

Healthy Tomorrows Partnership for Children Program Fact Sheet

PROGRAM PURPOSE

The Healthy Tomorrows Partnership for Children Program (HTPCP) supports innovative, community-based initiatives to improve the health status of infants, children, adolescents, and families in rural and other underserved communities by increasing their access to preventive care and clinical services. HTPCP accomplishes its aim through the implementation and evaluation of innovative community-based programs and models of care.

PROGRAM HISTORY

HTPCP began in 1989 as a grant program funded and administered by the Maternal and Child Health Bureau (MCHB). A partnership was formed with the American Academy of Pediatrics in 1991 to offer technical assistance, resources and tools to grantees and prospective applicants.

HTPCP projects must represent a new initiative within the community or an innovative component that builds on existing community resources. Projects work with children, youth and families (including those from racially and ethnically underrepresented groups) in rural and other underserved populations and address 4 areas:

1. Access to health care,
2. Community-based health care,
3. Preventive health care, and
4. Service coordination.

HTPCP grants have been awarded to a wide variety of organizations, including non-profit agencies, hospitals, universities, and community health centers.



PROGRAM IMPACT

Reach

In FY 2020, HTPCP projects served over 48,000 women, infants, children, youth, and families. For individuals served where race and ethnicity were recorded, 25% were from racially underrepresented groups and 76% were Hispanic or Latino. 79% of projects reported promoting and/or facilitating well-child visits.

Resources

In FY 2020, HTPCP grantees produced a total of 162 products and publications.

Sustainability

90% of HTPCP projects are fully or partially sustained 5 or more years after federal funding ends.

Community Impact

83% of HTPCP grantees report improved children's access to care; 80% report enhanced recognition of child health issues; 77% report enhanced visibility of the organization; 76% report enhanced cultural competence of services; and 69% report enhanced family participation in services.

Evaluation

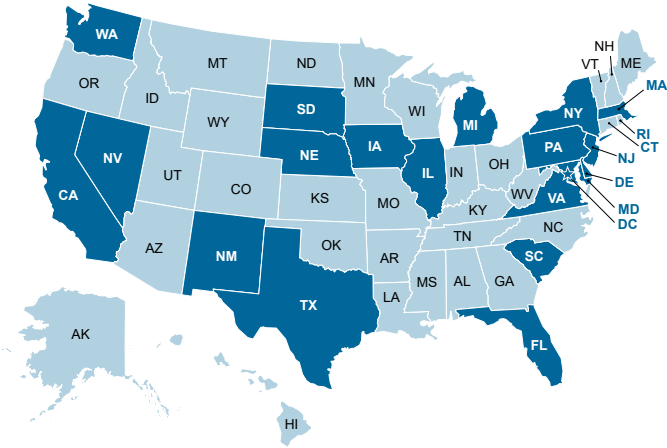
63% of HTPCP grantees report that their projects are well-evaluated. 79% of grantees used information collected from evaluations to improve services; 61% used information to advocate for their service population; 57% used information to obtain/leverage additional funding; and 43% used information to support replication of their project.

PROGRAM CONTACTS

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PROGRAM LOCATIONS



- California: Altamed Health Services Corporation (1/2) | Altamed Health Services Corporation (2/2) | Vista Community Clinic | The Achievable Foundation | University of California, Los Angeles | *Centro De Salud La Comunidad De San Ysidro Inc.*
- Connecticut: YWCA of New Britain
- Delaware: The Nemours Foundation
- District of Columbia: Mary's Center for Maternal and Child Care, Inc. | Georgetown University
- Florida: Orlando Health, Inc. | Center for Trauma Counseling, Inc.
- Illinois: University of Chicago | Egyptian Public and Mental Health Department
- Iowa: Family, Inc.
- Maryland: Primary Care Coalition of Montgomery County, MD, Inc. | San Mar Children's Home | University of Maryland, Baltimore
- Massachusetts: Children's Hospital Corporation | Boston Children's Hospital Primary Care
- Michigan: The Regents of the University of Michigan | M.G.H. Family Health Center
- Nebraska: OneWorld Community Health Centers, Inc.
- Nevada: Nevada Primary Care Association
- New Jersey: Henry J. Austin Health Center, Inc.
- New Mexico: *La Clinica de Familia*

- New York: New York Presbyterian Hospital | New York-Presbyterian Hospital | Montefiore Medical Center | Maimonides Infants and Children's Hospital of Brooklyn | The Trustees of Columbia University in the City of New York | Montefiore Health Systems
- Pennsylvania: Kids Smiles, Inc.
- Rhode Island: Rhode Island Department of Health
- South Carolina: Greenville Health System
- South Dakota: Youth and Family Services, Inc.
- Texas: University of Texas at El Paso
- Virginia: Child Health Investment Partnership | People Incorporated of Virginia
- Washington: Skagit County Public Hospital District

DIVISION OF MCH WORKFORCE DEVELOPMENT (DMCHWD)

DMCHWD, part of the Health Resources and Services Administration's Maternal and Child Health Bureau, provides national leadership and direction in educating and training our nation's current and future leaders in maternal and child health (MCH). The Division also provides leadership through state and community-based capacity building programs.

Special emphasis is placed on the development and implementation of interprofessional, family- and person-centered, community-based and culturally responsive systems of care across the entire life course.

DMCHWD supports programs established in federal legislation ([Title V of the Social Security Act](#), the [Autism CARES Act](#), [American Rescue Plan Act](#), and the [21st Century CURES Act](#)) to complement state and local health agency efforts. DMCHWD partners with state MCH programs, academic institutions, professional organizations, and other health training programs of the federal government to ensure that MCH workforce development programs are grounded in emerging and evidence-based practices.

In FY 2019, DMCHWD awarded 186 grants, an investment of approximately \$57 million.