The Local Maternal and Child Health (LMCH) team at the Michigan Department of Health and Human Services (MDHHS) convened a workgroup to discuss program requirements, annual workplans, and financial reporting. We identified challenges and ideas for solutions and/or new ideas moving forward.

We invited participation on the LMCH workgroup from health officers, nurse administrators, financial officers, and health educators. We looked for a broad range of representation, including urban, suburban, rural, large multi-county departments and single county. We had an overwhelming response to our call for nominations. Because of the strong interest in the workgroup, we decided to give all LMCH colleagues an opportunity to share challenges and opportunities related to LMCH program requirements through a survey. Results were shared with the workgroup and informed solutions and ideas for moving forward.

Workgroup members consisting of 13 local health department representatives, and 6 MDHHS staff met on October 31, 2019, November 19, 2019 and January 28, 2020. The final meeting will be held on February 18, 2020.

The first two meetings included an overview of LMCH program requirements, federal Title V block grant requirements and State of Michigan legislative requirements. The workgroup reviewed the survey results and provided additional feedback related to what is working well and challenges with the current LMCH documents and processes. Based on feedback received, the 3rd meeting focused on proposed solutions. The proposed solutions include:

- Reduce budget projects in EGrAMS from 5 to one or two
- Continue with annual plan (versus three-year plan)
- Retain flexibility for local activities
- Retain flexibility to use promising practices as well as Evidence based/informed strategies
- Retain Work Plan components goals, objectives, metrics, evidence-based/informed strategies, action steps
- Retain Performance Measure Structure, with one work plan for each measure
- Eliminate breaking things down by Pyramid of Services in Action Steps of Action Plan and Table of allocations
- Propose adding table of services to capture this federally required information
- Changes to the annual plan and work plan were proposed such as eliminating priority strategies, reducing the data required, eliminating the stakeholder/responsible person, changing from "outputs" to "deliverables"
- The Year end Plan template was retained. The columns for reporting are reduced from 2 to one in the FY 21 report. Report questions simplified
- A schedule of webinar technical assistance "office hours" will be provided
- Orientation to the LMCH Plan and Report will be provided
- Peer Sharing will be available during our 1st annual LMCH Coordinator meeting
- A timeline was developed to assist with keeping track of due dates
- A guidance document for the LMCH Annual Plan and Year End report is in development that will provide detailed information around requirements

The LMCH team is currently looking for LHD volunteers to put their current FY budget on one or two projects to determine whether moving to a reduced number of budgets still allow the Dept to track and capture needed reporting requirements for HRSA. If your LHD is interested in volunteering, please let Trudy and Robin know ASAP.