



MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST NOTICE OF INTENT

(Revised: 9-24-15)

APPROVED: MULTNOMAH COUNTY
BOARD OF COMMISSIONERS
AGENDA # R.2 DATE 11/15/18
MARINA BAKER, BOARD CLERK

Board Clerk Use Only

Meeting Date: 11/15/18
Agenda Item #: R.2
Est. Start Time: 9:45 a.m.
Date Submitted: 10/31/18

Agenda NOTICE OF INTENT to apply for up to \$980,000 per year from HRSA's Title: **Healthy Start Initiative: Eliminating Disparities in Perinatal Health**

Note: This APR is for NOI's only. APRs are available for other types of submittals. Title should not be more than 2 lines but be sufficient to describe the action requested.

Requested Meeting Date: November 15, 2018 **Time Needed:** 5 min
Department: Health **Division:** Public Health
Contact(s): Rachael Banks, LaRisha Baker, Marc Harris
503-988-7778; 87778;
503-988-7509 87509
Phone: 503-988-8693 **Ext.** 88693 **I/O Address:** 160/8; 160/9
Presenter Name(s) & Title(s): Rachael Banks, Public Health Director, LaRisha Baker Maternal Child Family Health Director, Marc Harris, Development Administrator

A Notice of Intent is required to obtain approval from the Board of County Commissioners to ensure a competitive grant proposal is in alignment with the County's mission; to receive an indication from the Board of its willingness to commit the necessary County resources to support the grant. A Budget Modification is required to appropriate funds received from a successful grant proposal.

Notice of Intent Specific Information

Department recommendation for consent agenda placement (*must meet all criteria*):

- Proposal is under \$500,000/ year.
- Proposal does not require cash match as part of the budget.
- Proposal does not commit County to on-going programming following award.
- Proposal adheres to the County's indirect guidelines.
- Proposal is within the Department's strategic direction.
- Proposal does not have policy and/or legal implications that warrant a public dialog.

☐ To the best of my knowledge, this proposal adheres to all of the above criteria and may be placed on the Board of County Commissioner's Consent Agenda. I understand the proposal can be moved to the regular Board Agenda for any reason by Commissioners or their staff.

☒ To the best of my knowledge, this proposal does not meet criteria for placement on the Consent Agenda and should be placed on the Regular Agenda.

Please complete for any NOI:

Granting Agency	Health Resources & Services Administration, Maternal and Child Health Bureau
Proposal due date	November 27, 2018
Grant period	April 1, 2019 – March 30, 2024
Approximate level of funding by year	Up to \$950,000 for Year 1, and \$980,000 per year for Years 2-5
Program Offer(s) potentially impacted	40058
How do you expect to spend the majority of funds? (check all that apply)	<input checked="" type="checkbox"/> Personnel <input type="checkbox"/> Sub-contracts <input type="checkbox"/> Capital (including equipment)
Does grant require match? If so, describe type (cash, FTE, etc) and %	No

1. Brief overview of grant's purpose and/or impact.

The purpose of the Healthy Start Initiative: Eliminating Disparities in Perinatal Health program is to improve health outcomes before, during, and after pregnancy, and reduce racial/ethnic differences in rates of infant death and adverse perinatal outcomes. Healthy Start funds communities with infant mortality rates at least 1.5 times the U.S. national average and high rates of other adverse perinatal outcomes (e.g., low birthweight, preterm birth, maternal morbidity and mortality) with the goal to eliminate the disparities in health status between the general population and populations of color. The program aims to address its purpose by improving access to quality health care and services for women, infants, children, and families through outreach, care coordination, health education, and linkage to health insurance; strengthening the health workforce, specifically those responsible for providing direct services; building healthy communities and ensuring ongoing, coordinated, comprehensive services are provided in the most efficient manner through effective service delivery; and promoting and improving health equity by connecting with appropriate organizations.

Multnomah County Health Department (MCHD) has been a Healthy Start grantee since 1997, using the funds to operate the Healthy Birth Initiatives (HBI), which provides community-based services to Black/African American women at risk for adverse pregnancy outcomes. This new grant cycle will continue to support these services. While Black/African American perinatal health outcomes have improved in Multnomah County over this time, the infant mortality rate is still 9.7 deaths per 1,000 live births, which is higher than the Healthy Start eligibility threshold of 8.8/1,000, or 1.5 times the national average of 5.9/1,000. For local comparison, the Black/African American infant mortality rate is the highest in the county and the only racial population exceeding the Healthy Start program's eligibility threshold. The overall Multnomah County infant mortality rate at 5.0/1,000, and the rate for non-Latinx whites is even lower at 4.2 deaths per 1,000 live births. Black/African American babies also experience the highest rate of low birthweight in the county, at 9.8% (6.3% countywide and 5.6% of white non-Latinx babies), and a high rate of preterm birth, at 10.3% (7.5% countywide and 7.0% of white non-Latinx babies).

MCHD's proposal will be for continued HBI programming using the multi-component community-based model it has been employing, which includes tiered case management focused on

providing comprehensive services to Black/African American women and their children and families. Services will be focused on improving women's health; promoting quality services; strengthening family resilience; achieving collective impact through the Community Action Network (CAN); and implementing quality improvement, performance monitoring, and evaluation. Case management services will engage women prenatally and continue until the infant is 18 months-old. This model will balance direct service focused on life-course health and trauma-informed care with collective impact in the community focused on coordination of services and building cross-sector partnerships that address the social determinants of health. Grant funds primarily support staffing costs and costs associated with supporting clients.

2. Brief overview of how proposal is aligned with Department's strategic direction.

The Healthy Start proposal works toward MCHD's broad goal to *Prioritize investments in programs and infrastructure that improve health outcomes and health equity* by addressing stark racial disparities impacting the county's Black/African American population.

3. Describe any community and/or government input considered in planning for this grant.

The existing Community Action Network, which includes client, community, and systems stakeholders, has been engaged in planning for application development to ensure community needs are being appropriately met.

4. What partners may be included in program activities?

Health systems may be engaged to refer clients to HBI services. HBI will also refer clients to community-based service providers, as needed. Client, community, and systems stakeholders will be included in the Community Action Network.

5. Generally, what are the grant's reporting requirements?

Award recipients must submit annual progress reports and a final report narrative within 90 days of the project's conclusion.

Please complete for NOIs on the Regular Board Agenda ONLY:

6. When the grant expires, will your Department continue to fund the program? If so, how?

MCHD has a long history of receiving Healthy Start funding (beginning in 1997). Part of activities will include contingency and sustainability planning to ensure continuation of services once the grant expires.

7. Are 100% of the central and departmental indirect costs recovered? If not, please explain.

Yes, 100% of indirect costs are recovered.

8. If the proposal is not aligned with your Department's strategic direction, explain why you are pursuing it at this time.

Non-applicable, as the proposal is directly aligned with the Health Department's strategic direction.

9. If the grant requires a cash match, how will you meet that requirement?

Non-applicable, as the grant does not require a cash match.

10. Are there policy issues and/or legal implications related to this proposal that may warrant a public dialog? If so, please explain.

None.

Required Signatures

**Elected Official
or Department/
Agency Director:**

Mark Lewis /s/

10-30-2018

Date:

Budget Analyst:

Trista Zugel-Bensel /s/

Date: 10/31/2018

Note: Please submit electronically. We are no longer using actual signatures. Insert names of your approvers followed by /s/. Please insert date approved