

December 19, 2023

**Health Commission Presentation** 

Maternal, Child, and Adolescent Health (MCAH)

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SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH

MATERNAL, CHILD & ADOLESCENT HEALTH SECTION

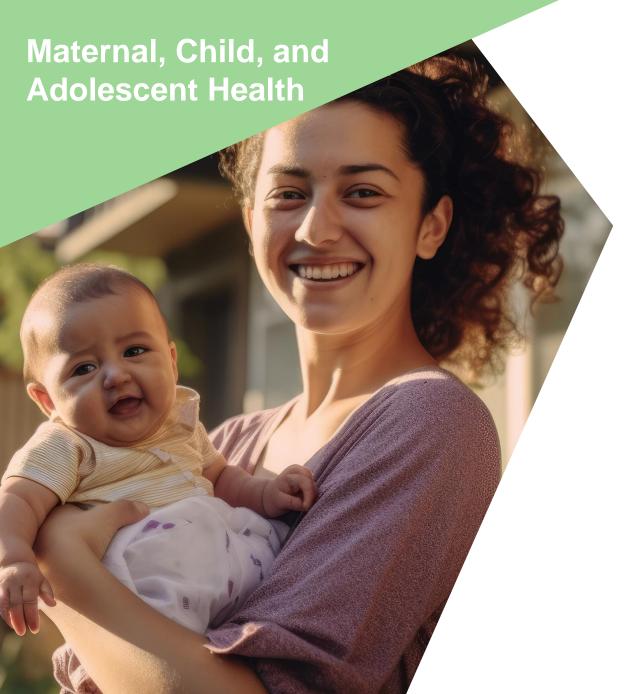




Maternal, Child, and Adolescent Health (MCAH)

## MCAH program updates: Outline of today's presentation

- Home Visiting
- Preterm Birth Chart Review Epidemiology Work
- Family & Children Services –PHN Unit
- Child Health Disability Program



## **All Home Visiting Programs**

- Provide 1:1 Public Health Nurse (PHN) visits in client homes and in the community
- Serve low-income families, most of whom experience food insecurity and have a history of trauma, many have a history of untreated mental health issues, and many are marginally housed or unhoused
- PHNs provide clinical assessments, intensive case management and collaboration with other providers
- Provide education on health promotion, child development, parental role development, etc.
- Provide relationship-based care: trusting relationships are key to health promotion and change, especially in historically marginalized communities

## **Nurse-Family Partnership (NFP)**

- Evidence-based, Public Health Nurse-led community health program with 45 years of evidence showing improved health, social and economic outcomes for families and children
- Federal funding granted through CDPH
- Enrollment of first-time pregnant people by 3<sup>nd</sup> trimester, work with Public Health Nurse through the baby's 2<sup>nd</sup> birthday
- Fiscal Year 2023: 314 families served, 2559 visits.

48% Less likely to suffer child abuse and neglect<sup>1</sup>

Reduction in ER visits for accidents and poisonings<sup>6</sup>

67% Less likely to experience behavioral and intellectual problems at age 62

72% Fewer convictions of Mothers (measured when child is 15)<sup>1</sup>

Fewer hypertensive disorders of pregnancy<sup>4</sup>

82% Increase in months employed<sup>3</sup>



## Field Public Health Nursing

- Team is piloting a trauma-informed model based on Adverse Childhood Experiences (ACEs) research with the goal of optimizing health among enrolled clients by encouraging resilience and mitigating toxic stress
- Pilot is a collaboration with Sonoma and Napa Counties, funded by CDPH, evaluation by UCSF School of Nursing
- Enrollment is preferable during pregnancy, can also be postpartum
- PHN works with client until mutually agreed goals are achieved, usually 6 -12 months postpartum
- Fiscal Year 2023: 793 families served, 3233 visits



## **Perinatal Stabilization Program**

- Community/street based Public Health Nursing care providing clinical assessments, linkages, navigation and support to pregnant people impacted by homelessness, substance use, and mental illness
- Care includes health assessment, promotion, and education
- Postpartum mother/baby home visits also in residential treatment programs
- Care provided until wellness goals met (typically 6-12 months postpartum)
- FY 2023: 168 clients served, 464 encounters
- Of enrolled clients, all delivered in hospital and there were no cases of congenital syphilis



#### **Home Visiting Barriers and Successes**

#### **Barriers**:

- Housing
- Food insecurity
- Untreated mental health issues
- Strong need for our services and long wait list

#### Successes:

 Connecting clients to community services including housing, food, medical care, depression screening

# Maternal, Child, and **Adolescent Health** MCAH Epidemiology

## **Goals for MCAH Epidemiology**

#### Inform evidence-base action:

- Identify health problems
- Identify risk factors
- Programs that improve health

Focus on Social-determinants of Health



# Preterm Birth Review- New Data Infrastructure Preterm birth:

## Launching new Preterm Birth Review (PTBR) data collection

- Rolling out to all San Francisco birthing hospitals
- Inviting all people who deliver preterm to talk with MCAH PHN about their experience, take a survey about resources needed & accessed during pregnancy, and share information from the medical record

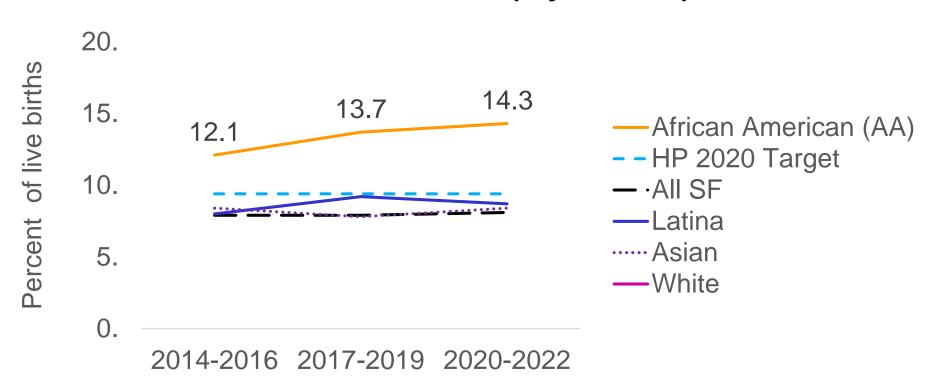
#### Preterm birth data now on SFGov:

https://sf.gov/resource/2023/preterm-birth-data

- Trends
- Disparities
- Maps
- Downloadable Data Summary
- Conceptual framework for program planners

## **Headline Indicators We Aim to Change**

#### **Preterm Birth (3-year rate)**





#### **Developing a new Data Infrastructure**

New non-invasive ways to track nutrition and chronic health:

## New saliva insulin monitoring of pre-diabetes and caries risk

- Randomized trial completed (Clinical Trial NCT05211843)
- Detected high saliva insulin in children ages 5-10 years in San Francisco
- Determined that drinking water instead of apple juice or no drink reduces saliva insulin in children ages 5-10 years

## Veggie meter tracking to index change in fruit and vegetables

- Non-invasive biomarker of usual carotenoid vitamins in the diet
- Tool for improving diet for people who cannot self-report diet (including infants, young children, non-English speakers)



## Family & Children Services Public Health Nursing Unit

#### Success:

- Increased Medical compliance for foster youth who received timely medical exams: current FY23-24 79% compared to FY22-23, 69.6%. {California overall percentage FY22-23 66%}.
- Increased Dental compliance for foster youth who received timely dental exams: current FY23-24 68% compared to FY22-23, 59.4%.
   {California overall percentage FY22-23 59.5%}.
- During Quarter 1, SafeCare PHN's completed 62 home visits. SafeCare is an evidence-based in-home behavioral parenting program.
- This fiscal year, we have collaborated with community partners and health plans to strategize ways to implement new CalAIM benefits for foster youth.

#### **Future Plans:**

 We have since met with FCS leadership who have agreed to a pilot project to connect our transitional aged youth to Enhanced Care Management starting 2024.

## Child Health Disability Program Medical Director: Addressing shortage of early childhood speech and language services for children on Medi-Cal.

BACKGROUND: Long-standing shortage of speech and language services for children under 3 on Medi-Cal, worse post-pandemic.

- Only 9 FTE in pediatric speech and language pathologists (SLPs) in SF who accept Medi-Cal.
- Only children with Kaiser have access to long-term speech therapy. All other Medi-Cal providers now limit visits to 12-36 sessions.
- Inadequate capacity; long wait times; the window for early intervention missed.
  - SFHP has 4,200 enrollees between 9-35 months old, but billed for only 100 speech and language evaluations and 335 therapy visits for this age group last year. Only 12% of speech therapy billed to SFHP last year was for children under 3. 31% was for children 3-5, and 57% was for children ages 6 and up.

## THANK YOU

Aline Armstrong, MCAH Director

