



Maternal, Child and Adolescent Health 2020 Update for the Health Commission

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MCAH Director
October 20, 2020**

MCAH Overview

Maternal, Child and Adolescent Health

- 19 programs promote and protect the health of San Francisco's population of **mothers, infants, children, vulnerable children and families, adolescents and young adults**
- 202 staff positions
- Over \$40 million total annual budget
- Program highlights and collaborative efforts
 - **New funds to support Abundant Birth Project**
 - **Preterm Birth as a Headline Indicator for MCAH**
 - **WIC nutrition services responses to the COVID-19 crisis**
 - **Perinatal Services integration in progress to improve health outcomes for Black/African American and other vulnerable reproductive age populations**

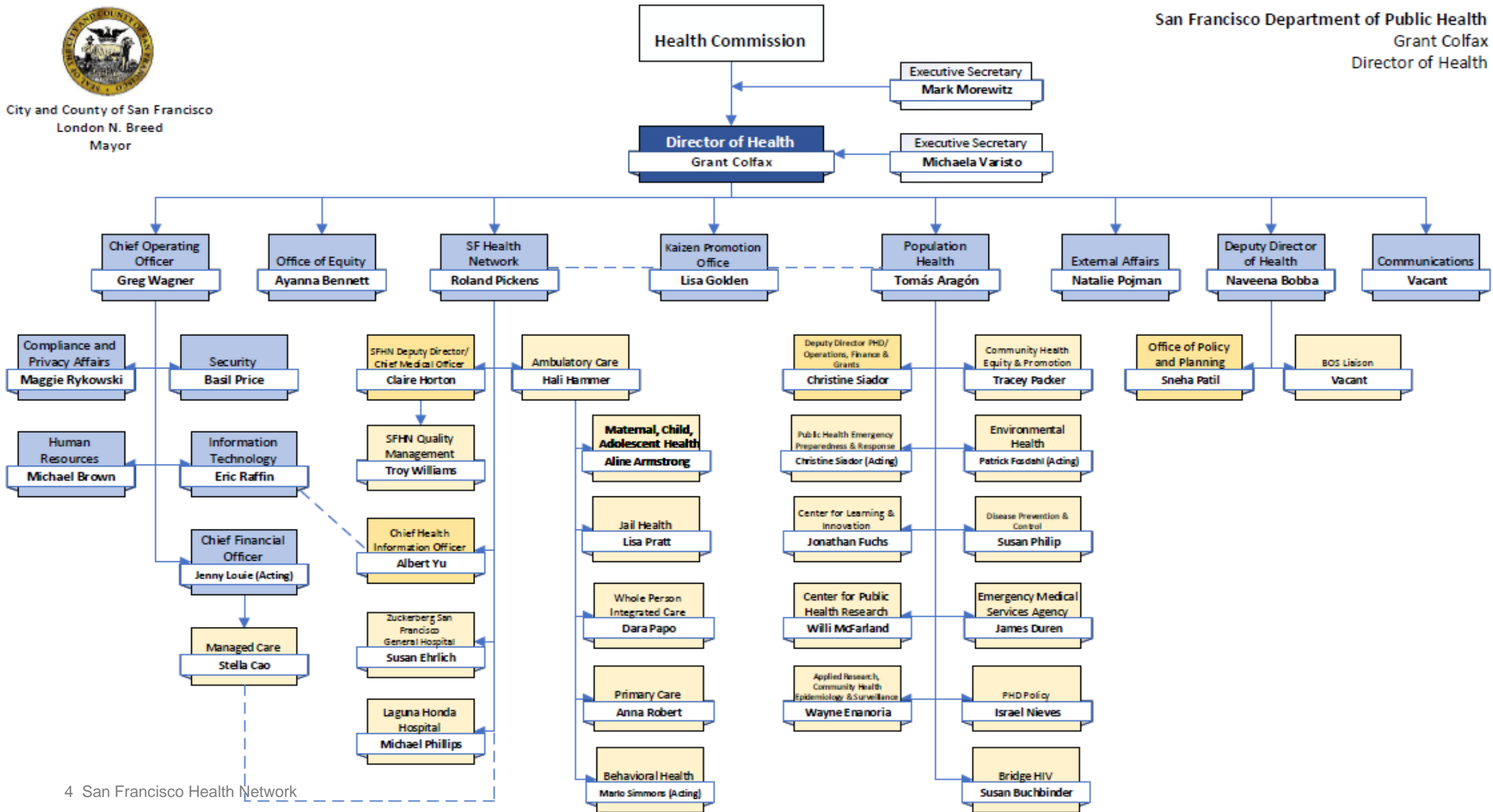
Overview of MCAH's 19 Programs

California Children's Services	Care coordination and case management for seriously ill and disabled low-income children	Women, Infants, Children Nutrition Program	Supplemental nutrition, nutrition education, breastfeeding education and promotion, infant formula for low income families	Perinatal Equity Initiative	Provider QI and doula services provision to reduce adverse birth outcomes in the Black population
Family & Children's Services Nursing	Care coordination and case management for children in the child welfare system; education for Protective Service Workers	Nutrition Education & Obesity Prevention	Nutrition education for low income families; nutrition promotion	Administration Team	Epi, medical, IT oral health, QI, planning, finance, facilities, HR, procurement, clerical services for MCAH section
Medical Therapy Program	Physical and occupational therapy for disabled children and youths	Child Care Health Program	Vision, hearing, dental, wellness screenings and case management for children at schools and care centers county-wide	SIDS/FIMR	Grief counselling and infant mortality case tracking
Child Health & Disability Prevention	Preventive health services and comprehensive screenings to identify disease and disability in low income children and youth; provider education and certification	Black Infant Health Program	Case management and group sessions for pregnant and parenting Black women aimed at redressing health inequities	CalWORKs Nursing	PHN services for CalWORKs clients at HSA
Teen & Adolescent Pregnancy & Parenting Program	Comprehensive services for low income pregnant and parenting youths	Field Public Health Nursing	Nurse home visiting services for low income mothers, infants, and children	AB 75	Compensatory funding for emergency, pediatric, indigent care to hospitals and physicians
Pre & Interconception Health	Comprehensive family planning services for men, women, and youths. Formerly funded by Title X	Nurse Family Partnership	Nurse home visiting services for low-income first-time mothers, infants, and children	Comprehensive Perinatal Services	Quality assurance for providers; protocol development; training, education, and technical assistance for providers; education for pregnant women
Expecting Justice (AKA Pre-term Birth Initiative)	Provider anti-racism training, income supplements, doula support, to reduce incidence of pre-term birth and adverse birth outcomes in the Black and Pacific Islander populations				



City and County of San Francisco
London N. Breed
Mayor

San Francisco Department of Public Health
Grant Colfax
Director of Health



MCAH Client Population and SFHN

~25,000
MCAH
client count
(with some
duplicates)

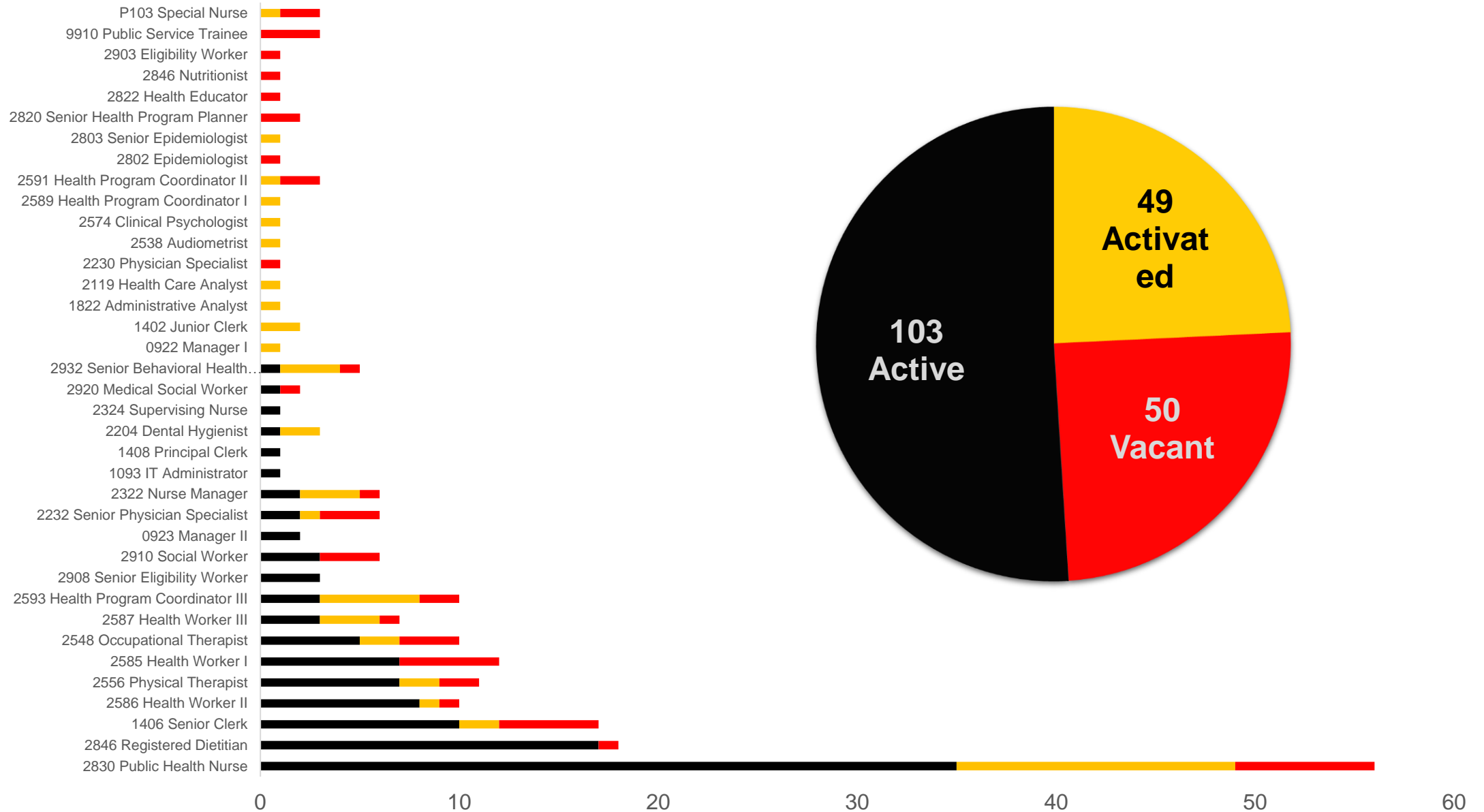
- MCAH Client Population
 - ~82% are enrolled in Medi-Cal
 - >70% identify as Latino/Hispanic
 - >70% identify as Asian
 - ~15% identify as Black/African American
 - >50% are non-English speakers
 - In 2019, total SF births: 8281
- >50% of Medi-Cal births in SF delivered at ZSFG in 2019

74% of Nurse Home
Visiting Program
clients are enrolled
in SF Health
Network Primary
Care

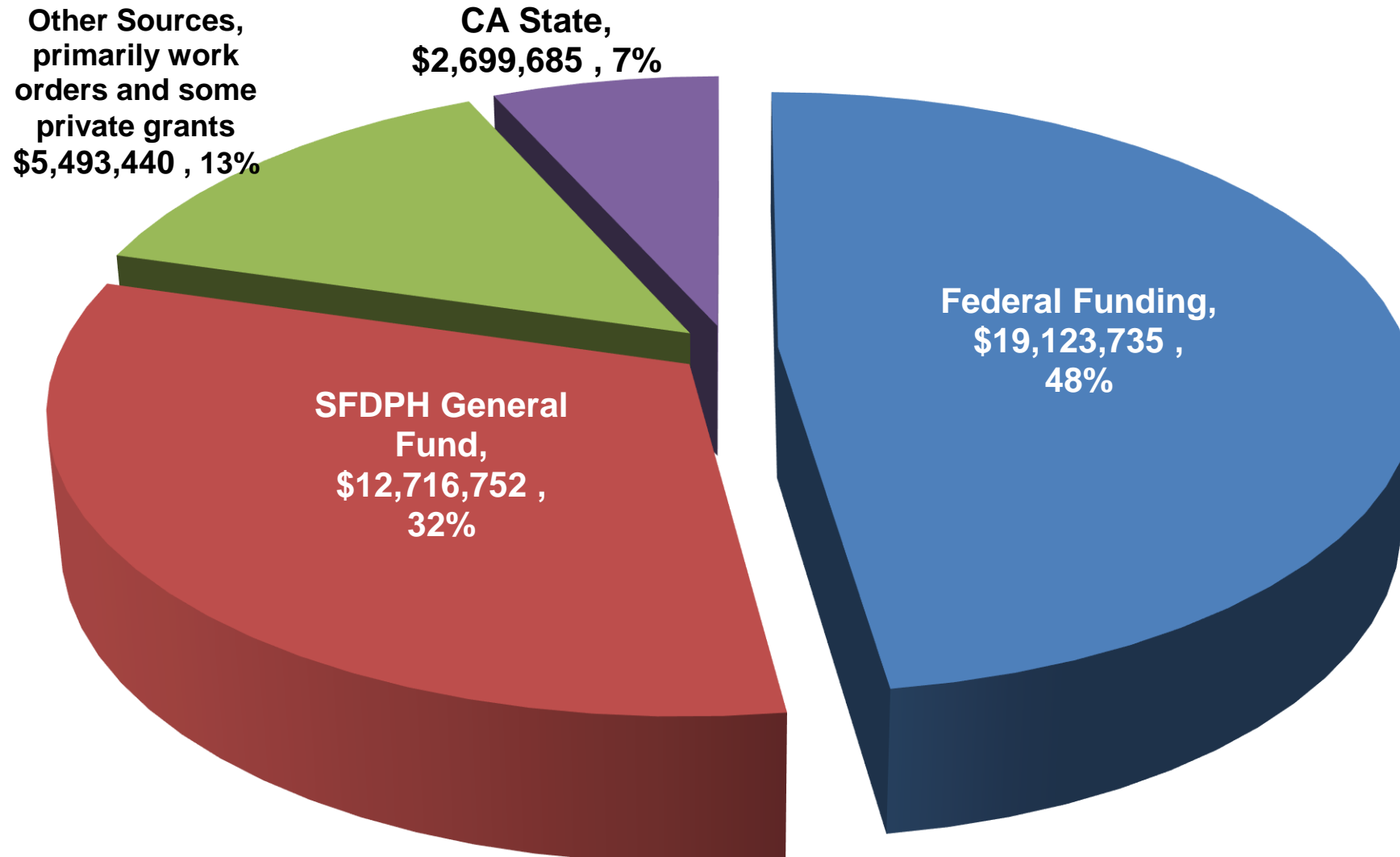
>16% of Nurse Home Visiting
Program clients report
housing insecurity or have
requested a referral for
housing assistance at intake

59% of children served
by Child Health and
Disability Prevention
are enrolled in SFHN
Primary Care

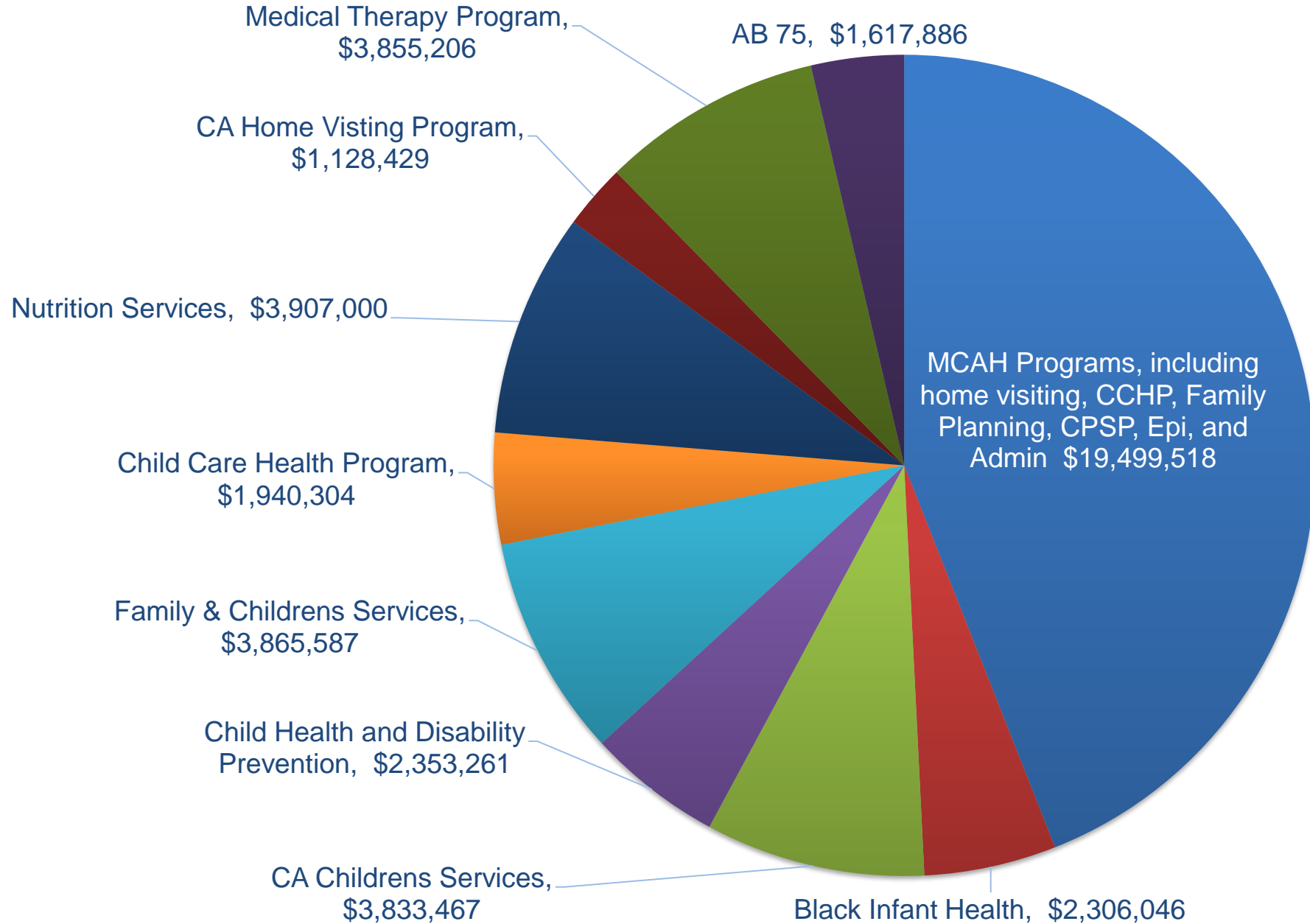
Current MCAH staffing is at half capacity



MCAH FY21 Annual Funding By Source

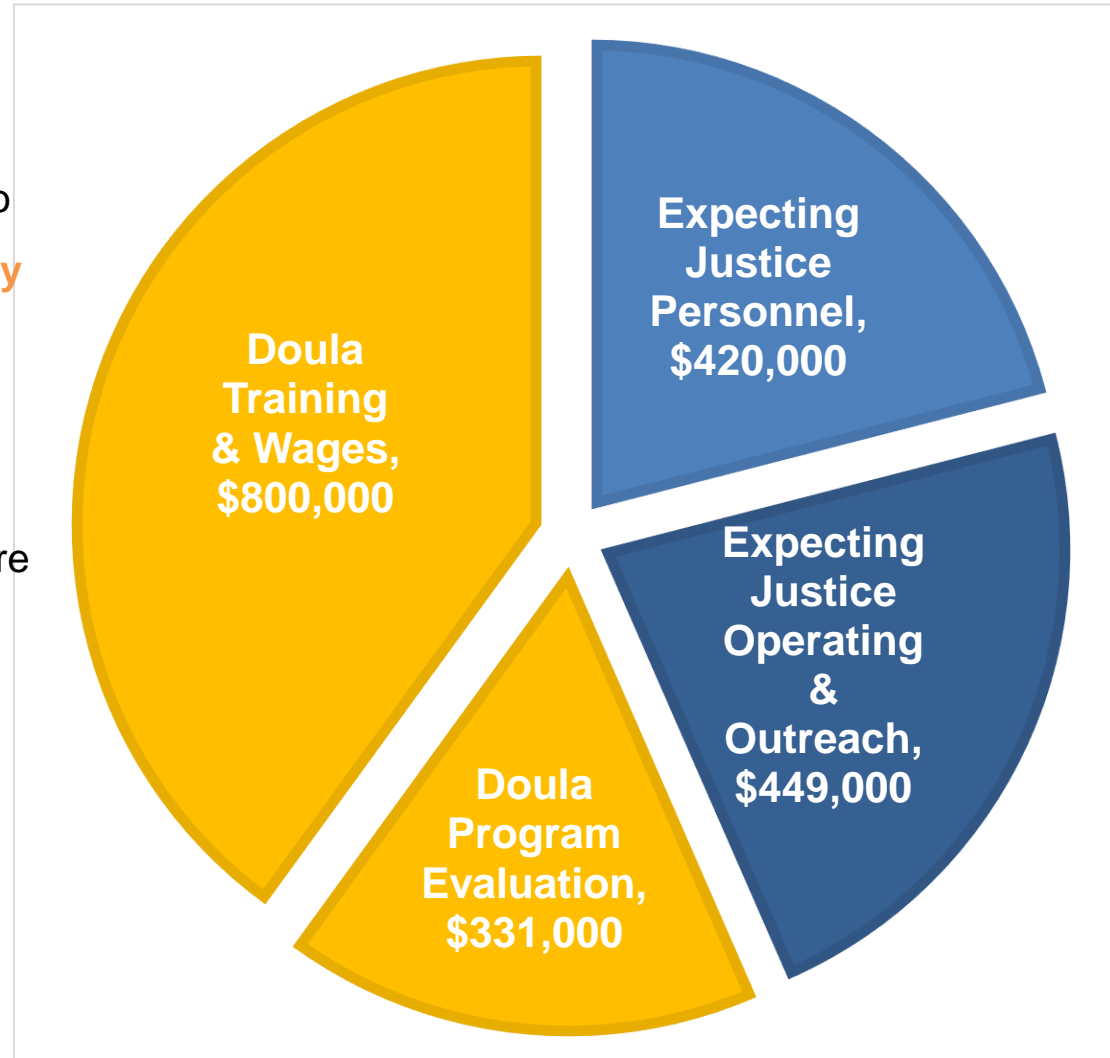


MCAH Funding by Major Programs FY 21



MCAH \$2,000,000 Board of Supervisors FY 21 Doula Support and Abundant Birth Project Add-Back

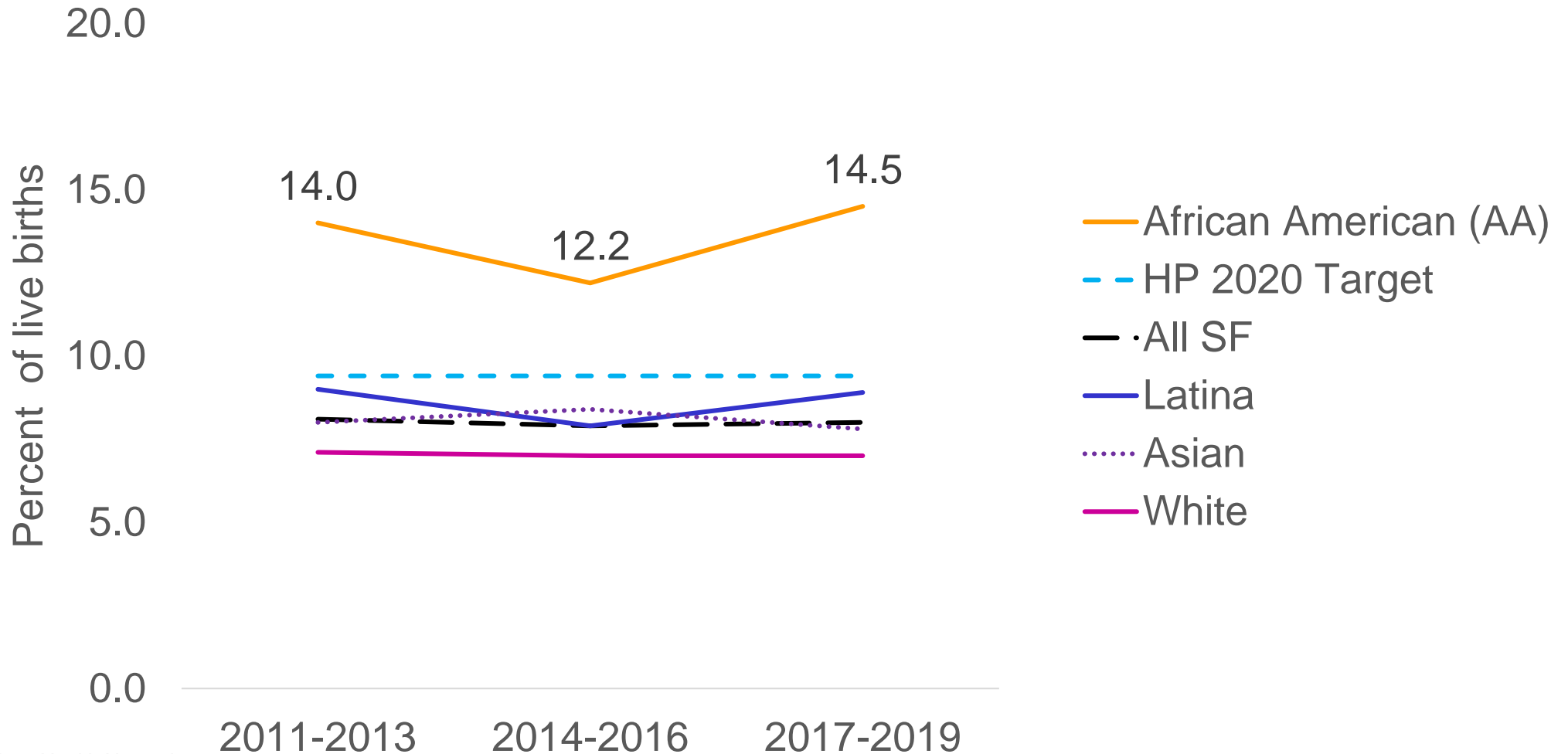
In 2018, Expecting Justice partnered with SisterWeb and the SF Dept of Public Health to launch a SF-based **community doula program**. The program now provides 75 SF Black and PI mothers annually with culturally-concordant doula care at no cost. These doulas are specially trained to support mothers facing discrimination and medical racism during pregnancy, birth, and postnatally.



In Nov 2020, Expecting Justice is launching the first pregnancy income supplement in the United States. Called the **Abundant Birth Project**, this is a basic income program that will reach 100 low-income **Black** and PI pregnant women in San Francisco. The program aims to distribute a monthly stipend of \$800-\$1,000 per month for the duration of a person's pregnancy and then for the first two months of the baby's life.

Headline Indicators We Aim to Change

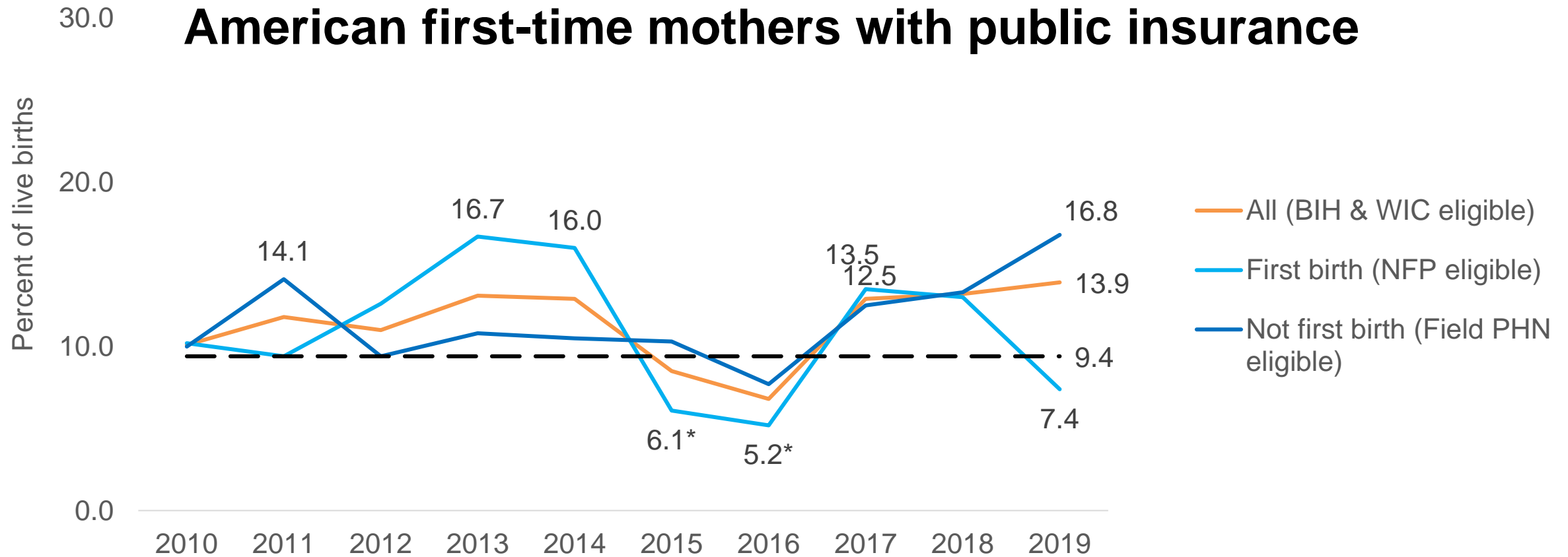
Preterm Birth (3-year rate)



The annual rate of singleton **preterm birth met the HP 2020**

Target in 3 out of the past 5 years for **Black/African**

American first-time mothers with public insurance



Some Factors Associated with Preterm Birth

Social, Personal, and Economic Characteristics

- ✓ Teens and women over age 35
- ✓ Black race
- ✓ Women with low income

Pregnancy and Medical Conditions

- ✓ Prior preterm birth
- ✓ Infection
- ✓ Carrying more than 1 baby (twins, triplets, or more)

Behavioral

- ✓ Tobacco use
- ✓ Substance use
- ✓ Stress



Racism as a Root Cause

There is nothing inherent about Black skin that increases risk, except for overexposure to racism

- Dr. *Monica McLemore*, UCSF School of Nursing

For more information visit: www.cdc.gov/reproductivehealth/MaternalInfantHealth/PretermBirth.htm

MCAH programs working to prevent preterm birth

Evidence-based and informed programs that has standardized nation and statewide protocols

- Women, Infants & Children (WIC) *Supplemental nutrition resources*
- Black Infant Health Program (BIHP) *Social support*
- Nurse Family Partnership (NFP) *Linkage to services for first-time moms*
- California Perinatal Services (CPSP) *Quality prenatal care*

Locally-tailored intervention/planning

- Field Nurse Home Visiting Program *Linkage to services for non-NFP eligible moms*
- Expecting Justice/UCSF Preterm Birth Initiative *Abundant Birth program*
- Doula Access- *SisterWeb San Francisco Community Doula Network*
- Project 500 *Wrap-around services, partnership between NFP and HSA*
- Perinatal Services *Syphilis coordination, Implicit Bias training in hospitals, Pop-Up Village*

WIC is reducing food insecurity during the COVID pandemic

- WIC distributed EatSF vouchers for 9 months to **over 900 people**, 9% identify as Black/African American
 - **\$600,000 in vouchers** funded by Healthy Food Purchasing Supplement funds.
 - \$200,000 to WIC participants
 - \$77,000 to BIHP
 - \$17,000 to SisterWeb
 - \$15,000 to Southeast health center (9 other DPH and consortium clinics participated)
 - \$150,000 to First 5 Family Resource Centers
- WIC distributed **\$10,000 of baby food** to Black and PI families in partnership with SisterWeb
- WIC distributed 380 \$50 gift cards to MCAH families with infants under 1 year of age
 - Funding from Stupski
 - **All families enrolled in BIHP received this benefit**
 - Random sampling indicated that most families used 100% of the funds towards food and groceries

Perinatal services integration

- **Congenital Syphilis (CS) Coordination**
 - Workgroup with Primary Care, Street Medicine, Family Planning, City Clinic, Team Lily
 - Protocols to connect people to services (i.e. SIP hotels, Navigation Centers)
 - **Perinatal Equity Initiative (CDPH)**
 - Implicit Bias Quality Improvement in Hospitals
 - Perinatal Support Person in Field Home Visiting Program
 - Intervention Evaluation
 - Bay Area Wide Mass Media Campaign
 - Development of Community Advisory Board
 - **SF Respect Initiative**
 - Collaboration between community and healthcare partners (UCSF & SFDPH).
- Aims to identify systemwide gaps
 - (1) Systemic & institutional racism has eroded trust in our systems,
 - (2) Services are siloed and very hard to access,
 - (3) Community support and wellness is just as important as medical care for optimizing perinatal outcomes
 - Pregnancy Pop-Up Village (PV)

**Slides after this point are handouts for additional
information MCAH Programs Highlight**

MCAH Family Planning Program's Equity-Related Work

- **PROTOCOL REVISION:** In FY 2017/18, revised and disseminated Family Planning Counseling Protocols to embrace patient-directed contraceptive and pregnancy counseling embedded in three core reproductive justice principles: (1) the right to have a child; (2), the right to not have a child, and; (3) the right to parent a child or children in safe and healthy environments.
- **STAFF TRAINING:** In FY 2018/19 revised the annual, 3-Day Family Planning Basics Series (contraception, pregnancy counseling, and STIs) to embed a racial equity lens that challenges anti-Black racism in the provision of sexual health care.
- **KEY EFFORTS DURING THE COVID-19 PANDEMIC:** (1) collaborated on efforts to curb congenital syphilis epidemic, including providing staff; (2) worked with Tom Waddell WPIC and Tom Waddell UH clinics to ensure access to health services for primarily B/AA and Latinx unhoused youth in the Tenderloin; (3) disseminated to SFHN clinics best practices in providing family planning services via telehealth; (3) ensured that family planning and adolescent health services were considered essential health services during this period; (4) informed youth and youth adults through an SF.gov webpage and social media campaign of physical, mental health, and housing services available to young people during COVID.



- **DATE:** JANUARY 25-29, 2021
- **GOAL:** Convene 100+ SF health providers and B/AA community members for a week of daily virtual workshops during which they will engage in shared learning and substantive conversations resulting in concrete recommendations for how health care providers can become anti-racist, client-focused, and embrace reproductive justice in services.
- **Partners:** SFDPH (MCAH, Primary Care, Population Health), UCSF (Black Women's Health and Livelihood Initiative & PTBi), Anthem Blue Cross, the SF Health Plan, SFUSD, Exegy

Black Infant Health (BIH) Program

Groups

- Prenatal and postpartum education
- Let's Talk Relationship *(Self love to encourage healthy relationships with others)*
- Fatherhood Circle *(Strengthening families)*
- Book club *(Building social support)*

Workshops

- Financial literacy *(Economic empowerment)*
- Breastfeeding education *(Lowering health risk)*
- Nutrition resources & education *(Healthier eating habits)*
- Prenatal & postpartum fitness *(Family exercise)*

FY 19/20
140 referred
100 served

Resources

- Weekly food bag deliveries *(~800 deliveries April-September 2020)*

Black Infant Health

What we do

- Provides **support and education** throughout pregnancy for **African American pregnant women** to promote the health of mothers and babies
- Conduct **group education and individual client services** to address issues including:
 - Chronic stress
 - Social isolation
 - Limited access to services
 - Racial inequities
 - Economic hardship
 - Disempowered communities

Who we serve

- African American women during **prenatal and postpartum period** within San Francisco
- 100 clients (FY 19/20)



Nurse Home Visiting: Nurse Family Partnership

What we do

- Follow **first-time mothers** throughout their pregnancy and first two years of life to:
 - Ensure **healthy pregnancies**
 - Improve **child health** and development
 - Help mothers become more **economically self-sufficient**

Who we serve

- At-risk, first-time mothers throughout **prenatal and postpartum period**
- 300 clients (FY 19/20)
- 141 SFHN members



Nurse Home Visiting: Field Public Health Nursing

What we do

- Nurse Home Visiting Program that **partners nurses with families** to provide support for women, infants, and children including:
 - Clinical **assessments** and case management
 - **Education** and support for healthy pregnancies
 - **Guidance** on
 - Caring for newborns
 - Caring for a child with special health needs
 - Self-care
 - **Linkage** to community resources & care

Who we serve

- At-risk **prenatal and postpartum women** and their newborns, chronically ill infants, children, and adolescents
- 800 clients (FY 19/20)
- 670 SFHN members



Pregnant People, Mothers, Infants experiencing worsening poverty rates and racial inequities. MCAH Programs to support this work:

WIC Nutrition	Provide food vouchers & education to 8000 clients/month Enrollments increased (by 20%) due to job/income loss during pandemic
Maternal, Infant & Early Childhood Home Visiting Program	<ul style="list-style-type: none"> • Visits to >400 high risk, low income pregnant women, infants & children/month • Home visits conducted by licensed public health nurses trained in evidence-based programs such as Nurse Family Partnership • Provide assessment, health promotion, case management, and linkage to (medical/behavioral/social) services to pregnant women and new parents with risk-factors. • Federal (MIECHV) and State (CHVP) requirements by states and funding for program requirements.
Black Infant Health Program	Provide individual/group health promotion, education and community building during pregnancy by attending 10 Prenatal and 10 Postpartum groups, new Fatherhood Initiative
Perinatal Equity Initiative	New CA Health & Safety Code to address institutional racism during pregnancy, perinatal, and postpartum period. Community Advisory Board, Communications & Community RFPs.
Family Planning	Ensure access to quality family planning health services. Policy updates & training to clinics at SFHN and citywide.
Comprehensive Perinatal Services	CDPH/DHCS mandated program to ensure access to quality prenatal, intra-partum, and postpartum health services for women eligible for Medicaid. Policy updates & training citywide. Including updates related to COVID-19.
Collective Impact: Racial Inequities of Preterm Birth	Collective impact of health and social service organizations to address the racial, social, and institutional determinants of preterm birth inequities. Progress with (web-based) meetings. *Expecting Justice (Formerly PTBI) income supplement; *Doula Access- 2 million dollar add back allocated to support this work
	Provide grief support to parents who've experienced fetal and infant loss. Conduct

MCAH- Nutrition Services

- Nutrition Services leadership is advising on a federal legislative opportunity to leverage the pending Child Nutrition Reauthorization process to obtain a statutory exemption for state- and local-funded income supplements (such as San Francisco's Abundant Birth Project) from income determinations during the WIC certification process.
- San Francisco WIC leadership was elected to represent the Bay Area WIC local agencies on the California WIC Association board. The goal is to advocate for inclusion of health equity, anti-blackness and anti racism trainings and for the inclusion of meaningful equity metrics in the California WIC program workplans.
- The Food Security Task Force (includes MCAH- Nutrition Services representation) released it's 2020 recommendations to address the issue of food insecurity in SF. The recommendation includes a need for a sustained commitment to end systemic racism and address structural barriers to health including food insecurity.

MATERNAL, CHILD & ADOLESCENT HEALTH (MCAH) / CHILDREN'S MEDICAL SERVICES (CMS) FAMILY CHILDREN'S SERVICES (FCS) PUBLIC HEALTH NURSE (PHN) UNIT
PARTNERSHIPS SERVING BLACK FAMILIES & ADDRESSING HEALTH DISPARITIES IN SAN FRANCISCO

In San Francisco, 53% of children ages birth-to-five in FCS/foster care are African American (vs. 5.8% total child population)

- **SF Family Treatment Court (FTC)**

- 38% of children served are African American (AA)
- 71% of AA children involved in FTC reunified with a parent, compared with 30% citywide and 49% statewide
- Families engaging in FTC were 3.9 more likely to reunify with a parent

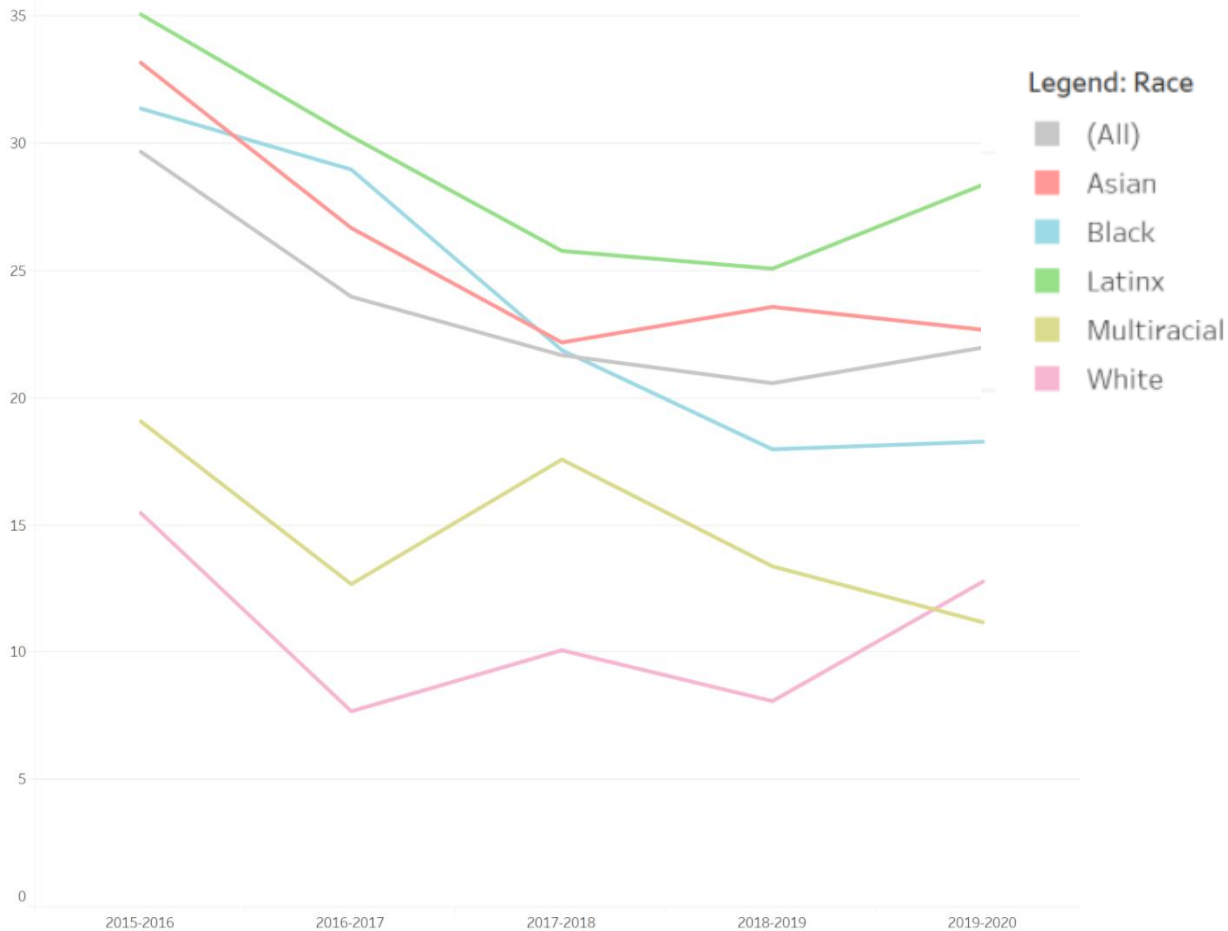
- **Plan of Safe Care (POSC) for Substance-Exposed Newborns**

- Collaborative of child welfare, hospitals, MCAH and community partners + internal policy/procedure change with focus on **prevention and race equity**
- Enhanced data tracking of FCS/Child Welfare cases involving prenatal substance exposure, including racial disparities
- Family-centered, trauma informed plan created by parent with a trusted provider detailing:
care/support team, strengths/challenges/supports, plans for recovery and child & family safety and well-being

Child Care Health Program (CCHP)

The mission of CCHP is to enhance the health, safety, and development of children 0-5yrs in child care settings. CCHP prioritizes services for low-income families and families at risk for health inequities due to social determinants of health including poverty, racism, immigration status, and housing insecurity

Percentage of Children with Dental Caries Experience, by Race



Individual-Focused Interventions

Dental, hearing, nutrition, and vision screening for children Case management and linkages for children needing follow-up

Systems-Focused Interventions

Training and Technical Support for Teachers:
Adverse Childhood Experiences (ACEs)
Science, The Growing Brain, Healthy Apple

Collaboration with Community Stakeholders: SF Family Child Care Association, CPAC
Black/African-American Children Ad-hoc Committee, CavityFree SF

California Children's Services MTU Remodel

In a collaboration between SFUSD and DPH, the Quintara Medical Therapy Unit was recently remodeled to allow for ergonomic workstations for staff.

The treatment areas were also remodeled to provide a professional and family friendly environment for therapy services and medical appointments.





Medical Therapy Program Reopens!

In strict compliance with DPH COVID Guidelines and State CCS Guidelines, the Medical Therapy Program is providing MTC's, PT, &OT :

- Tele health for all clients
- In person visits for clients with critical needs such as post-op care
- In person visits for clients who's needs can not be met thru tele health