



**MULTNOMAH COUNTY
AGENDA PLACEMENT REQUEST
NOTICE OF INTENT**

(revised 08/02/10)

Board Clerk Use Only

Meeting Date:	<u>9-6-12</u>
Agenda Item #:	<u>C.18</u>
Est. Start Time:	<u>9:30 am</u>
Date Submitted:	<u>8-21-12</u>

Agenda Title:	NOTICE OF INTENT to submit an application for \$5,000 to the National Network of Public Health Institute’s Strengthening the Community of Practice for Public Health Improvement QI grant initiative.
----------------------	--

Note: If Ordinance, Resolution, Order or Proclamation, provide exact title. For all other submissions, provide a clearly written title sufficient to describe the action requested.

Requested Meeting Date:	<u>9/6/2012</u>	Amount of Time Needed:	<u>N/A</u>
Department:	<u>Health</u>	Division:	<u>CHS-CES</u>
Contact(s):	<u>Marisa McLaughlin; Laurel Bentley</u>		
Phone:	<u>503-988-3663</u>	Ext.	<u>28080; 26314</u>
Presenter Name(s) & Title(s):	<u>N/A.</u>	I/O Address:	<u>160/8; 160/9</u>

General Information

1. What action are you requesting from the Board?

Authorization for the Director of the Health Department to submit an application for up to \$5,000 from the National Network of Public Health Institutes Strengthening the Community of Practice for Public Health Improvement (COPPHI) Quality Improvement (QI) grant to improve access to adequate prenatal care and earlier prenatal initiation among immigrant and refugee populations in Multnomah County.

2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

Disparities exist in adequate prenatal care in Multnomah County between US born women (70.9% have adequate prenatal care) and foreign born women (60.2% have adequate prenatal care). Foreign born women experience initiation of prenatal care almost 2 weeks later than US born women (12.8 in foreign born women vs. 11.0 in US born women) and experience a lower number of total prenatal visits (10.6 for foreign born women vs 11.6 for US born women). Foreign born women have higher

rates of depression (23%) during pregnancy, in comparison to US born women (16.7%), and Asian foreign born women have higher rates of postpartum depression. This is a considerable disparity as 27.2% of total live births in Multnomah County are to foreign-born mothers. These disparities are amplified within the Medicaid eligible population; outcomes for Oregon Health Plan (OHP) clients are much lower than general population. 38.2% of all live births in Oregon in 2010 – 2011 were among OHP clients; 38.1% of these births were among foreign born mothers. Only 55% of foreign born mothers with OHP receive adequate prenatal care versus 62.3% of US born mothers with OHP.

The goal of the project is to identify and execute quality improvement activities in order to work towards eliminating disparities found in adequate prenatal care between US born women and foreign born women, specifically recent immigrants and refugees. This QI project would seek to address the causes of these disparities through assessing the capacity and barriers to prenatal care for this population and making improvements to existing Maternal and Child Health (MCH) programs and services. This project plans to 1) assess immigrant/refugee client perspective on barriers to prenatal care access and our current MCH prenatal services and 2) examine/process improvement around:

- current workflows for pregnancy screening at the Multnomah County Health Department (MCHD) immigrant and refugee screening site
- use of immigrant and refugee care orientations
- relationships with partner agencies, as well as care coordination and service integration among MCHD Maternal and Child Health programs, including Early Childhood Services, WIC, primary and dental care
- requests for interpretation services and coordination of health education materials in other language

The preliminary aim of this project will be to by July 31, 2013, decrease the number of weeks in which prenatal care is initiated among OHP foreign-born clients from 14.1 weeks to 13.1 weeks.

3. Explain the fiscal impact (current year and ongoing).

If funded, this grant will provide \$5,000 and 15 hours of individually-tailored QI coaching from an experienced public health QI coach to MCHD for use in maternal and child health quality improvement activities. Funding would allow for Maternal and Child Health programs and services to work with QI coaches to assess barriers to prenatal care and current access to prenatal care and examine care improvement options.

4. Explain any legal and/or policy issues involved.

None.

5. Explain any citizen and/or other government participation that has or will take place.

None.

ATTACHMENT A

Grant Application/Notice of Intent

If the request is a Grant Application or Notice of Intent, please answer all of the following in detail:

- **Who is the granting agency?**
The National Network of Public Health Institutes (NNPHI).
- **Specify grant (matching, reporting and other) requirements and goals.**
If funded, project staff must participate in approximately 3-5 webinars/teleconferences and 15 hours of distance-based QI technical assistance, provided by an experienced QI Coach from NNPHI. With the assistance of the QI Coach, the program must implement a QI project aimed at improving a process, output, or outcome. With the assistance of the QI Coach, the program must document the results of the QI project for submission to the Public Health Quality Improvement Exchange – a searchable online database (under development) that will organize information from the rapidly growing number of public health QI projects and make it easily accessible to practitioners and others. The program must begin program activities within 45 days of notice of selection (sites will be notified of selection status no later than October 22, 2012) and must submit a brief progress and final report to NNPHI.
- **Explain grant funding detail – is this a one time only or long term commitment?**
The NNPHI COPPHI QI grant is a one time funding opportunity available to fund a project during an 8-month project period.
- **What are the estimated filing timelines?**
The application is due September 10, 2012.
- **If a grant, what period does the grant cover?**
The grant period covers project from December 1, 2012 to July 31, 2013.
- **When the grant expires, what are funding plans?**
When the grant expires, the project will be completed.
- **Is 100% of the central and departmental indirect recovered? If not, please explain why.**
Yes, 100% of indirect costs will be covered by grant funds.

ATTACHMENT B

Required Signatures

Elected Official or
Department/
Agency Director:

Lillian Shirley

Date: 08-20-2012

Budget Analyst:

Althea Gregory /s/

Date: 08-21-2012