| <b>NCCC</b>       | National Center for Cultural Competency                             |
| <b>NCEMCH</b>     | National Center for Education in Maternal and Child Health          |
| <b>NICHD</b>      | National Institute of Child Health and Human Development            |
| <b>NICHQ</b>      | National Institute for Children’s Health Quality                    |
| <b>NOMs</b>       | National Outcome Measures   |
| <b>NPMs</b>       | National Performance Measures                                       |
| <b>NSCH</b>       | National Survey of Children’s Health                                |
| <b>OCR</b>        | USDE Office for Civil Rights  |
| <b>OER</b>        | Office of Epidemiology and Research                                 |
| <b>OT</b>         | Occupational therapy  |
| <b>PBIS</b>       | Positive Behavioral Interventions and Supports                      |
| <b>PCP</b>        | Primary care provider   |
| <b>PECARN</b>     | Pediatric Emergency Care Applied Research Network                   |

| <b>Acronym</b> | <b>Organization</b>   |
|----------------|---|
| <b>PMHCA</b>   | Pediatric Mental Health Care Access                                     |
| <b>PPC</b>     | Pediatric Pulmonary Centers   |
| <b>PsyD</b>    | Doctor of psychology  |
| <b>PT</b>      | Physical therapy  |
| <b>RD</b>      | Registered dietitian  |
| <b>RN</b>      | Registered nurse  |
| <b>SBHC</b>    | School-based health center  |
| <b>SDAR</b>    | R40 MCH Secondary Data Analysis Research (Program)                      |
| <b>SLP</b>     | Speech language pathology   |
| <b>SPRANS</b>  | Special Projects of Regional and National Significance                  |
| <b>SSDI</b>    | State Systems Development Initiative                                    |
| <b>TAG</b>     | Trainee Ambassador Group (MCHB)   |
| <b>TAG</b>     | Think, Act, Grow (Adolescent Health)                                    |
| <b>UCEDD</b>   | University Centers for Excellence in Developmental Disabilities         |
| <b>USDA</b>    | U.S. Department of Agriculture  |
| <b>USDE</b>    | U.S. Department of Education  |
| <b>WIC</b>     | Special Supplemental Nutrition Program for Women, Infants, and Children |

## Text Description of Organizational Chart

The [organizational chart found on page two](#) of this document portrays DMCHWD's connection to the Department of Health and Human Services, and the chart also shows the various branches within DMCHWD.

The chart begins with the President of the United States in the first tier. The U.S. Department of Health and Human Services is the second tier. HRSA is the third tier.

The fourth tier indicates branches within HRSA, which include the Bureau of Health Workforce, Bureau of Primary Health Care, Federal Office of Rural Health Policy, Maternal and Child Health Bureau, HIV/AIDS Bureau, and Healthcare Systems Bureau.

The fifth tier indicates branches within the Maternal and Child Health Bureau, which include the Division of Services for Children with Special Health Needs, Division of Child, Adolescent, and Family Health, Division of Healthy Start and Perinatal Services, DMCHWD, Division of State and Community Health, Division of Home Visiting and Early Childhood Systems, and Office of Epidemiology and Research.

The sixth tier indicates branches within DMCHWD, which include Programs for the Practicing MCH Workforce and Graduate Education Programs to Educate the Next Generation of MCH Leaders.

The seventh tier indicates branches within the Graduate Education Programs, which include Developmental Behavioral Pediatrics, Leadership Education in Adolescent Health, Leadership Education in Neurodevelopmental and Related Disabilities, MCH Public Health Catalyst, MCH Nutrition, MCH Pipeline, Pediatric Pulmonary Centers, and Centers of Excellence in MCH Education, Science, and Practice.

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