

**Program #40058A - Healthy Birth Initiative** 2/24/2014

**Department:** Health Department **Program Contact:** Rachael Banks  
**Program Offer Type:** Existing Operating Program **Program Offer Stage:** As Requested  
**Related Programs:** 40054, 40055, 40056  
**Program Characteristics:** In Target

**Executive Summary**

The Healthy Birth Initiatives Program (HBI) improves birth outcomes and the health of approximately 125 families, mothers and fathers in the African American community, helping children get a healthy start in life. For 15 years, the Healthy Birth Initiatives Program (HBI) has improved birth outcomes in the African American community using a culturally-specific model that addresses the underlying causes of this problem. 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.

**Program Summary**

Research shows the conditions of early life have a profound impact on long-term health and stability. The African American community experiences the most severe disparities across the spectrum of perinatal health, including a rate of low birth weight at twice that of White non-Hispanics. African American babies in Multnomah County are born too soon, too small, and die too early. These are some of the worst health disparities in the county, and therefore MCHD recognizes the work of HBI as part of our core public health mission.

HBI uses a family-centered approach that engages mothers, fathers, and other caretakers in supporting a child's development. Components of HBI include case management, health education, community engagement, service coordination, and collective impact. HBI uses a tiered case management model to best meet individual families' needs. Case management begins in early pregnancy and continues through the child's second birthday, and includes family planning support and screening/referral for issues such as depression, intimate partner violence, and child development. Home visiting is a key feature of HBI's case management component. Home visiting programs have demonstrated positive changes in parenting practices, gains in child growth and development, increased readiness for school, and other outcomes. Health education includes one-on-one interactions, groups, and community-and agency-level education on such topics as breastfeeding and safe sleep, which are shown to improve health. HBI engages the broader African American community through the Community Consortium, a consumer-run group that includes leadership development, community mobilization, and strategic planning for systems-level solutions. Also, HBI provides transportation and childcare to enrolled families to increase access to healthcare and reduce barriers to participating in HBI programming.

**Performance Measures**

Measure Type	Primary Measure	FY13 Actual	FY14 Purchased	FY14 Estimate	FY15 Offer
Output	Number of families served	136	120	150	125
Outcome	% of mothers initiating breastfeeding after delivery*	86%	NA	95%	95%
Quality	% of participants who remain in program until child is two years-old**	NA	NA	79%	80%
Quality	% of participants who express satisfaction with cultural specificity of program**	NA	NA	84%	87%

**Performance Measures Descriptions**

\*This new measure lacks a figure for current year purchased.  
 \*\*This new measure lacks figures for current year purchased and previous year actual.

## Legal / Contractual Obligation

OMB Circular A-87, LPHA State/Federal Program Requirements, FQHC Rulebook OAR 410-147-0595, MCM OAR 410-130-0595, TCM OAR 410-138-0000 through 410-138-0420, Title V/Maternal Child Health. Targeted Case Management requires matching local funds.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2014	2014	2015	2015
Personnel	\$511,289	\$2,317	\$979,903	\$102,347
Contractual Services	\$130,061	\$15,000	\$112,530	\$59,106
Materials & Supplies	\$13,362	\$3,000	\$19,151	\$30,962
Internal Services	\$123,105	\$212	\$50,338	\$170,273
<b>Total GF/non-GF</b>	<b>\$777,817</b>	<b>\$20,529</b>	<b>\$1,161,923</b>	<b>\$362,688</b>
<b>Program Total:</b>	<b>\$798,346</b>		<b>\$1,524,611</b>	
<b>Program FTE</b>	5.77	0.03	10.23	1.00

Program Revenues				
Indirect for Dept. Admin	\$162	\$0	\$24,703	\$0
Intergovernmental	\$0	\$5,529	\$0	\$0
Other / Miscellaneous	\$0	\$15,000	\$0	\$0
Service Charges	\$0	\$0	\$0	\$362,688
<b>Total Revenue</b>	<b>\$162</b>	<b>\$20,529</b>	<b>\$24,703</b>	<b>\$362,688</b>

## Explanation of Revenues

Healthy Birth Initiative is funded by:  
County General Fund: \$1,161,923  
Medicaid Targeted Case Management: \$284,568  
Medicaid Maternity Case Management: \$78,120

## Significant Program Changes

**Last Year this program was:** 40013B Early Childhood Home and Community Based Se

Maternal, child, and family health programs previously combined in program offers 40013A & 40013B have been separated in order to provide more clarity regarding individual program goals, deliverables, performance measures, and budget specifics.

Healthy Birth Initiatives (HBI) is at risk of not receiving another year of funding through the Health Resources and Services Administration (HRSA) due to changes in grant guidance that advantage large urban populations. Funding this program offer allows MCHD to continue to provide services to families currently enrolled in HBI.