

Lead Agency: Health Department

Program Contact: RUMINSKI Diane T

Program Offer Type: Existing Operating

Related Programs:

Program Characteristics: In Target

Executive Summary

ECS provides home and community based services to pregnant women and families with young children to assure optimal maternal and infant health and to assist parents in meeting their child's basic health and developmental needs. The conditions of early life have a profound impact on our long-term health and stability. We expect to serve approximately 900 families in this program offer. Of these 900 families approximately 72% are ethnic minorities including 13% African American, 1% Native American and 39% Hispanic (all races).

Program Description

Voluntary home visiting programs have demonstrated positive changes in parenting practices, gains in child growth and development, increased readiness for school, reductions in the incidence of child abuse and neglect, low birth weight and prematurity, and improvements in maternal life course. The program targets high risk families including teens and racial and ethnic groups experiencing health disparities. Low income, single, first birth parents benefit the most from these interventions which help establish positive lifelong parenting practices. Long term benefits to the county include healthy children ready to learn, a healthier work force, and decreased costs related to school failure, juvenile crime, and chronic disease.

The Healthy Birth Initiative Program (HBI) is designed to reduce the historical disparities in poor birth outcomes by addressing the social determinants of health in the African American community. Core service components include outreach, case management, health education, interconceptual care and depression screening and referral. A community consortium, education/support groups, and men's groups are unique components of HBI. Transportation and childcare support are wraparound services available to families enrolled in HBI. Services begin in early pregnancy and continue through the child's second birthday.

Public Health Nursing Services: Families who do not meet the criteria or do not choose to enter the Nurse Family Partnership/Healthy Start programs may also be offered home visits. These include pregnant women with medical conditions, and women experiencing domestic violence or alcohol/drug use. Infants born prematurely, of low birth weight, with medical conditions, or having parents unable to provide appropriate care without support are also referred for home visiting support. With health care transformation and the development of Coordinated Care Organizations, public health nurses will work closely with MCHD primary care clinical teams to provide continuity of care in the home/community setting for our highest risk and vulnerable populations. They provide significant support to families, tailored to their needs as observed in their home environment. Services include health screening/assessment, case management, health promotion, breast feeding/parenting support, childbirth classes, and community referrals. Nursing consultation is also provided to pregnant and parenting families enrolled in the Mt Hood Head Start program and to pregnant/parenting parolees through the ADAPT (Alcohol and Drug Addicted Prenatal Treatment) program.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	% infants 0-12 months with developmental screening	76.0%	80.0%	80.0%	80.0%
Outcome	% HBI clients receiving depression screening	67.0%	95.0%	70.0%	95.0%
Quality	% of clients completing survey who are very satisfied/satisfied with services*	0.0%	80.0%	98.0%	98.0%
Outcome		0.0%	0.0%	0.0%	0.0%

Performance Measure - Description

* Performance measure designed to obtain client input on services offered by measuring client satisfaction.

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.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2012	2012	2013	2013
Personnel	\$1,930,619	\$2,744,014	\$1,651,865	\$1,805,885
Contracts	\$1,161,360	\$1,028,215	\$535,292	\$365,094
Materials & Supplies	\$74,811	\$121,181	\$17,807	\$163,488
Internal Services	\$220,263	\$497,222	\$307,057	\$452,981
Total GF/non-GF:	\$3,387,053	\$4,390,632	\$2,512,021	\$2,787,448
Program Total:	\$7,777,685		\$5,299,469	
Program FTE	16.80	25.60	16.47	15.23
Program Revenues				
Indirect for dep't Admin	\$164,606	\$0	\$172,887	\$0
Fees, Permits & Charges	\$0	\$586,123	\$0	\$73,579
Intergovernmental	\$0	\$3,804,509	\$0	\$2,713,869
Total Revenue:	\$164,606	\$4,390,632	\$172,887	\$2,787,448

Explanation of Revenues

Early Childhood Home/Community based services is funded by county general fund, Medicaid fees for: 1) Maternity Case Management (MCM) home visits conducted from pregnancy through two months postpartum, and 2) Targeted Case Management (TCM) for infants and children up to age 5. CaCoon is a Care Coordination grant serving children with special health care needs and is shared with Program Offer 40013A. The Healthy Birth Initiative is funded by \$850,000 HRSA grant. Medicaid revenue has significantly decreased for both Targeted Case Management and Maternity Case Management services due to State DMAP and State Maternal Child Health Program Rule Changes. Rule changes affect provider types, initial assessment visits, maternity case management place of service restrictions. Medicaid rule changes result in the same number of patient visits; however this results in fewer reimbursable patient visits.

Healthy Birth Initiative Summary--Federal Healthy Birth Initiative grant : \$850,000; Medicaid Maternity Case Management: \$73,579; Medicaid Targeted Case Management: \$56,358; and county general fund: \$453,129. General Field Summary--Medicaid Maternity Case Management: \$259,029; Medicaid Targeted Case Management: \$1,040,805; Federal CaCoon grant: \$54,271; State Babies First grant: \$81,556; Mt Hood Community College Head Start contract: \$71,850; Fed/State Maternal Infant & Early Childhood Home Visiting grant: \$300,000; and county general fund: \$2,058,892.

Significant Program Changes

✔ Significantly Changed

Last year this program was: #40013B, Early Childhood Services-Pregnant/Parenting Families-Mid/East/Healthy Start
This Early Childhood Home and Community based services program offer has been restructured to respond to changes and opportunities coming with health care transformation and the formation of Coordinated Care Organizations. An increased focus on health disparities in the African American community is driving new models of community work and service delivery. Changes in the way we expect to deliver services and how we are able to bill for services have resulted in some staff reductions. Several of these reductions came from unfilled vacant positions.