

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

Executive Summary

This program offer is contingent on receiving the Healthy Birth Initiatives (HBI) Health Resources and Services Administration (HRSA) grant for FY2015, and builds on program offer 40058A-15 to expand HBI program components and increase the number of families served each year of the five-year grant. HBI uses a culturally-specific model that improves birth outcomes in the African American community, helping children get a healthy start in life. HBI has led to lower rates of infant mortality and low birth weight and higher rates of early prenatal care among African Americans in the program.

Program Summary

Combined with program offer 40058A-15, the Healthy Birth Initiative Program (HBI) will be able to increase its presence in the community and meet HRSA grant requirements by building on the successful HBI service delivery model. African Americans exhibit the most severe disparities across the spectrum of perinatal health in Multnomah County. For 15 years, HBI has improved birth outcomes in the African American community using a culturally-specific model that addresses the underlying causes of this problem.

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. In this program offer, HBI will increase the number of families served and expand the components of service coordination and collective impact. HBI will promote service coordination by working with Coordinated Care Organizations (CCOs) and health systems to ensure program participants have a culturally responsive medical home and are receiving recommended services. HBI will increase care coordination between internal Health Department programs, external health and social service providers, and larger systems in order to avoid duplicating maternal, child, and family health activities in the community. HBI will also enroll uninsured members of the African American community in health coverage through internal and external partnerships. HBI will expand its Community Consortium, founded in 1998 for consumer involvement and community engagement, to form a Community Action Network (CAN). The CAN will work to achieve collective impact on topics such as breastfeeding, family planning, and male/father involvement, and will include participation from CCOs, Early Learning Multnomah, and state, regional, local, and community-based partners.

HBI aligns with all three goals of the first strategic priority of the Health Department's Strategic Plan, to improve health outcomes and health equity. Long-term benefits to the county of investing in this program include healthy children ready to learn; a healthier work force; decreased costs related to school failure, juvenile crime, and chronic disease; strengthened partnerships; and gains in equity for the county's African American community.

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

*Combined with program offer 40058A-15, HBI will serve approximately 250 families in FY2015.

**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	\$0	\$749,298	\$0	\$510,928
Contractual Services	\$0	\$104,854	\$0	\$94,106
Materials & Supplies	\$0	\$59,146	\$0	\$77,901
Internal Services	\$0	\$130,045	\$0	\$67,065
Total GF/non-GF	\$0	\$1,043,343	\$0	\$750,000
Program Total:	\$1,043,343		\$750,000	
Program FTE	0.00	6.80	0.00	5.90

Program Revenues				
Indirect for Dept. Admin	\$66,905	\$0	\$51,084	\$0
Intergovernmental	\$0	\$850,000	\$0	\$750,000
Service Charges	\$0	\$193,343	\$0	\$0
Total Revenue	\$66,905	\$1,043,343	\$51,084	\$750,000

Explanation of Revenues

Federal Healthy Birth Initiative grant: \$750,000.

Significant Program Changes

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

This program offer is contingent on receiving the Healthy Birth Initiatives (HBI) Health Resources and Services Administration (HRSA) grant for FY2015. Combined with program offer 40058A-15, MCHD will be able to meet grant requirements by increasing the number of families served by approximately 250 per year, serving over 1,000 families over the course of the 5-year grant. HBI will also achieve sustainable, systems-level change in maternal and child health issues affecting African American families through service coordination and collective impact.