Legislation Text

File #: 2020-0922, **Version:** 1

To: County of Sonoma Board of Supervisors
Department or Agency Name(s): Department of Health Services
Staff Name and Phone Number: Tina Rivera, 565-4774
Vote Requirement: Majority
Supervisorial District(s): Countywide

Title:
California Home Visiting Program State General Fund Innovation Grant

Recommended Action:
Authorize the Director of Health Services, or designee, to execute a grant agreement with the City and County of San Francisco to receive $1,199,979 in revenue to implement the Trauma-Informed Approach in Public Health Nursing model for the period May 15, 2021 through June 30, 2023.

Executive Summary:
In August 2020, the California Department of Public Health/California Home Visiting Program (CDPH/CHVP) issued a request for supplemental information (RSI) to local health jurisdictions (LHJ) to solicit applications for implementing home visiting as a primary strategy for serving families from pregnancy through kindergarten entry, with a focus on innovative practices to meet local need; and for evaluating the innovation in order to assess continued or more wide-spread use. CDPH/CHVP considered applications in response to the RSI for home visiting services that either employed an evidence-informed model, or employed an evidence-based model implemented with an innovative approach or an add-on component.

The Sonoma County Field Nursing program joined Napa County's Home Visiting Program and San Francisco County's Home Visiting Programs to form the San Francisco Home Visiting Consortium for the purposes of implementing the Trauma-Informed Approach in Public Health Nursing (TIA-PHN) model across three counties. The CDPH/CHVP selected the Consortium's RSI for a $3 million funding award beginning fiscal year 2020-2021 through fiscal year 2022-2023 to serve up to 300 families annually. The San Francisco Consortium will implement the TIA-PHN with all eligible and enrolled clients and their families. By implementing this new model across the three counties, home visitors will be better able to assess and address the mental health, social and medical needs of high-risk families in urban, suburban and rural settings, and reach a more demographically diverse population.

Discussion:
Sonoma County Department of Health Services Field Nursing program has developed and piloted an evidence-informed home visiting model, the Trauma Informed Public Health Nurse (TIA-PHN) model based on the US Substance Abuse and Mental Health Services Administration's (SAMHSA) Trauma and Justice Strategic Initiative. The TIA-PHN pilot model began in July 2018. SAMHSA operationalized a trauma-informed approach for the mental/behavioral health sector based on a set of six key principles that mitigate re-traumatization of both clients and staff.

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1) Safety
2) Trustworthiness and transparency
3) Peer support and mutual self-help
4) Collaboration and mutuality
5) Empowerment/voice/choice
6) Cultural/historical/gender issues (SAMHSA, 2014)

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The evidence of hardship and trauma in the SF Consortium population can be seen in the percentage of children ages 0-18 living in poverty (defined as 0-200% of the Federal Poverty Level): 24.7% in San Francisco; 32.1% in Sonoma and a staggering 37.9% in Napa. Additionally, people of color have been disproportionately affected by COVID-19. This is evidenced in Sonoma County where there is a large workforce in low-paying industries, such as agriculture, tourism and hospitality, many of whom are Latinx. COVID-19 has hit this population hard, with the Latinx population representing 52% of confirmed cases, despite comprising 25.6% of the population. San Francisco is also seeing much higher numbers of COVID-19 cases among Latinx people who are 15% of the population but account for 51% of the positive cases. Similarly, 56% of COVID-19 cases in Napa have occurred in Latinx individuals, who comprise 36% of that county's population.

By applying the TIA-PHN model to the field nursing programs' target population- women referred during the perinatal period and/or established parents struggling with care needs of their children-the goal is to increase exposure to high-touch, in-home, family-centered services that have the potential to mitigate intergenerational trauma in a high-risk population that otherwise does not have access to similar services. The expected outcomes include standardizing key components of the model, such as the application of Adverse Childhood Experiences (ACEs) screenings, health education in a home setting, and delivery of trauma-informed prevention and early intervention management. The Consortium will contract with University of California San Francisco's School of Nursing to conduct a comprehensive evaluation, and build the evidence-base for this model.

The population served by the San Francisco Home Visiting Consortium's trauma-informed approach are pregnant women and families with children up to age 5 years in San Francisco, Sonoma and Napa counties. The Consortium will serve families that are at the highest level of risk, with referrals coming from hospitals, clinics, Child Protective Services, and other sources. Referrals are triaged to determine the severity of risk

factors in five domains:

1) Homelessness/housing insecurity
2) Mental health concerns (chronic or acute)
3) Intimate/domestic partner violence
4) Substance use disorders
5) Medical fragility (e.g., pre-existing hypertension, or other chronic illness, such as diabetes, etc.)

Prior Board Actions:
None

FISCAL SUMMARY

Expenditures	**FY 20-21 Adopted**	**FY 21-22 Projected**	**FY 22-23 Projected**
Budgeted Expenses	399,993	399,993	399,993
Additional Appropriation Requested			
Total Expenditures	**399,993**	**399,993**	**399,993**
Funding Sources			
General Fund/WA GF			
State/Federal	399,993	399,993	399,993
Fees/Other			
Use of Fund Balance			
Contingencies			
Total Sources	**399,993**	**399,993**	**399,993**

Narrative Explanation of Fiscal Impacts:
Funding will support existing staff. Health Services will modify the funding source of existing Field Nursing/CHVP staff for the 2021/2022 Fiscal Year during the first quarter consolidated budget adjustment process.

Staffing Impacts:			
Position Title (Payroll Classification)	**Monthly Salary Range (A-I Step)**	**Additions (Number)**	**Deletions (Number)**

Narrative Explanation of Staffing Impacts (If Required):
The grant funding will support existing Home Visiting staff.

Attachments:
Attachment 1 - Grant Agreement

Related Items "On File" with the Clerk of the Board:
N/A