Multnomah County

Program #40058 - Healthy Birth Initiative

Department:

Program Offer Type:

Existing 40055, 40056, 40058, 40097

Health Department

Program Contact: Elizabeth Carroll Program Offer Stage: Proposed

FY 2024 Proposed

Related Programs:

Program Characteristics:

Executive Summary

The Healthy Birth Initiative (HBI) program improves birth outcomes and the health of new families, mothers, and fathers in the African American community, helping children get a healthy start in life. For 25 years, HBI has improved birth outcomes in the African American community using a culturally specific model that addresses the underlying causes of health inequities. HBI participants have demonstrated lower rates of infant mortality and low birth weight and higher rates of early prenatal care compared to African Americans not enrolled in the program. HBI also focuses on the importance of father involvement in achieving better outcomes

Program Description

The Black/African American community experiences the most severe inequities across the spectrum of perinatal health, including a rate of low birth weight at twice that of white non-Hispanics. HBI's core goal is to eliminate these disparities. Long-term benefits of the program include healthy children who are ready to learn; a healthier workforce; increased parent advocacy skills; decreased costs across health and social service systems; and gains in equity for the county's Black/African American community. HBI uses a family-centered approach in supporting a child's development. HBI approaches are case management, health education, community engagement, service coordination, and collective impact. HBI nurses utilize the Nurse Family Partnership (NFP) program as a key component of home visiting services, as well as other evidence-based models. HBI promotes care coordination between internal Health Department programs, external health and social service providers, nursing schools, and larger health systems. HBI nurses also participate on committees to help NFP gain a better understanding of leading with race and implementing racial equity change throughout their system. HBI uses data along with targeted engagement with community and providers. Community Action Network (CAN) members include: parents, healthcare, social service, and culturally specific agencies working together to implement community-driven strategies, provide feedback, and support client leadership roles to influence program design and implementation.

Performance Measures								
Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer			
Output	Number of families served	276	350	350	350			
Outcome	Percent of mothers initiating breastfeeding after delivery	97%	95%	100%	100%			
Quality	Percent of participants who remain in program until child is two years old	N/A	80%	70%	70%			
Quality	Percent of participants who express satisfaction with cultural specificity of program	94%	95%	100%	100%			
Performa	cultural specificity of program							

*448 individuals served in 276 families

Legal / Contractual Obligation

Federal Uniform Grant Guidelines, LPHA State/Federal Program Requirements, FQHC Rulebook OAR 410-147-0595, TCM OAR 410-138-0000 through 410-138-0420, Title V/Maternal Child Health. Targeted Case Management requires matching local funds.

Revenue/Expense Detail					
	Adopted General Fund	Adopted Other Funds	Proposed General Fund	Proposed Other Funds	
Program Expenses	2023	2023	2024	2024	
Personnel	\$1,125,912	\$1,188,333	\$993,999	\$1,758,680	
Contractual Services	\$133,940	\$196,221	\$223,016	\$484,250	
Materials & Supplies	\$73,184	\$0	\$63,743	\$36,922	
Internal Services	\$288,554	\$159,712	\$305,416	\$245,689	
Total GF/non-GF	\$1,621,590	\$1,544,266	\$1,586,174	\$2,525,541	
Program Total:	\$3,165,856		\$4,111,715		
Program FTE	8.00	7.80	6.36	11.39	
Program Revenues					
Intergovernmental	\$0	\$980,000	\$0	\$1,506,072	
Other / Miscellaneous	\$0	\$25,092	\$0	\$25,092	

Explanation of Revenues

Service Charges

Total Revenue

This program generates \$245,689 in indirect revenues.

Healthy Birth Initiative is funded by: Medicaid Targeted Case Management (TCM) Medicaid Maternity Case Management and a Health Resources and Services Administration grant.

\$539,174

\$1,544,266

\$0

\$0

\$994,377

\$2,525,541

\$0

\$0

Federal: \$ 1,506,072 - Health Resources Services Administration grant

- \$ 994,377 Targeted Case Management
- \$ 25,092 HBI recoveries

Significant Program Changes

Last Year this program was: FY 2023: 40058 Healthy Birth Initiative

HBI has resumed all operations and activities with in-person home visiting, telehealth visits, classes and community engagement events. All HRSA grant commitments are being delivered. In FY24 HBI expects to transition from paper charting to Epic Electronic Health Records. This transition will streamline data collection and efficiency. With funding from HealthShare for staffing, HBI will support neighboring counties to explore new regional supports for African American and African parents, possibly to expand HBI services to families. HBI will add a Manager (with CareOregon funds) to supervise and support high level systems outreach, coordination, operations, and other opportunities. A Health Educator is also funded. In late FY23 HBI will reapply to HRSA for grant funding/supplemental funding as available. The success of this reapplication will shape the program design and fiscal needs going into FY25.