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#### **AGENDA COVER MEMO**

**AGENDA DATE:** 

May 17, 2006

TO:

**Board of County Commissioners** 

**DEPARTMENT:** 

Health & Human Services

PRESENTED BY:

Rob Rockstroh

**AGENDA TITLE:** 

ORDER /

\_ IN THE MATTER OF

APPLYING FOR A FEDERAL ADOLESCENT FAMILY LIFE DEMONSTRATION PROJECT GRANT IN THE AMOUNT UP TO \$ 375,000 PER YEAR FOR FIVE YEARS TO IMPROVE THE HEALTH OF PREGNANT ADOLESCENTS AND REDUCE SUBSEQUENT ADOLESCENT PREGNANCIES (DEPARTMENT

OF HEALTH & HUMAN SERVICES).

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Order /	In	the	Matter	of	Applying	for	а	Federa
Adolescent Family Life Demonstrati	on	Proje	ct Grant	t in	the Amoun	t up	to S	\$375,000
Per Year for Five Years to Improve t	he	Healt	h of Pre	gna	nt Adolesce	ents	and	d Reduce
Subsequent Adolescent Pregnancie	es (	Depa	rtment o	f H	ealth and H	uma	an S	Services)

## II. ISSUE OR PROBLEM

To date, Lane County Public Health has been unable to provide the Nurse Family Partnership, the evidence-based model of nurse home visiting, for Lane County's pregnant adolescents and adults and their newborns. This five-year grant would provide the funding to initiate this program, hire and train staff, and bridge the way to sustainability.

#### III. DISCUSSION

### A. Background/Analysis

In 2005, Lane County had 3,487 births. Of the women who gave birth in 2005:

- 34% had an income of less than 185% of the poverty level
- 43% were first time parents
- 35% were unmarried
- 14% had less than a high school education
- 8% were teens

Additionally, data indicates that the rate of low birth weight (1,500-2,499 grams) was 62.5 per 1,000 births; and the rate of very low birth weight (500-1,499 grams) was 14.3 per 1,000 births. Low birth weight is the single best measure of newborn health. Unfortunately, Lane County's rates of low birth weight and very low birth weight were higher than statewide rates. Although only 281 births were to adolescent mothers, the highest rate of low birth weight babies occurred with these births.

In the past 8 months, Lane County Public Health's five Maternal Child Health field nurses provided nurse home visiting for 41 pregnant adolescents. In general, less than 20% of pregnant adolescents are provided nurse home visiting during or after their pregnancy. Many more adolescents would benefit from nurse home visiting, particularly if the evidence-based model, Nurse Family Partnership program, was available.

The Nurse Family Partnership is a research-based nurse home visiting model that targets low-income pregnant women, most of whom are unmarried, teenagers, and first-time parents. Nurses visit the women approximately once per month during pregnancy and the first two years of their child's life. The nurses teach positive health-related behaviors, competent care of children, and maternal development (educational achievement, participation in the workforce).

Randomized controlled studies of the Nurse Family Partnership have shown improved prenatal health, fewer childhood injuries, fewer subsequent pregnancies, increased intervals between pregnancies, increased maternal employment, and improved school readiness. SAMHSA, OJJDP and the Center for the Study and Prevention of Violence have named Nurse Family Partnership a Model Program.

Positive effects found in the first (Nurse Family Partnership) trial when the child was age 15 were:

Benefits for the children of home visited mothers

- 48 % fewer incidents of child abuse and neglect
- 59% reduction in arrests
- 90% reduction in adjudication as PINS (persons in need of supervision) for incorrigible behavior

Benefits for the home visited mothers

- 61% fewer arrests
- 72% fewer convictions
- 98% fewer days in jail

The grant solicitation includes a requirement for evaluation. The evaluation will be conducted by the Lane Council of Governments (LCOG). LCOG is a governmental entity. Therefore, no competitive selection procedure will be required to identify them as the service provider.

The grant proposal is due by May 22, 2006. A copy of the grant proposal is available in the County Administrator's office for review upon request.

The information required by the Board of County Commissioners prior to approval of grant applications and receipt of grant funds is provided below.

1. What is the match requirement, if any, and how is that to be covered for the duration of the grant?

The application is for five years on a federal fiscal year beginning October 2006. The grant requires a 30% match of the total project amount for the first and second year of the grant. The following match is required for subsequent years: 40% for third year, 50% for fourth year, 60% for fifth year. Both cash and in-kind contributions can be applied to the required match amount. The nurses hired under the grant will be able to bill Medicaid, and that reimbursement as well as the present budgeted amount within the Maternal Child Health Program of Lane County Public Health will be used as the required match. It is not anticipated that any further funds will be needed to meet a match

2. Will the grant require expenditures for Material and Services or capital not fully paid for by the grant?

No

- 3. Will the grant funds be fully expended before county funds need to be spent?
  - No. Both grant funds and matching county funds will be spent concurrently.
- 4. How will the administrative work of the grant be covered if the grant funds don't cover it?

The grant will cover administrative costs.

5. Have grant stakeholders been informed of the grant sun setting policy so there is no misunderstanding when the funding ends? Describe the plan for service if funding does not continue.

The proposed Nurse-Family Partnership Model will be housed within the Lane County Public Health Maternal Child Health Program. Medical providers, schools and social service agencies will be informed of the limitations of the grant. The grant is for five years and will build on the existing prevention infrastructure and the ability to bill Medicaid for nurse home visits so that when grant funds end, the essential community components will continue.

6. What accounting, auditing and evaluation obligations are imposed by the grant conditions?

Accounting and auditing obligations require that funds may not be used to provide family planning services with the exception of counseling and referral; that billing for Medicaid reimbursement for services is expected and may be used as match; and that the negotiated indirect rate shall apply. Additionally, the grant requires that one to five percent of the award must be used for evaluation and that the evaluation plan must be tied directly to program objectives.

7. How will the department cover the accounting, auditing and evaluation obligations? How are the costs for these obligations covered, regardless whether they are in the department submitting the grant or a support service department? Does the department acknowledge that the county will need to cover these costs and it is an appropriate cost incurred by support service departments?

H&HS will include the negotiated indirect cost rate in the grant application to cover these expenses. The evaluation expenses are included as a separate line item in the budget.

8. Are there any restrictions against applying the county full cost indirect charge?

No.

9. Are there unique or unusual conditions that trigger additional county work effort, or liability, i.e., maintenance of effort requirements or supplanting prohibitions or indemnity obligations?

No.

10. Is this a grant funded computer/software applications project?

No.

# B. Alternatives/Options

1. To accept the motion, adopt the order and approve the grant application.

2. Not to accept the motion. This will result in the loss of opportunity to initiate the evidence- based Nurse-Family Partnership model to improve the health of pregnant adolescents, reduce their subsequent adolescent pregnancies, and improve child health and family self-sufficiency.

## C. Recommendation

To approve number one above.

## D. Timing

May 22, 2006 – Grant application due September 30, 2006 – Grant award announced October 1, 2006—Grant project begins

#### IV. IMPLEMENTATION

Upon action by the Board, the grant application will be processed for signature and forwarded to the federal Department of Health and Human Services.

### V. ATTACHMENTS

**Board Order** 

# THE BOARD OF COUNTY COMMISSIONERS, LANE COUNTY, OREGON

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WHEREAS, Lane County has approximately 281 births to adolescent mothers annually; and

WHEREAS, Nurse Family Partnership is an evidence based best practice program of nurse home visiting for low income, unmarried, first time adolescent parents; and

WHEREAS, the U.S. Department of Health and Human Services has released a grant opportunity to improve the health of pregnant adolescents and reduce subsequent adolescent pregnancies; and

WHEREAS, the grant will support the Nurse Family Partnership approach for working with adolescents to improve their health and the health of their infants;

NOW THEREFORE IT IS HEREBY RESOLVED AND ORDERED that Lane County shall apply for a federal Adolescent Family Life Demonstration Project grant for improving the health of pregnant adolescents and reducing subsequent adolescent pregnancies in the amount up to \$375,000 per year for five years; and

FURTHER ORDERED that the county administrator be delegated authority to execute grant documents in the amount up to \$375,000 per year for five years.

DATED this 17th day of May, 2006.

Bill Dwyer, Chair Lane County Board Of Commissioners

APPROVED AS TO FORM

OFFICE OF LEGAL COUNSEL

May 17, 2006 Agenda Item	
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Order / In the Matter of Applying for a Federal Adolescent Family Life Demonstration Project Grant in the Amount up to \$375,000 Per Year for Five Years Improve the Health of Pregnant Adolescents and Reduce Subsequent Adolescent Pregnancies (Department of Health and Human Services).	to