



## **Section 1: MIECHV Awardee Information**

### **HV CoIIN Change Champion Series Postpartum Well-being Application**

*Thank you for being a change champion! We are excited you are applying for this transformative HV CoIIN opportunity to improve postpartum well-being! We are looking forward to working with passionate teams to authentically engage their community and utilize proven improvement strategies to drive systems change.*

Please note: this is a competitive opportunity, and a limited number of teams will be selected. The application is the first step of consideration. Teams will also participate in a brief interview. You can sign up for this interview [here](#).

Please complete all portions of this application.  
Applications are due by January 17, 2025. If you have any questions, contact the HV CoIIN team at [hvcoiin@edc.org](mailto:hvcoiin@edc.org).

## **Section 1: MIECHV Awardee Information**

Please select your State or Territory

Agency name

Agency address

Contact information for the person completing the application

Email address

Phone number

MIECHV Role

Contact information for CQI Lead (if different than previous)

Email address

Phone number

## **SECTION 2: Excitement and Will**

### **HV CoIN Change Champion Series**

# **Postpartum Well-being Application**

## **Section 2: Excitement and Will**

Tell us why you decided to apply for the Postpartum Well-Being CoIIN and what you hope to learn and achieve as part of this effort.

## **Section 3: Organizational Support, Leadership & Partnership**

**HV CoIIN Change Champion Series  
Postpartum Well-being Application**

## **Section 3: Organizational Support, Leadership & Partnership**

For participation in this CoIIN, we expect the following roles to be in place to support successful participation:

- A Senior Leader who is responsible and accountable for the performance and results of the local improvement teams (e.g., MIECHV state lead). Typically, this person is not a member of the day-to-day team but is responsible for securing the resources for the teams to accomplish their aim and for communicating the teams' progress to other leaders in the state or territory.
- A day-to-day leader who directs and executes the HV CoIIN efforts. This person should meet regularly with the executive sponsor to share progress and address emerging issues. The day-to-day leader would participate in the initial preparatory period and serve as lead for operations and execution of CoIIN. This is often the CQI lead.

- Additional awardee team members could include data lead, partner parent leaders, project coordinator, and/or staff of other MCH initiatives such as (but not limited to) state Title V representative, MCH director, MCH epidemiologist or data specialist, Maternal Health Initiative lead, Healthy Start representative, etc.

Please share the name and title of your senior leader.

Name

Title

Please share the name and title of the day-to-day leader.

Name

Title

Please list any additional awardee team members including their name, role, and organization or initiative as applicable.

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Postpartum Well-being Application**

**Section 3: Organizational Support, Leadership &  
Partnership**

What existing partnerships does your MIECHV team have with organizations or initiatives focused on maternal health?

Describe your existing structure for providing CQI support to LIAs (meetings, data/PDSA submissions, etc.)?

## **Section 4: Equity**

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## Section 4: Equity

Which populations experience disparities in postpartum well-being outcomes in your state? What are the disparities?

Which priority population will you focus your Postpartum Well-being CoIIN work on?

How and why did you identify this priority population?

What successes have you had working with the priority population that your team can build on?

What challenges have you encountered while working to meet the needs of families in the priority population?

**Section 5: Participating LIA Information**

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## **Section 5: Participating LIA Information**

For this opportunity, you may partner with up to 2 LIAs. A majority of the participating LIAs clients must belong to the priority population you identified. If selecting two LIAs, they should be serving the same geographic area and have a willingness to work in partnership to support the community. Each LIA will need to complete the information below using [\*\*this LIA survey link\*\*](#). Please work with the LIA(s) you plan to engage for this opportunity to complete the information before the application deadline.

What LIAs will you partner with?



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