

NC Department of Health and Human Services

Local Health Director Orientation for Women's, Infant, and Children's Health Programs

Division of Public Health Division of Child and Family Well-Being

March 2022

NCDHHS STRATEGIC PLAN: IMPROVE CHILD AND FAMILY WELL-BEING



Improve child and family well-being so all children have the opportunity to develop to their full potential and thrive Key Objective: Build a strong infrastructure to increase access to child and family well-being services.

Key Strategies:

- Establish a Division of Child and Family Well-Being to maximize services and outcomes for children and their families, including child nutrition programs, prevention services for children and youth, children's mental health services, and early intervention programs
- Build a data and analysis infrastructure across childserving sectors to identify gaps and inequities in service provision and well-being outcomes to ensure the most effective deployment of federal, state, and local resources
 Increase access to children's mental health services by expanding mental health services in primary care, schools, and specialty care

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The Division of Child and Family Well-Being will meet the health, social, and educational needs of children and youth and their families in North Carolina by:



Enhancing how children and families access programs that support their well-being: Coordination across programs serving children and families allows more families to access programs across mental, social, and health services. An early area of work will be making it easier for families to enroll in the nutrition programs in the Division (e.g., WIC and FNS/SNAP).

Coordinating increased investments to improve child health and well-being:



The investments will be informed by data with a focus on closing equity gaps in child wellbeing. An early focus will be maximizing the impact of the federal American Rescue Plan funds to address inequities in child well-being, including increasing access to children and youth behavioral health services.

Elevating the value of our teams supporting child and family well-being:



We are inspired by our team members who passionately work to improve the lives of children and families in North Carolina. Our commitment is to create a thriving culture where we celebrate our positive impact on child well-being.

Starting March 1st, 2022...



Nutrition Programs

FNS/SNAP, WIC, Child and Adult Care Food Program (CACFP)



Early Intervention Programs

Infant-Toddler Program for ages 0-3 with special needs



Children's Behavioral Health Programs

Focus on school & community mental health services for children and youth, such as system of care, children with complex needs, coordination with schools on mental health services, pediatric mental health care access program, behavioral health supports and coordination for DSS-involved youth, and other child- and youth-focused behavioral health pilots



Health & Prevention Services for Children and Youth

Home visiting and Triple P, nurse consultation (school nursing, child care, and child health), school health (e.g., school-based health centers, school nutrition), genetics & newborn screening, supports for children and youth with special health care needs (CYSHCN), care management for at-risk children (CMARC), Health Check/Health Choice outreach, local child fatality prevention

WHAT PROGRAMS WILL BE IN THE DIVISION OF PUBLIC HEALTH?

Starting March 1st, 2022...



Immunization Programs

Vaccines for Children, routine and COVID-19 vaccines



Women's Wellness Programs Reproductive Life Planning/ Family Planning, Teen Pregnancy Prevention Initiatives (TPPI)



Infant and Community Health Programs

Preconception health, initiatives focused on infant mortality and infant mortality disparities, sickle cell program



Maternal Health Programs

Maternal Health programs, Maternal Mortality Review Committee, Care Management for High Risk Pregnancies (CMHRP), Maternal Mental Health MATTERS



Title V Office MCH Block Grant, Child Abuse Prevention/ Essentials for Childhood

Maternal and Child Health Programs

- Support and promote the health and well-being of ALL North Carolina women, men, mothers, children, youth and families to reduce inequities and improve outcomes
- Life course approach



- Need to address social determinants of health and equity
- Early childhood priority → improved lifelong outcomes

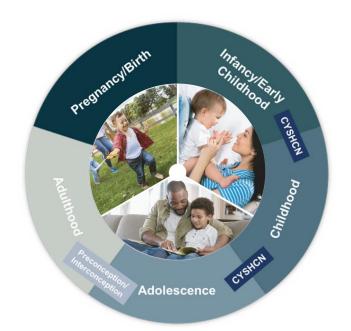






Life Course Initiatives

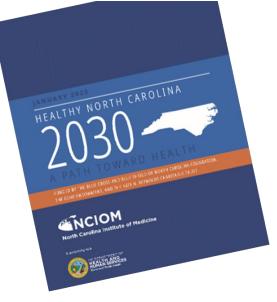
- Infrastructure, support, and resources to the state's overall MCH efforts
- Programs including but *not limited* to:
 - Title V (Happy 85th Anniversary!)
 - Title X (Family Planning)
 - Maternal/ Perinatal Health
 - Infant Mortality initiatives
 - MIECHV/ Home Visiting
 - Child Abuse Prevention
 - Immunizations
 - School health
 - Nutrition services, including WIC
 - Newborn Metabolic/ Hearing Screening
 - Early Intervention/ Infant-Toddler Program
 - Children and Youth with Special Health Care Needs



LIFE COURSE



STRENGTHEN AND ALIGN EFFORTS





North Carolina's Perinatal Health Strategic Plan 2016-2020



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Partnership with LHDs

- Staff support the many programs implemented through LHDs
- All counties are served by regional staff members including:
 - Nutrition Consultants
 - School Health Nursing Consultants
 - Social Work Consultants
 - Women's Health Nursing Consultants
 - Child Health Nursing Consultants
 - Sickle Cell Educator Counselors

Women, Infant and Community Wellness (DPH)

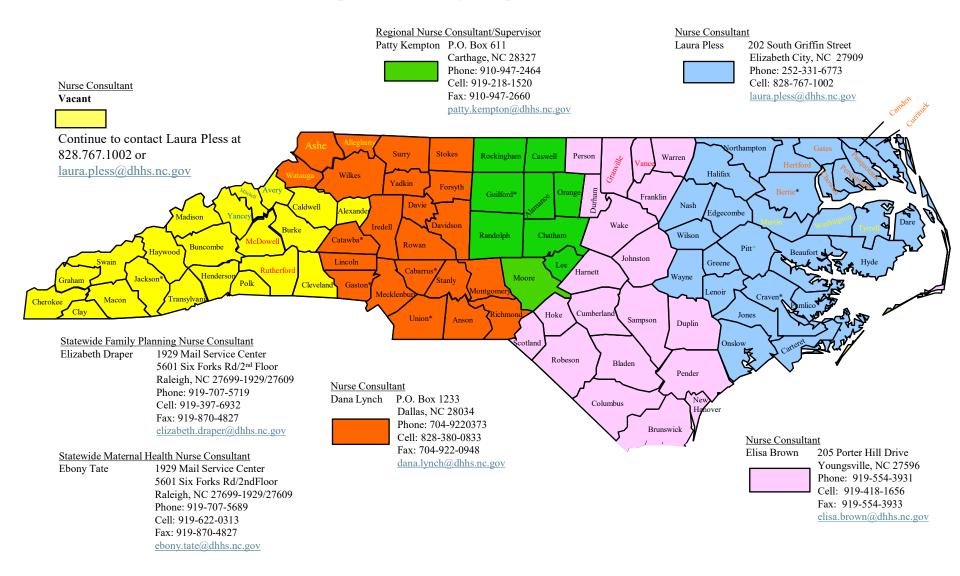
- Programs and services aim to improve the overall health status of women, increase planned pregnancies, reduce infant sickness and death, and strengthen families and communities
- Also develops medical guidance for health care providers and offers technical assistance, consultation and training of staff that provide health services to women in the areas of nutrition, nursing, social work, education and training

Women, Infant, and Community Wellness Section (DPH)

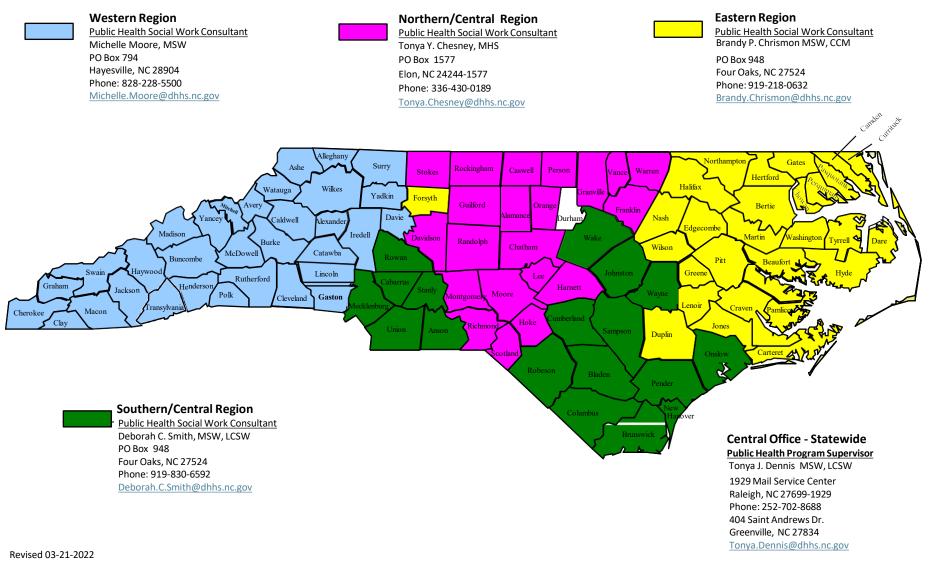
- Composed of 3 Branches:
 - Reproductive Health
 - Maternal Health
 - Infant & Community Health
- Contact: Belinda Pettiford, Section Chief
 - belinda.pettiford@dhhs.nc.gov

Department of Health and Human Services - Division of Public Health Women, Infant, and Community Wellness Section Regional Nurse Consultants

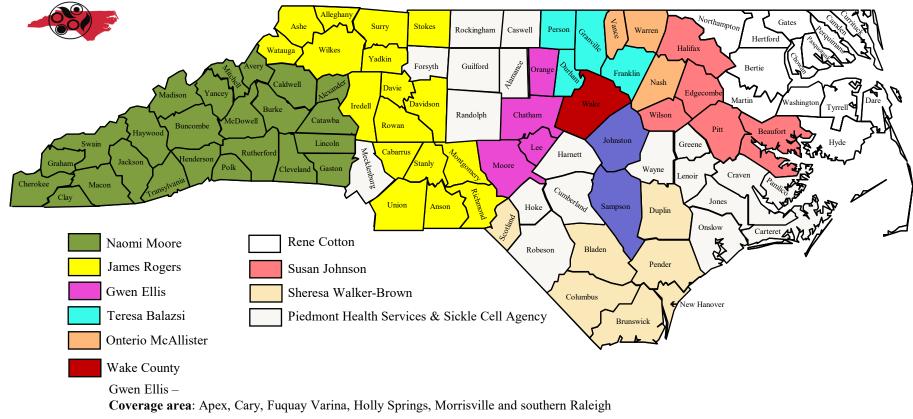
Temporary Coverage Map Effective 2/25/2022



NC Department of Health and Human Services - Division of Public Health Women, Infant and Community Wellness Health Section Regional Social Work Consultants Care Management for High-Risk Pregnancies (CMHRP)



North Carolina Sickle Cell Syndrome Program Service Regions



Onterio McAllister -

Coverage area: Knightdale, northern Raleigh, Wake Forest and Zebulon

Sheresa Walker-Brown -

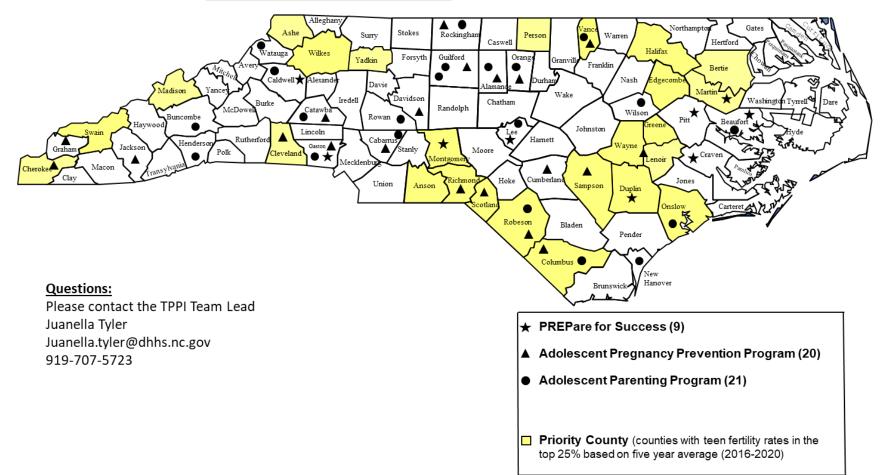
Coverage area: Garner and Wendell

Division of Public Health Women, Infant, and Community Wellness Section 1929 Mail Service Center, Raleigh, NC 27699-1929 Office: 919-707-5700 Fax: 919-870-4827 Client Resource Line: 1-866-NC-SCELL or 1-866-627-2355

NC Teen Pregnancy Prevention Initiatives



TPPI Funded Sites 6/1/2021 – 5/31/2022



Whole Child Health Section (DCFW)

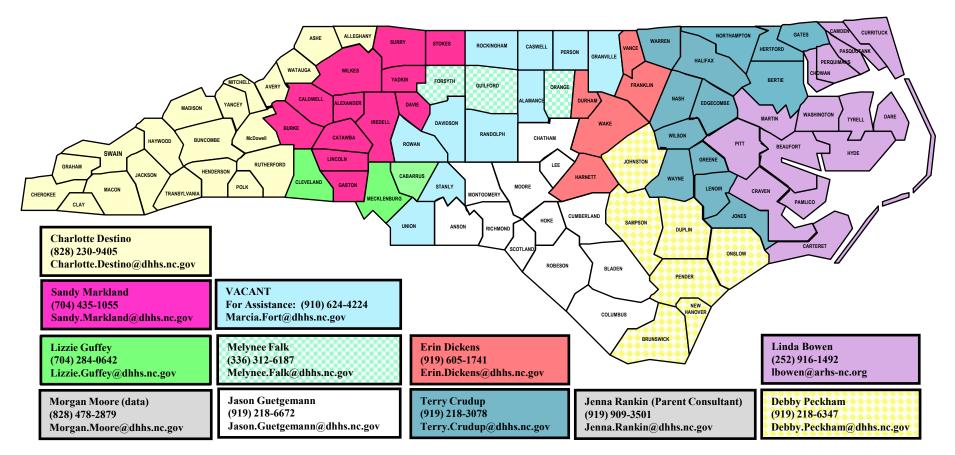
- Develops and promotes services that protect and enhance the health and well-being of children, birth to 21 years, and their families
- Programs provide clinical guidance, quality assurance, technical assistance, consultation and training
- Contact:
 - Anne Odusanya, Assistant Director of Whole Child Health Section, Division of Child and Family Well-Being
 - <u>Anne.Odusanya@dhhs.nc.gov</u>

Whole Child Health Section (DCFW)

• Programs include:

- Home visiting (i.e. NFP, Healthy Families America)
- Triple P (Positive Parenting Program)
- Child Care Health Consultation
- Child Health Consultation
- Care Management for At-Risk Children (CMARC)
- Genetic Services
- Early Hearing Detection and Intervention
- Health Check/NC Health Choice Outreach
- Children and Youth with Special Health Care Needs (CYSHCN) Family Support
- Innovative Approaches-Systems Improvement for CYSHCN
- Local Child Fatality Prevention Teams
- School Health
- Child/Adolescent Mental Health

North Carolina Early Hearing Detection and Intervention Regional Contacts



*Orange County served by Erin Dickens and Melynee Falk

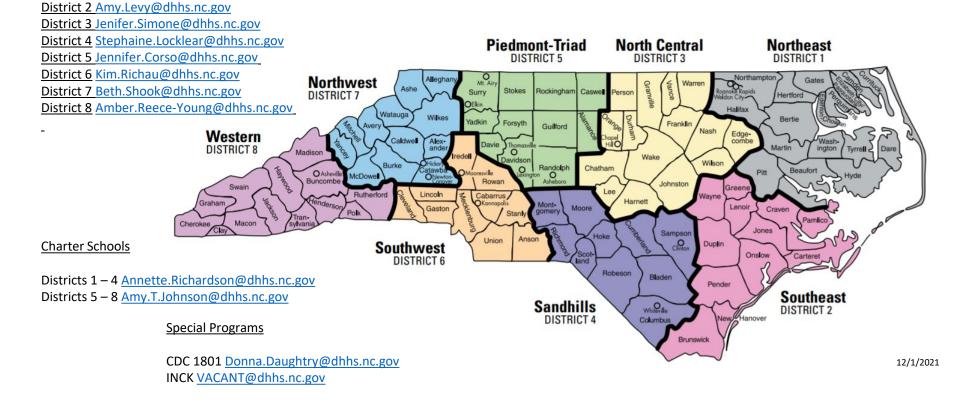
*Wake County served by Erin Dickens, Terry Crudup and Jason Guetgemann

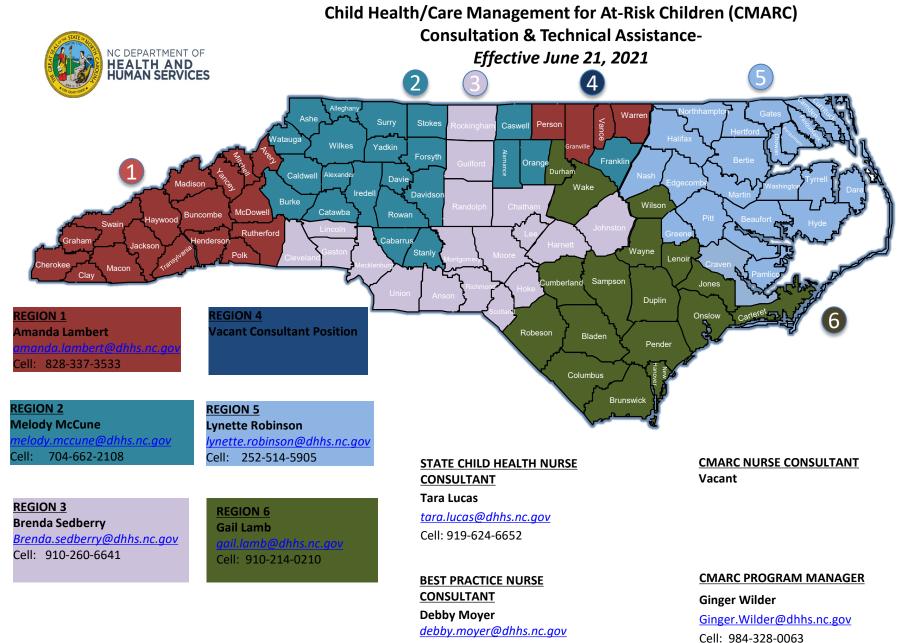
Jenifer.Simone@dhhs.nc.gov State Consultant

District 1 Trish.Hooton@dhhs.nc.gov

NC DPH School Health Nurse Consultant Team

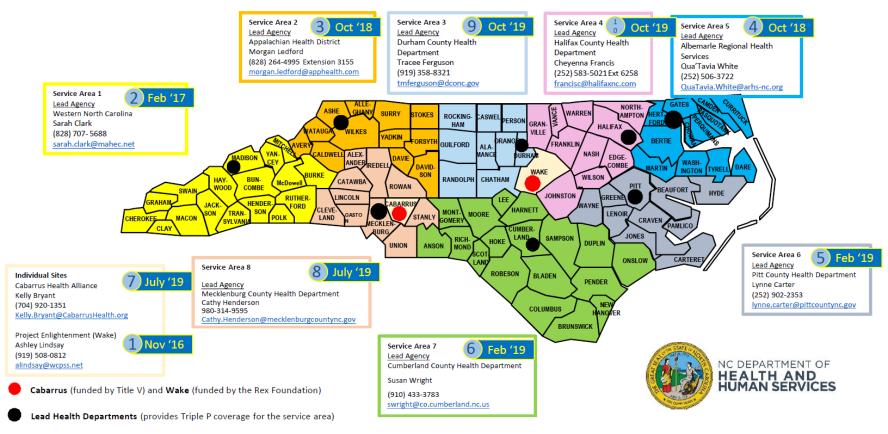
NC DPH School Nursing Support





Cell: 919-218-2945

Positive Parenting Program – Triple P



April 2019



NC Immunization Branch (DPH)

- Promotes public health through the identification and elimination of vaccine-preventable diseases and promoting vaccination
- Oversees the NC Immunization and Vaccines for Children (VFC) program, a federally funded entitlement program providing vaccines at no cost to eligible children:
 - Medicaid-eligible
 - Uninsured
 - American Indian or Alaska Native (AI/AN)
 - Underinsured (Underinsured children can only be vaccinated at a Federally Qualified Health Center (FQHC) or Rural Health Center (RHC)

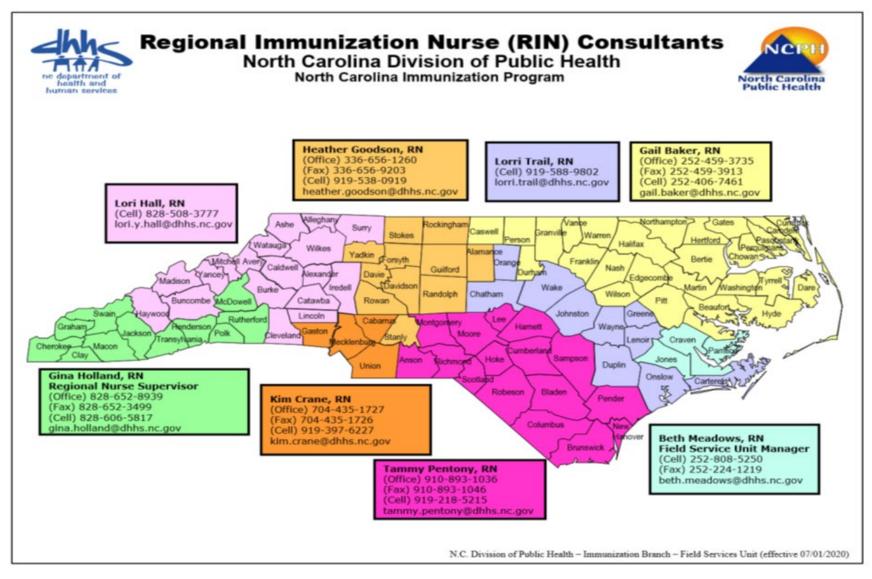
NC Immunization Branch (DPH)

- Oversees Section 317 of the Public Health Service Act Program to vaccinate priority populations
- Newborns receiving the birth dose of hepatitis B prior to hospital discharge
- Fully Insured infants of hepatitis B infected women
- Uninsured or underinsured adults
- Fully insured individuals seeking vaccines during public health response activities including:
 - Outbreak response
 - Post-exposure prophylaxis
 - Disaster relief efforts
 - Mass vaccination campaigns or exercises for public health preparedness
 - Individuals in correctional facilities and jails

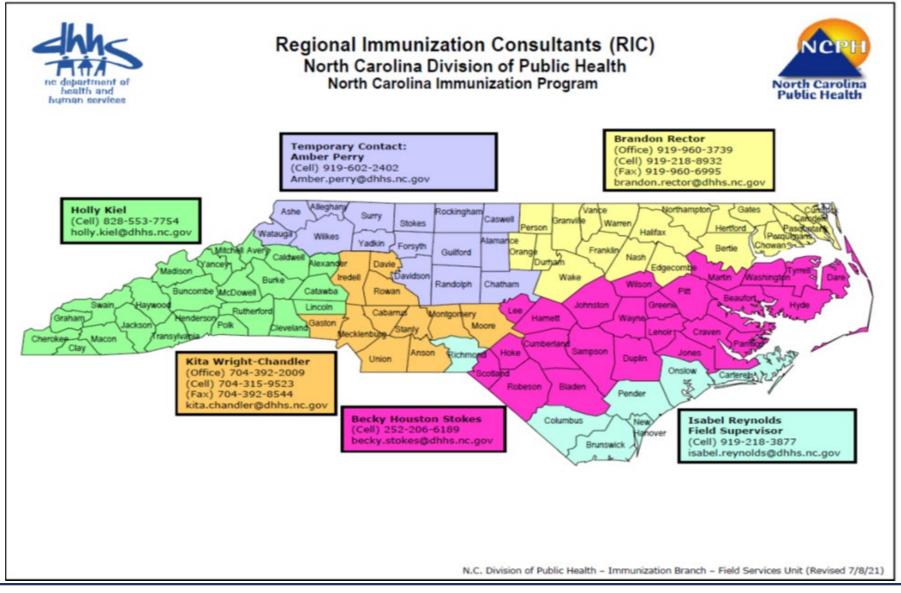
NC Immunization Branch (DPH)

- Maintains the NC Immunization Registry (NCIR) and COVID-19 Vaccine Management System (CVMS)
- Supports Vaccine Preventable Disease (VPD) surveillance, reporting and control measures
- Contact: Wendy Holmes, Branch Head, <u>wendy.holmes@dhhs.nc.gov</u>
 - For COVID-19 vaccine, contact <u>ryan.jury@dhhs.nc.gov</u>, COVID-19 Vaccine Program Director

Regional Immunization Nurse Consultants (RIN)



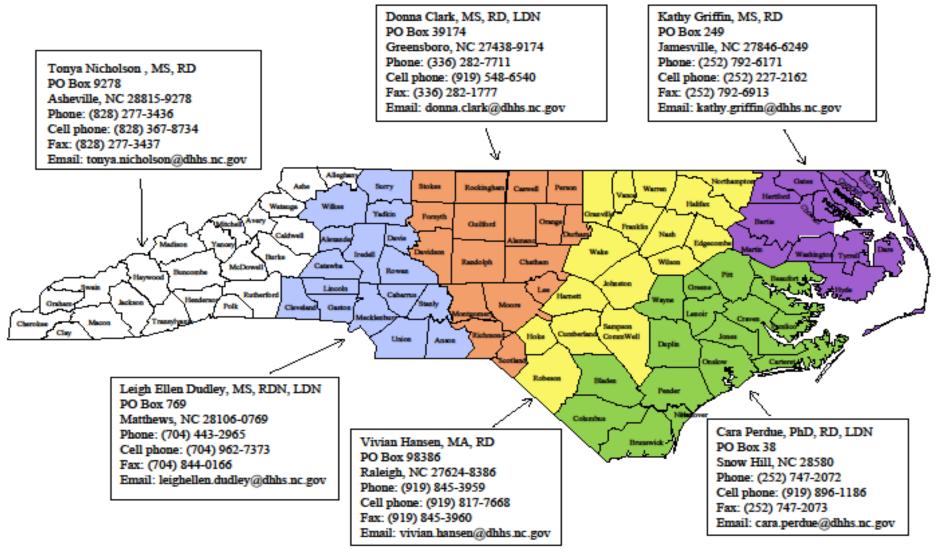
Regional Immunization Consultants (RIC)



Community Nutrition Services Section (DCFW)

- Promotes sound nutrition habits among infants, children and women in their child-bearing years to improve health status
- The Section administers:
 - Special Supplemental Nutrition Program for Women, Infants and Children (WIC)
 - Breastfeeding Peer Counselor Program (BFPC)
 - WIC Farmers' Market Nutrition Program (FMNP) – Child and Adult Care Food Program (CACFP)
- Contact: Mary Anne Burghardt, Assistant Director for Community Nutrition Services
 - maryanne.burghardt@dhhs.nc.gov

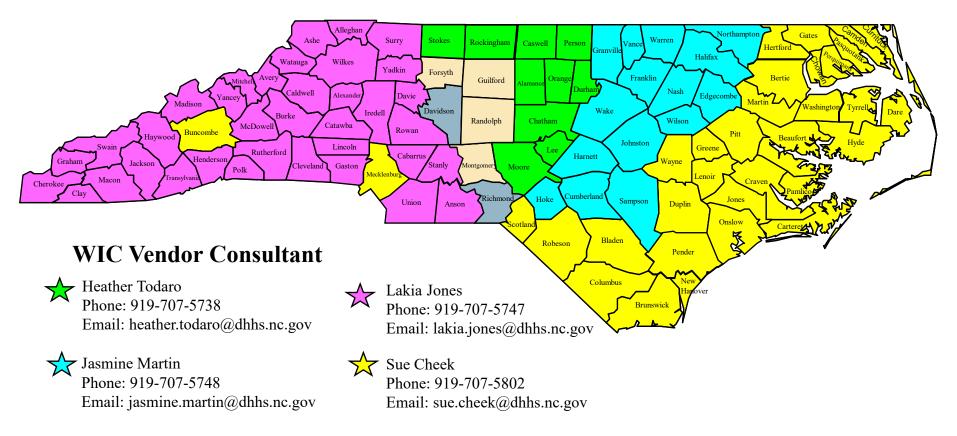
WIC Nutrition Services Unit Regional Nutrition Consultant Coverage Division of Child and Family Well-Being / Community Nutrition Services Section



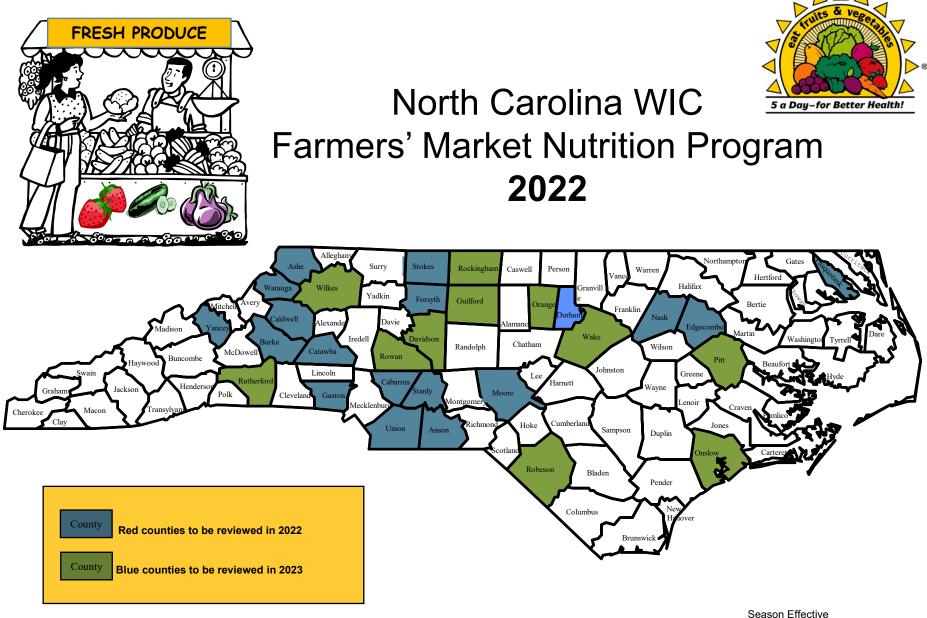
Effective 03-10-2022

WIC Vendor Management Consultant Coverage

Division of Child and Family Well-Being, Community Nutrition Services Section



NCDHHS | Local Health Director Orientation |

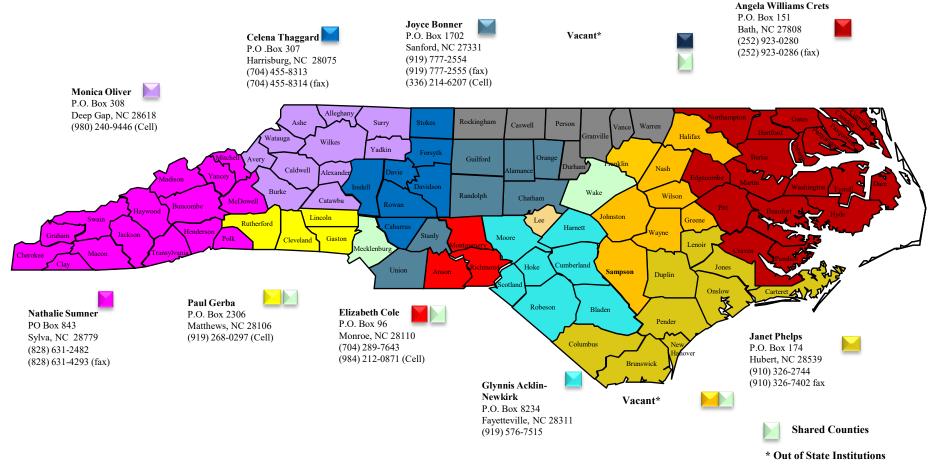


May 2, 2022 -September 30, 2022

North Carolina Department of Health and Human Services Division of Child and Family Well-Being

Community Nutrition Services Section

Regional Assignments



February 2022

Early Intervention Section (DCFW)

- North Carolina Infant Toddler Program (NC ITP) provides services and support to families with infant and toddlers birth to three with special needs
- First 3 years are the most important time for learning in a child's life
- Contact: Sharon Loza, Assistant Director for Early Intervention
 - sharon.loza@dhhs.nc.gov

www.beearly.nc.gov



NC Infant Toddler Program Children's Developmental Services Agencies

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☆Early Intervention Branch State Office

- 1. Greensboro
- 2. Durham
- 3. Raleigh
- 4. CDSA of Cape Fear 12. Shelby
- 5. Rocky Mount
- 6. Greenville
- 7. New Bern
- 8. Elizabeth City

- 9. CDSA of Western NC
 - 10. CDSA of the Blue Ridge
 - 11. Morganton/Hickory
- -ear 12. Sheldy 13. CDSA of Charlotte-
 - Mecklenburg 14. Concord
 - 14. Concord
 - 15. CDSA of the Sandhills
- 16. Winston-Salem

How Children Qualify for the ITP

A child and family may receive supports and services if the child is:

- Up to three years old
- Has a developmental delay
 - Not developing like other same-aged children
- Has an established condition



- Diagnosed physical or mental condition that is likely to cause developmental delay
- Includes genetic disorders, vision problems, hearing loss and autism

When Should Referrals Be Made to the CDSA?

If you have concerns like these:

"My son isn't trying to walk." – Physical Development

"She just doesn't respond to her name." – Social/Emotional Development

"My son was talking, but now he's not." – Communication Development

"She is a very picky eater." – Adaptive Development

"Something just doesn't seem right." – Cognitive Development







Title V - Maternal and Child Health Block Grant

- Nation's oldest federal state partnership
- Aims to improve health and well-being of *all* mothers and children by:
 - Investing in the health of mothers, children & families
 - Improving accountability of performance and impact
 - Demonstrating returns on investment while maintaining state flexibility

Title V - Maternal and Child Health Block Grant

- Includes (but not limited to):
 - Access to quality care, including comprehensive prenatal and postnatal care
 - Preventive and primary care services for children
 - Family-centered, community-based systems of coordinated care for children with special health care needs
 - -Assistance in reduction of infant mortality

Title V - Maternal and Child Health Block Grant

- Contributes funding to LHDs for the following programs:
 - Child Health preventive services
 - Maternal Health/ Prenatal services
 - Reproductive Life Planning/Family Planning
 - Care Management for At-Risk Children (non-Medicaid)
 - Care Management for High Risk Pregnancies (non-Medicaid)
 - Innovative Approaches for Children with Special Health Care Needs
 - Strengthening Families/Triple P
 - Local Child Fatality Prevention Teams
 - Healthy Beginnings
 - Nurse Family Partnership
 - Teen Pregnancy Prevention
 - Evidence-Based Programs in Counties with Highest Infant Mortality Rates

No Wrong Door



- Kelly Kimple, Senior Medical Director for Health Promotion and Title V Director, Division of Public Health
 - Kelly.Kimple@dhhs.nc.gov
- Yvonne Copeland, Director of the Division of Child and Family Well-Being
 - <u>Yvonne.Copeland@dhhs.nc.gov</u>
- Madhu Vulimiri, Deputy Director of the Division of Child and Family Well-Being
 - Madhu.Vulimiri@dhhs.nc.gov