I. CHESTER COUNTY COMMUNITY FOUNDATION
GRANT PROPOSAL SUMMARY SHEET

One page only. This page will be shared electronically with Grant Panel Members & Fund Advisors.

Note: If Philanthropy Network’s Common Grant Application is used, CCCF’s Summary Sheet MUST accompany application.
To obtain an electronic version of this application, visit www.chescocf.org

Date 9/15/2021

Contact Information
Organization Name: Maternal and Child Health Consortium
Address: 30 W Barnard St #1 West Chester, PA 19382
Phone: 610-344-5370
Website: ccmchc.org
Year Incorporated: 1991
FEIN: 23-2775806

ED/CEO Name: Milena Lanz
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Board Chair Name: Elizabeth Pilacik
Board Chair Approval (check here): X
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Organization Information:
Field/s of Interest:
___ Arts, Culture & Humanities  ___ Environment/Animal Welfare  ___ Education
X Health  X Human Services  ___ Religion

Mission: To advocate for and empower prenatal and parenting families to achieve healthy beginnings and a bright future through a caring culture of service.

Geographic Area Served (If not all of Chester County, specify primary Chester County regions served): Chester County

Describe Population Served & Annual Number of People Served: MCHC serves an average of 5,000 low-income families with children (100% below FPL) and at-risk pregnant and parenting women every year, most of whom are Latinx/Hispanic and Black/African American.

Annual Budget $1,822,165  26 # of Full-Time Equivalent Paid Staff
87 % of budget for program expenses  15 # of Board Volunteers
7 % of budget for administrative expenses  30 # of Active Non-Board Volunteers
6 % of budget for fundraising expenses  10,000 # of Volunteer Hours

Top 3-5 funding sources: CKC $500,000; PA DHS OCDEL Family Center Grant $389,960; Pew Charitable Trusts $75,000; United Way GPSNJ $60,000; Longwood Foundation $91,000

Is this grant proposal for: Capacity Building ___ or General Operating X ?

If Capacity Building Proposal, the focus is:
___ Mission, Vision & Strategy  ___ Governance & Leadership  ___ Partnerships & Collaborations
___ Fundraising, Development & Marketing  ___ Technology  Other: __________________________

Grant Amount Requested from the Community Foundation: $ 5,000

Proposal Summary: Maternal and Child Health Consortium (MCHC) services ensure that Chester County families and children have what they need to start healthy, stay healthy, and succeed in school. With support for general operations, this allows us flexibility in driving our mission forward and meeting emergent community health needs under our core programs.
Organization History: Founded in 1991 in response to a growing public health crisis concerning maternal and infant mortality in the Chester County region, Maternal and Child Health Consortium (MCHC) ensures that families and children have access to quality, culturally competent health care regardless of ethnicity, race, language, financial status, or immigration status. In 1995, with initial funding from the Robert Wood Johnson Foundation and multiple private foundations, MCHC began providing prenatal case management for pregnant and parenting women and their children. In 1997, with funding from the federal Healthy Start program, MCHC became one of 100 Healthy Start programs throughout the country. MCHC’s Family Benefits Program designed to provide uninsured families with bilingual, bicultural assistance with accessing state subsidized health insurance programs and in 2010 was augmented to include enrollment in food benefits. In response to a gap in school readiness among low-income families with children entering kindergarten in southern Chester County, MCHC launched the Family Center Program in 2006 to support kindergarten readiness and parents’ ability to support their child’s early cognitive development.

Goals: MCHC’s main goal is to reduce the rate of low birth weight babies and improve health outcomes among at-risk mothers and children using evidence-based preventative health education and connections to affordable, quality medical care. Additionally, MCHC aims to bridge gaps in access to education services among low-income families in southern Chester County by providing kindergarten readiness and parenting support.

Key Achievements: MCHC has a 30-year history of supporting families facing adverse circumstances and the COVID-19 public health crisis is no exception. MCHC’s most significant achievement is its work in reducing the number of low-birth-weight babies in Chester County and our success has even been cited in peer-reviewed scientific journals. We work with upwards of 5,000+ individuals each year across programs and maintain a consistent track record of 95% of Healthy Start babies born greater than 5.5 pounds and at a level of development for reduced risk of long-term health challenges. Each year, 90% of Family Benefits program participants are approved for health insurance and food benefits, allowing families to access health care and keep healthy food on the table. Additionally, 85% of incoming kindergarteners in our Family Center program achieve mastery of age-appropriate school readiness skills and 90% of parents enrolled in the program report increased confidence in their ability to support their child’s learning and navigate community resources. In the last year and a half, MCHC has risen to meet emergent health needs such as food security with the help of food bank partners (delivering 2,000 food boxes and 500 baby bundles), connections to emergency rent/utility assistance, and other social service support. MCHC is an accredited organization by PANO Standards for Excellence, a long-time United Way partner, and has received numerous special recognitions from groups such as the American Academy of Pediatrics, the American Psychiatric Association, among other multilateral organizations.

Distinctiveness: MCHC is a leading preventative health and social service provider in the Chester County region. We have a successful track record in improving perinatal health outcomes in the short and long-term among the most at-risk populations, specifically low-income Latinx and Black women and young children. We are distinctive for our bilingual, bicultural capacity and highly qualified staff who live and work in the communities we serve. They bring expertise in education, public health, business, and social work to guide our programs, are trauma-informed, and trained in home-visiting best practices to support the best outcomes for families.
**Key Initiatives:** The Healthy Start Program aims to reduce low birth weight babies (<5.5lbs.) by providing home visiting perinatal services and health screenings for pregnant and parenting women with children ages 0-18 months. MCHC’s bilingual, bicultural Community Health Workers (CHW) deliver socio-emotional strengthening and support, offer mothers health and early childhood developmental education, and hands-on parental involvement and learning using the evidence-based Parents As Teachers (PAT) model and Baby Basics, the What to Expect Foundation’s signature prenatal and health literacy program. Home visits are for two hours 1-2 times per month over 12-18 months. Comprehensive healthcare risk assessments evaluate participants’ needs and Adverse Childhood Experiences (ACES) screenings ensure participants scoring 4+ receive chronic disease management and resiliency education; those scoring 9+ receive increased contact and 14+ scores are referred to behavioral health counseling. Edinburgh Perinatal Depression Scale (EPDS) screenings administered prenatally and at one and six months postpartum, assess maternal depression and ensure women at highest risk are being served. MCHC’s Diabetes and Heart Disease Prevention (curriculum adapted from the CDC’s Diabetes Prevention Program) Program (DHDPP) modules are provided during home visits to ensure participants better understand their healthcare risks and how to improve their long-term health.

MCHC’s Family Benefits Program reduces health disparities through health coverage and food benefit enrollment assistance. Family Benefits serves families with children ages 0-19 years old by enrolling eligible families into state-subsidized health insurance (MA/CHIP) and food stability programs (SNAP, WIC) so that families may access the basic healthcare and regular nutrition needed to maintain their health. CHWs wrap services around all children by assisting families in enrollment navigation to obtain or renew coverage. During 1-hour annual appointments, CHWs confirm applicant eligibility including household income verification, citizenship, and employment for benefits applications and provide healthcare and nutrition education and awareness. CHWs also maintain open communication with the County Assistance Office on behalf of applicants to ensure applications do not “fall through the cracks,” especially in cases where applicants are in serious poverty and food insecure.

MCHC’s Kennett Square Family Center provides home-visiting services utilizing the Parents as Teachers (PAT) Born to Learn™ curriculum to help families better prepare their children for entry into kindergarten. The program provides school readiness preparation during home visits by our bilingual, bicultural Parent Educators, in addition to health insurance enrollment, parenting classes, and parent-children educational activities. MCHC Educators work closely with families to address all of the barriers that potentially prevent each individual child from being optimally prepared to succeed in school such as self-care skills and age appropriate academic skills. Kindergarten preparedness culminates with an intensive Kindergarten Transition Program (KTP) for the Family Center’s five-year-old children. The two-week program simulates aspects of a school environment to ensure the best possible transition into their kindergarten year and is complemented by parenting classes for parents to learn how to support their child’s learning and navigate school systems. MCHC also provides a Fatherhood Program to ensure fathers are receiving the support they need to develop their parenting and relationship skills with their child.

**Needs to be addressed:** Although Chester County fares well in health and economics based on county-wide data, this does not draw attention to the pockets of poverty at 2-3 times the countywide rate of 6% (US Census Bureau ACS 2019). These communities include Coatesville (26%), West Chester (25%), Oxford (16%), Phoenixville (13%), Kennett Square (6%), Pottstown (19%), and Norristown (20%) and are where MCHC focuses its services (U.S. Census Bureau 2019). Poverty and lack of insurance coverage disproportionately affect Latinx/Hispanic and Black/African American families, as they are likelier to be uninsured or under-insured and for women, perinatal health status specifically shows significant racial and ethnic disparities. The uninsured rate in Pennsylvania is 5.9%; 5.7% among non-Hispanic White individuals compared to 13.7% among Latinx and 7.4% among Black individuals (US Census Bureau 2017 Small Area Health Insurance Estimates). In Chester County, 15.3% of pregnant women on average have inadequate prenatal care, almost as much as the entire state (15.8%) (March of Dimes Peristats 2016-2019). What’s
more, the low birth weight (LBW) rate for Black infants is three times that of White infants at 13.4% versus 5.7%, and 6.6% for Hispanic infants by comparison (PA DOH EDDIE Percent LBW 2015-2019).

In southern Chester County, children in low-income families are entering kindergarten without age-appropriate skills and parents are struggling to prepare their children for school. In Kennett Square Consolidated School District (KCSD), 44.1% of residents speak primarily Spanish compared to 5.4% countywide, making it extremely challenging for families to communicate with school staff (U.S. Census Bureau 2018). Adding to the challenge, 43.7% of families in KCSD are defined as economically disadvantaged and 15.3% are English Language Learners (Future Ready PA Index 2021).

**Why fund now:** Health is built outside of the doctor’s office. Communities that MCHC serves and that have experienced the full impact of the coronavirus pandemic in the last year have demonstrated a need for community-based, nonclinical interventions in health care. Our greatest strength is our culturally diverse and passionate staff who live and work in the communities that we serve. This makes us uniquely positioned to provide services to community members at highest risk. This is where community support will make the most impact, resulting in healthy families and lower health care costs for entire communities.

**Impact:** Our progress is measured against projected program goals which includes the number of individuals served tracked monthly. All MCHC staff has access to laptops and mobile Wi-Fi for program and benefits enrollment efficiency and to capture participant information. Participant health and risk assessment data is collected in our database system, Apricot, by staff during visits and reported to program managers and the director of programs, who oversees data reporting across programs. Participant pre and post tests, program knowledge, and satisfaction surveys are administered to measure change, gather feedback on services provided, learning, engagement, and overall satisfaction. We also share our impact, stories, resources, and more on social media, in monthly newsletters, and in annual reports. The following outcomes are projected for 2021:

- **Healthy Start:** 300 individuals will engage in Healthy Start; 95% of infants will be born >5.5 lbs.; 95% of pregnant women will receive health coverage for prenatal care and/or delivery; 95% of infants will receive insurance within 45 days to ensure prompt entry into pediatric care; 90% of moms will initiate breastfeeding; 85% of pregnant women with an EPDS score of 14+ will demonstrate fewer symptoms of depression (decreased postpartum EPDS score); and 85% of parents will demonstrate an increased sense of confidence and knowledge in their parenting skills.

- **Family Benefits:** 1,800 uninsured individuals will be enrolled into health insurance (MA/CHIP) and 800 into SNAP; 85% of families will be approved for enrollment.

- **Family Center:** 120 families will engage in the Family Center Program; 95% of parents will report an increase in knowledge of their child’s emerging development and improved parenting capacity.

- **Kindergarten Transition Program:** 85% of children participating in the Kindergarten Transition Program will achieve Kindergarten Readiness as indicated by a pre/post-test; 90% of parents will report increased confidence in navigating school systems and supporting their child’s success in school.

- **Diabetes Prevention:** 150 individuals will participate in DHDPP health education. Eight group workshops will be provided to 100 individuals, including participant family members and the community; 85% of participants will demonstrate an increased knowledge in DHDPP.