

Program #40058 - Healthy Birth Initiative

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Health Department **Department: Program Offer Type: Existing Operating Program** Program Offer Stage: As Requested

Related Programs: 40054, 40055, 40056, 40097

Program Characteristics: In Target

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 over 20 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 Summary

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 ready to learn; a healthier work force; 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 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 nurses utilize the Nurse Family Partnership (NFP) program as a key component of home visiting services, as well as numerous 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 program data, as well as local, state, and national data to guide programmatic focus. HBI reaches the Black/African American community through targeted marketing and outreach both to community members and providers who serve the community, as well as by engaging clients in a Community Action Network (CAN). The CAN is led by parents and comprised of a number of healthcare, social service, and culturally specific agencies working together to implement community-identified strategies. The CAN offers a venue for client engagement and feedback, including the opportunity for clients to hold leadership roles to influence program design and implementation. HBI staff also present to a variety of health systems to educate providers on ways to provide better care to HBI clients.

Performance Measures									
Measure Type	Primary Measure	FY20 Actual	FY21 Budgeted	FY21 Estimate	FY22 Offer				
Output	Number of families served	191	450	300	350				
Outcome	Percent of mothers initiating breastfeeding after delivery	97%	65%	95%	95%				
Quality	Percent of participants who remain in program until child is two years old	76F%	80%	80%	80%				
Quality	Percent of participants who express satisfaction with cultural specificity of program	100%	95%	100%	95%				

Performance Measures Descriptions

Legal / Contractual Obligation

Federal Uniform Grant Guidelines, 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

	Adopted General Fund	Adopted Other Funds	Requested General Fund	Requested Other Funds
Program Expenses	2021	2021	2022	2022
Personnel	\$981,786	\$1,121,337	\$958,622	\$1,238,363
Contractual Services	\$7,013	\$376,708	\$235,684	\$103,072
Materials & Supplies	\$59,489	\$43,762	\$39,251	\$42,585
Internal Services	\$306,321	\$131,196	\$163,373	\$286,440
Total GF/non-GF	\$1,354,609	\$1,673,003	\$1,396,930	\$1,670,460
Program Total:	\$3,027,612		\$3,067,390	
Program FTE	7.50	8.30	7.05	8.75

Program Revenues								
Intergovernmental	\$0	\$980,000	\$0	\$980,000				
Other / Miscellaneous	\$0	\$7,987	\$0	\$16,493				
Service Charges	\$0	\$685,016	\$0	\$673,967				
Total Revenue	\$0	\$1,673,003	\$0	\$1,670,460				

Explanation of Revenues

This program generates \$164,949 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.

- \$ 980,000 Health Resources Services Administration grant
- \$ 673,967 Targeted Case Management
- \$ 16,493 HBI recoveries

Significant Program Changes

Last Year this program was: FY 2021: 40058 Healthy Birth Initiative

COVID-19-Related Impacts - In FY21, MCFH programs had a reduction in referrals and services; staff were deployed into COVID-19 response activities; and in-home services were transitioned to telehealth services, all of which impacted visit numbers. FY22 projects a return to some in-person services and an associated increase in number of families served. Staff will continue to support COVID-19 response for HBI clients.