



COUNTY OF SAN DIEGO

AGENDA ITEM

BOARD OF SUPERVISORS

GREG COX
First District

DIANNE JACOB
Second District

DAVE ROBERTS
Third District

RON ROBERTS
Fourth District

BILL HORN
Fifth District

DATE: September 10, 2013

XX

TO: Board of Supervisors

SUBJECT: ACCEPTANCE OF TITLE V MATERNAL AND CHILD HEALTH BLOCK GRANT ALLOCATION AND CALIFORNIA HOME VISITING PROGRAM GRANT FUNDS (DISTRICTS: ALL)

Overview

For the past 15 years, the Board has approved an agreement with the California Department of Public Health (CDPH), Maternal, Child and Adolescent Health (MCAH) Division, to accept a Title V Maternal and Child Health (MCH) Block Grant Allocation to support State-mandated Maternal, Child and Family Health Services programs designed to improve the health of pregnant women and their babies. CDPH receives Title V MCH Block Grant funding through the Federal Social Security Act, and distributes the allocation to counties in three year funding cycles. On December 8, 2009 (11), the Board authorized a three year agreement with CDPH for the Title V MCH Allocation which began July 1, 2010 and ended June 30, 2013, for a total of \$1,591,773 (\$530,591 annually).

On February 28, 2012 (4), the Board approved an agreement with CDPH MCAH to accept California Home Visiting Program (CHVP) grant funds for effective coordination and delivery of critical health, development, early learning, child abuse and neglect prevention, and family support services to at-risk children and families through home visiting programs. CDPH receives CHVP funds through the Federal Affordable Care Act Maternal, Infant, and Early Childhood Home Visiting Program. The initial agreement began on February 15, 2012 and ended on June 30, 2013, for a total amount of \$1,257,669 (\$415,647 for February 15, 2012 through June 30, 2012, and \$842,022 for July 1, 2012 through June 30, 2013).

Today's action requests the Board to approve and ratify, and to authorize the Clerk of the Board, upon receipt, to execute, a new three-year Title V MCH Block Grant Allocation agreement with CDPH from July 1, 2013 through June 30, 2016, for a three year total of approximately \$1,622,634 (approximately \$540,878 annually). Board action is also requested to approve and ratify, and to authorize the Clerk of the Board, upon receipt, to execute, a new agreement with CDPH for CHVP grant funds from July 1, 2013 through September 30, 2015, for a total of \$1,894,550 (\$842,022 annually for July 1, 2013 through June 30, 2015; and \$210,506 for July 1, 2015 through September 30, 2015). Authorization is further requested to apply for any

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additional funding that might be used to address preventive health care, early intervention and treatment programs for at-risk women, children and families in San Diego County.

Today's action supports the County's *Live Well San Diego* initiative by supporting preventive health care, early intervention and treatment programs for at-risk women, children and families.

Recommendation(s)

CHIEF ADMINISTRATIVE OFFICER

1. Ratify and authorize the Clerk of the Board, upon receipt, to execute a three-year agreement with the California Department of Public Health, Maternal, Child and Adolescent Health Division, for a Title V Maternal and Child Health Block Grant Allocation to provide Maternal, Child and Family Health services for the period of July 1, 2013 through June 30, 2016, at an annual amount of approximately \$540,878, or a three year total of approximately \$1,622,634, and to execute subsequent amendments, extensions, and renewals that do not materially impact or alter the program or funding level.
2. Ratify and authorize the Clerk of the Board, upon receipt, to execute an agreement with the California Department of Public Health, Maternal, Child and Adolescent Health Division, for California Home Visiting Program grant funds to provide home visiting services for the period of July 1, 2013 through September 30, 2015, at an annual amount of \$842,022 for July 1, 2013 through June 30, 2015, and \$210,506 for July 1, 2015 through September 30, 2015, or a 2.2 year total of \$1,894,550, and to execute subsequent amendments, extensions, and renewals that do not materially impact or alter the program or funding level.
3. Authorize the Health and Human Services Agency to apply for any additional funding opportunity announcements, if available, to address the preventive health care, early intervention and treatment programs for at-risk women, children and families in San Diego County.

Fiscal Impact

Title V Maternal and Child Health Block Grant Allocation

Funds for this request are included in the FY 2013-14 Operational Plan for the Health and Human Services Agency. If approved, this request will result in annual costs and revenue of approximately \$540,878 for FY2013-14 and approximately \$540,878 annually in FY2014-15 and FY2015-16, for a total approximate amount of \$1,622,634. The funding source is the California Department of Public Health. There will be no change in net General Fund cost and no additional staff years.

California Home Visiting Program

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Funds for the California Home Visiting Program are included in the FY 2013-14 Operational Plan for the Health and Human Services Agency. If approved, this program will result in costs and revenue of \$842,022 annually in FY2013-14 and FY2014-15 and \$210,506 for the period of July 1, 2015 – September 30, 2015 for a total of \$1,894,550. The funding source is Health Resources and Services Administration (HRSA), and administered through the California Department of Public Health. There will be no change to net General Fund costs and no additional staff years.

Business Impact Statement

N/A

Advisory Board Statement

The Health Services Advisory Board reviewed and approved this proposal at its meeting on August 15, 2013.

Background

Recommendation #1: Title V Maternal and Child Health Allocation

The Title V Maternal and Child Health (MCH) Allocation is the primary funding source for Maternal, Child and Adolescent Health (MCAH) programs in the County. Enacted in 1935 as a part of the Social Security Act, the Title V MCH Program is the nation’s oldest Federal-State partnership. The Federal Title V MCH program has provided a foundation for ensuring the health of the nation’s mothers, women, children and youth, including children and youth with special health care needs, and their families.

The goals of the MCH program are as follows:

1. Assure access to quality care, especially for those with low-incomes or limited availability of care;
2. Reduce infant mortality;
3. Provide and ensure access to comprehensive prenatal and postnatal care to women (especially low-income and at risk pregnant women);
4. Increase the number of children receiving health assessments and follow-up diagnostic and treatment services;
5. Provide and ensure access to preventive and child care services as well as rehabilitative services for certain children;
6. Implement family-centered, community-based, systems of coordinated care for children with special healthcare needs; and
7. Provide toll-free hotlines and assistance in applying for services to pregnant women with infants and children who are eligible for Title XIX (Medicaid).

State programs funded by MCH funds are administered by the MCAH unit of Public Health Services’ Maternal, Child and Family Health Services Branch. These programs include the

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Perinatal Care Network (PCN), the Comprehensive Perinatal Services Program (CPSP), the Black Infant Health (BIH) program, the Fetal and Infant Mortality Review (FIMR) program and the Sudden Infant Death Syndrome (SIDS) program.

The Board established the PCN on November 6, 1990 (36) in order to improve the health of pregnant women and their babies. On June 16, 1998 (31), the Board approved the State MCH subvention to support the PCN, the PCN toll-free referral service, the BIH program and other MCH activities. The PCN toll-free referral service links pregnant women to a broad array of maternal and child health services. BIH provides outreach, case management and group sessions to African American pregnant and postpartum women in an effort to improve birth outcomes for African American infants. CPSP provides medical, nutritional, perinatal education and psychosocial support to pregnant women; services are available from the very beginning of pregnancy until 60 days after the baby is born. The FIMR and SIDS programs work to understand health care systems and social problems that contribute to preventable fetal and infant deaths and for identifying and implementing interventions to rectify these problems.

Working together, these MCAH programs facilitate increased access to perinatal care by creating, supporting and coordinating a network of perinatal services within the County. This network coordinates with other County departments and the community to identify and reduce barriers to prenatal care, provide assessment and referral for perinatal care and ancillary services, and provide case management for at-risk pregnant women, mothers and infants in targeted high-risk areas.

It is requested that the Board approve and ratify, and authorize the Clerk of the Board, upon receipt, to execute, a new three-year Title V MCH Block Grant Allocation agreement with California Department of Public Health (CDPH), Maternal, Child and Adolescent Health (MCAH) Division, from July 1, 2013 through June 30, 2016 for a three year total of approximately \$1,622,634 (approximately \$540,878 annually). Approval of this request will ensure the continued successful operation of the aforementioned MCAH programs for the next three fiscal years.

Recommendation #2: California Home Visiting Program

The California Home Visiting Program (CHVP) was created as a result of the Federal Patient Protection and Affordable Care Act (ACA) of 2010 through the ACA Maternal, Infant, and Early Childhood Home Visiting Program. CHVP provides comprehensive, coordinated in-home services to support positive parenting, and to improve outcomes for families residing in identified at-risk communities. The Health Resources and Services Administration defines home visiting as an evidence-based, voluntary program offered to pregnant women or children birth to age 5. Program participant outcomes include: improved maternal and child health; prevention of child injuries, child abuse and maltreatment, and reduction of emergency department visits; improvement in school readiness and achievement; reduction in crime or domestic violence; improvements in family economic self-sufficiency; and improvements in the coordination and referrals for other community resources and supports.

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The County of San Diego was initially awarded CHVP funds by CHDP for the period of February 15, 2012 through June 30, 2013, for a total amount of \$1,257,669 (\$415,647 for February 15, 2012 through June 30, 2012, and \$842,022 for July 1, 2012 through June 30, 2013). These funds were used to expand the Nurse Family Partnership (NFP) evidence-based home visiting program, which had provided services for over a decade in the East Region and six years in the South Region. The County selected the North Inland and North Coastal Regions for the expansion based on State and local hot spot analysis and community needs. Building upon the existing NFP programs, the North Inland-Coastal Expansion (NICE) enhanced NFP efforts by funding four Public Health Nurses to provide expanded services to address the needs of high-risk, first-time mothers and their children. NICE provided an opportunity to reach an additional 100 at-risk families who had limited access to health and social services.

The NFP evidence-based home visiting program helps to improve outcomes for children and families, including improving maternal and child health, reducing child maltreatment, increasing parental employment and improving the rate at which children reach developmental milestones. NFP NICE services have had positive impacts on many of the health and social indicators of these communities. NFP provides the necessary support and assistance to first time mothers and their families so that they can become safe, healthy and self-sufficient. NFP NICE builds upon the strengths of the community by working collaboratively with community partners to deepen and broaden the radius of services.

It is requested that the Board approve and ratify, and authorize the Clerk of the Board, upon receipt, to execute, a new agreement with CDPH, MCAH Division, for CHVP grant funds from July 1, 2013 through September 30, 2015 for a total of \$1,894,550 (\$842,022 annually for July 1, 2013 through June 30, 2015; and \$210,506 for July 1, 2015 through September 30, 2015). Approval of this request will ensure the continued successful operation of NFP NICE programs through September, 2015.

Recommendation #3: Additional Funding Opportunities

This recommendation requests authorization for the Health and Human Services Agency (HHS) to apply for any additional funding that might be used to address preventive health care, early intervention and treatment programs for at-risk children, pregnant women and families in San Diego County.

Linkage to the County of San Diego Strategic Plan

Today's proposed recommendations support the Healthy Families Initiative in the County of San Diego's 2013-18 Strategic Plan, as well as the *Live Well San Diego* initiative, by supporting preventive health care, early intervention and treatment programs for at-risk children, pregnant women and families.

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GRANT ALLOCATION AND CALIFORNIA HOME VISITING PROGRAM
GRANT FUNDS (DISTRICTS: ALL)

Respectfully submitted,

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HELEN N. ROBBINS-MEYER
Chief Administrative Officer

ATTACHMENT(S)

N/A

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AGENDA ITEM INFORMATION SHEET

REQUIRES FOUR VOTES: Yes No

WRITTEN DISCLOSURE PER COUNTY CHARTER SECTION 1000.1 REQUIRED

 Yes No

PREVIOUS RELEVANT BOARD ACTIONS:

February 28, 2012 (4) – Authorized the acceptance of California Home Visiting Program grant funds from the State of California Department of Public Health - Maternal, Child and Adolescent Health Program for Fiscal Year 2011-12 and FY2012-13; December 8, 2009 (14) – Authorized the Clerk of the Board to execute the Maternal, Child and Adolescent Health Title V Allocation agreement for FY 2010-11 through FY 2012-13; June 18, 2002 (3) – Authorized competitive procurement of Perinatal services; February 12, 2002 (2) - authorized competitive procurement of a contract to provide Black Infant Health program services. June 16, 1998 (31) approved an augmentation to the Fiscal Year 1997-98 allocation, approved the Fiscal Year 1998-99 State allocation and other actions to implement the programs; June 3, 1997 (25), approved the State Maternal and Child Health Title V Allocation to support the Perinatal Care Network and other Children, Youth and Families activities for Fiscal Year 1997-98; November 6, 1990 (36) established the Perinatal Care Network to implement programs aimed at improving the health of pregnant women and their babies.

BOARD POLICIES APPLICABLE:

Board Policy B-29: Fee, Grants, Revenue Contracts – Department Responsibility for Cost Recovery.

BOARD POLICY STATEMENTS:

Board Policy B-29: Fee, Grants, Revenue Contracts – Department Responsibility for Cost Recovery. The Health and Human Services Agency certifies that the MCH and CHVP programs would be worthy of expenditure of County funds in the absence of external funding. These programs supporting preventive health care, early intervention and treatment programs for at-risk children, pregnant women and families.

MANDATORY COMPLIANCE:

N/A

ORACLE AWARD NUMBER(S) AND CONTRACT AND/OR REQUISITION NUMBER(S):

Maternal, Child and Adolescent Health Title V Allocation Oracle Award Number
State: 104639 Federal: 104685.

California Home Visiting Program grant funds Oracle Award Number

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505511- HHS HE 46005 AR FED CHVP

ORIGINATING DEPARTMENT: Health and Human Services Agency

OTHER CONCURRENCES(S): N/A

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