

**CITY OF CLEVELAND  
DEPARTMENT OF PUBLIC HEALTH  
MomsFirst  
2018**

**Request for Proposals**

**Date of Issuance**

**November 27, 2018**

**Applications Due**

**January 14, 2019**

Summary
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## Purpose and Intent

The Cleveland Department of Public Health announces the availability of funds to reduce the racial disparity in infant mortality and poor birth outcomes in targeted neighborhoods within the City of Cleveland for the project year commencing April 1, 2019. Two sites will be awarded funding. One will be to service specific neighborhoods: Mt. Pleasant, Broadway-Slavic Village, Buckeye-Shaker Square, Central, Kinsman, Lee-Harvard, Union-Miles, Lee-Seville, Buckeye-Woodhill, Fairfax, Collinwood, Glenville, and Euclid-Green. The other site will be funded as a specialized component, serving adolescents and incarcerated women. Funds will be made available through the MomsFirst program to nonprofit organizations and/or public agencies.

MomsFirst (formerly Healthy Family/Healthy Start) was funded in 1991 by the U.S. Department of Health and Human Services as one of fifteen demonstration projects with the goal of reducing infant mortality by 50% over five years. The model has been refined to reach women that are at the highest risk of experiencing an infant death, low birth weight (LBW) or very low birth weight (VLBW) baby.

MomsFirst's primary goals are to reduce disparities in infant mortality and poor birth outcomes (low birth weight and very low birth weight) experienced by African Americans. Additional performance benchmarks are included (see Attachment A).

MomsFirst is administered through the Cleveland Department of Public Health and seeks to enroll pregnant adolescents and women living in the city of Cleveland at risk of a poor birth outcome. To accomplish this, MomsFirst subcontracts with agencies which, by mission, mandate or practice, assist low-income and/or minority populations. Much of MomsFirst's success is based on blending a grassroots approach with evidence based interventions.

Through this Request for Proposals (RFP), the City of Cleveland seeks to continue to serve women enrolled in the prenatal period (prior to 33 weeks of pregnancy) and served until their child reaches the age of eighteen months. Women and families that have experienced a recent (within the last six months) infant loss are also eligible for services. Participants will receive the MomsFirst core services of outreach, case management, interconceptional care, health education, and depression screening. Successful applicants will be expected to:

- implement an integrated, comprehensive, community-based, outreach project with pregnant participants and their babies up to eighteen months of age
- hire and manage a staff of Community Health Workers (CHWs) and a Case Manager
- provide care coordination, case management, and preventive health education to participants
- screen participants for perinatal depression and their children for developmental delays
- administer Healthy Start Screening Tools (Demographic, Pregnancy History, Prenatal, Postpartum and Parenting)
- host and coordinate community health education events (Consortia or Peer Advisories)
- attend all administrative functions, special projects, trainings, and meetings
- provide timely and accurate reporting

## FUNDING PRIORITIES

Funds can be made available to existing MomsFirst programs that have proven to be successful and which are effectively responding to the needs of their communities. Additionally new agencies that are interested in providing MomsFirst services to the targeted populations are encouraged to apply. All services will be focused on Cleveland residents.

It is anticipated that utilizing funding from the U.S. Department of Health and Human Services, two awards of \$234,000 each will be made available on an annual basis (2019-2024, based on the availability of appropriated funds) through this RFP for MomsFirst services within the City of Cleveland. Program budgets will be carefully reviewed to determine appropriateness of grant awards. The City of Cleveland reserves the right to not award all or any of the funds available through this request for proposal process, based on the available funding, and the quality of the proposals submitted. Funded programs will be required to attend technical assistance workshops to implement mandated strategies in addition to ongoing site-visits to evaluate appropriate utilization of funds. Individual grant awards may be adjusted to ensure maximum utilization of grant funds.

### TIMELINE FOR REQUEST FOR PROPOSALS

- A. Date of Issuance of RFP: November 27, 2018**
  - B. RFP Due Date: January 14, 2018, by 4:00 p.m.**
- All proposals received after the due date will not be reviewed, and will be returned to the agency.**

Submit an original and 10 copies of the proposals and all necessary supporting documentation to:

Lisa Matthews, M.B.A, MomsFirst Project Director  
 Cleveland Department of Public Health  
 75 Erieview Plaza  
 Cleveland, Ohio 44114

All questions involving this request for proposals should be addressed to:

Lisa Matthews, M.B.A, MomsFirst Project Director  
 Cleveland Department of Public Health  
 75 Erieview Plaza  
 Cleveland, Ohio 44114  
 (216) 664-4281  
 Email: lmatthews@city.cleveland.oh.us

## TECHNICAL ASSISTANCE

Two technical assistance sessions for potential applicants will be held at the Cleveland Department of Public Health, 75 Erievue Plaza, Cleveland, Ohio 44114 on **December 4, 2018 at 9:00 a.m. – 10:30 a.m. and December 7, 2018 at 1:30 p.m. – 3:00 p.m.**

RSVP to Lisa Matthews at 216-664-4281 or [lmattews@city.cleveland.oh.us](mailto:lmattews@city.cleveland.oh.us), indicating which technical assistance session you will be attending. The 90-minute session will utilize a question and answer format.

The following documents will be made available at the technical assistance sessions (or by request, following the TA sessions):

- MomsFirst Best Practices Manual
- Audit Tool
- At-A-Glance Procedures Checklist
- Monthly Compliance Report
- Sample contract

<b>QUALIFICATIONS OF APPLICATIONS</b>
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Applicant agencies must meet the following minimum requirements:

- The applicant must serve City of Cleveland residents.
- Applicants must be not-for-profit, tax exempt organizations as determined by Section 501(c) 3 of the Internal Revenue Code, with a current, valid letter of exemption.
- Grant funds are provided on a reimbursement basis. Agencies must have the ability to provide initial revenue for program costs.
- Applicant agencies must demonstrate at least two years successful expertise in proposed program area.
- Applicant agencies must be registered in SAM (System for Award Management) and provide the agency's DUNS (Data Universal Numbering System) number.

## PROGRAM STRUCTURE

Over the past 27 years, the MomsFirst Project has demonstrated a successful community based intervention to reduce poor birth outcomes. Through this RFP, the City of Cleveland will replicate the core services of this model. Existing MomsFirst providers that apply for funds to maintain their staff will be expected to continue to adhere to the model's structure. New providers will be required to implement and adhere to all components outlined below.

MomsFirst is administered with a heavy performance based decision making management philosophy (i.e. quarterly internal and external audit processes, monthly compliance reports, etc.) and all subcontracting agencies must operate within a common model, regardless of the setting of their services.

### Staffing

- MomsFirst subcontracts with agencies which, in turn, employ Community Health Workers (CHWs) who directly provide the Project's core services to program participants. At each site, CHWs are supervised by a Case Manager (See Attachment B for full position descriptions). CHWs are professionals (must have a minimum of an Associate's Degree) trained to conduct outreach and home visiting among high-risk populations. CHWs must complete Community Health Worker certification classes within the first year of employment, paid for by the grant (funding permitted). Case Managers provide weekly review of CHW activities and monthly review of each participant's needs.
- Case Managers and CHWs at each subcontractor engage community participants for community health education events at least six times per year.

### Participant Enrollment and Caseload Requirements

- Maintain a minimum caseload of 30 participants per CHW. New CHWs will have 90 days following a 3-week orientation/onboarding process to reach the caseload minimum of 30 participants. CHWs with caseloads that fall to below 95% for one month will be out of compliance. Two consecutive months out of compliance can be cause for financial penalty.
- All new enrollments will be high-risk pregnant women, with the exception of women that have experienced a fetal or infant loss. High risk status is determined by the completed MomsFirst Risk Assessment.
- The enrollment goal is that 70% of new enrollments will be in their first trimester and 30% in their second trimester.
- In person contact with the mother and newborn is required within 30 days of birth.
- For the specialized adolescent and jail component, MOUs with Cleveland Metropolitan School District (CMSD) and the Cuyahoga County Jail must be established and maintained. Participants will be recruited from these entities and services will, in part or in full, be provided on their premises.

### Case Management

- Case Manager shall provide case management supervision and consultation to all CHWs. The Case Manager is ultimately responsible for the provision of service to all of the participants involved with the agency.
- Case Manager shall formally review each participant's record once a month in the form of a record review with the CHW.
- Case Managers shall introduce themselves and provide contact information via phone contact to each participant within the first 30 days of enrollment. This contact shall be documented in the data system. If no phone is available, the Case Manager shall contact the participant in-person.
- CHW shall complete the administration of Healthy Start Screening Tools as required. At enrollment, Demographic, Pregnancy History and Prenatal (or Preconception if enrolling with a recent loss) Screening Tools will be administered. A Postpartum Screening Tool will be administered within 30 days of the birth. A Parenting Screening Tool will be administered when baby is 6, 12, and 18 months old.
- CHW shall perform three Edinburgh Perinatal Scale of Depression screenings with all participants (one prenatally between 24 and 26 weeks, one at 6 weeks post-partum and one at 12 weeks post-partum). Potential Risk screenings will be administered as determined by CHW or the Healthy Start Screening Tools.
- CHW shall assist participant with developing a service plan (one short-term and one long-term goal). CHW shall review service plan quarterly, noting progress on achievement of action steps for each goal.
- CHW shall perform two Ages and Stages Questionnaires (ASQ) with all participants and their children (one at the child's 4<sup>th</sup> and 16<sup>th</sup> month of life). In addition, CHW will perform the Ages and Stages Questionnaire Social Emotional (ASQ:SE) at 12 months. Participants who score low on the ASQ or high on the ASQ:SE will be referred to Bright Beginnings for further assessment. The Community Health Worker will assist and support the participant's Bright Beginnings assessment. The Community Health Worker will transition participants needing services to Bright Beginnings. Participants not assessed to need intervention services will continue with MomsFirst until age 18 months.
- CHW shall identify psychosocial needs of all project participants. This includes making referrals or providing center based services to meet the participant's needs.

MomsFirst is also committed to providing fatherhood supportive services and will require that the father of the child be offered service referral through and with the support of the mother.

- Partners for a Healthy Baby curriculum will be used for visit planning and standardized health education. Nurturing Parenting and Breast for Success curricula will be used for parent education and support.
- Baby Basics education and materials shall be offered all pregnant participants at enrollment that are 6 weeks or more from expected date of delivery.
- CHW and Case Manager shall utilize the MomsFirst Best Practices Manual to ensure delivery of all MomsFirst services.

#### Participant Contact Requirements

- CHW shall successfully make at least two in-person contacts plus one meaningful telephone call with participants per month. Attempted in-person contacts can count towards the contact requirement.
- CHW shall see the infant at least once per month. All services and contacts to infants are documented through their mother's record.
- Once the child reaches the age of one year, the Case Manager and participant can agree to scale down the frequency of monthly in-person contacts from two to one with one telephone call. The CHW shall see the child at least once every 60 days between 12 and 18 months.
- All participant contacts and case activity must be documented in the Well Family System by the end of the following business day.

#### PROGRAM REQUIREMENTS

- Funded agencies must submit monthly fiscal reports for reimbursement and programmatic reports outlining performance and outcomes. Reports must be submitted to the Cleveland Department of Public Health. Reimbursement will be withheld from agencies that do not adhere to the reporting requirements; contracts may be terminated.
- CDPH shall require any and all of its subcontractors to procure, maintain, and pay premiums for the insurance coverages and limits of liability outlined below with respect to products, services, work and/or operations performed in connection with this Contract.

(a) **Worker's Compensation Insurance** as statutorily required by the State of Ohio.

For Contractors with employees working outside of Ohio, Worker's Compensation Insurance as required by the various state and Federal laws as applicable including Employers' Liability coverage.

(b) **Commercial General Liability Insurance** with limits of liability not less than:

\$1,000,000 each occurrence bodily injury & property damage;  
 \$1,000,000 personal & advertising injury;  
 \$1,000,000 general aggregate;  
 \$1,000,000 products/completed operations aggregate.

Such insurance shall be written on an occurrence basis on the Insurance Services Office (ISO) form or its equivalent.

**Business Automobile Liability Insurance** covering all owned, non-owned, hired, and leased vehicles. Such insurance shall provide a limit of not less than \$1,000,000 combined single limit (bodily injury & property damage) each accident;

Such insurance shall be written on an occurrence basis on the Insurance Services Office (ISO) form or its equivalent.

(c) **Professional Liability Insurance/Errors & Omissions Liability Insurance** providing coverage for claims arising out of the provision of design, architectural, engineering, consultants, counselors, medical professionals, legal and/or **other** professional services with a limit of liability not less than:

\$1,000,000 per claim;  
\$2,000,000 aggregate.

(d) **Cyber Risk Insurance** for all vendors who provide software development and installation, or the storage of, hosting of, use of or access to County data. This coverage shall respond to privacy and network security liability claims with limits of liability not less than:

\$1 million per claim;  
\$1 million per aggregate.

- All grant funded agencies will be required to use a web based data system called the Well Family System (WFS). The technology standards required by WFS are as follows:
  - 1 GHz processor or higher, 1 GB RAM (recommend 2 GB or higher)
  - Windows 7 or higher, Internet Explorer 9.0 or higher (recommend Internet Explorer 10 or 11). Note: WFS only supports Internet Explorer browser 9 and higher.
  - Up-to-date anti-virus, spyware, and malware protection
  - Broadband internet connection for all users (2Mbps download or higher recommended speed)
  - 1024 x 768 or higher resolution
  - JAVA enabled (this is usually the default setting)
  - Popup blocker disabled for <http://www.gobeyondllc.com> and <http://www.gbcmc.com>
  - White list the domains gobeyondllc.com and gbcmc.com
- The web based data system is the record of note for all case activity. Each program staff person is responsible for entering his or her own case work. Funded agencies are responsible for securing and maintaining the computer systems needed to access the

data system. All program staff must have email access. Reimbursement will be withheld from agencies that do not adhere to the documentation requirements; contracts may be terminated.

- Funded agencies will be required to send all project staff to standardized health education trainings. Workshops will be arranged by the Cleveland Department of Public Health at no cost to the agency. Reimbursement will be withheld from agencies that do not adhere to the workshop requirement; contracts may be terminated.
- All Funded agencies will be required to attend monthly meetings. Meeting times will be scheduled during the MomsFirst Orientation Meeting. The intent of the monthly meetings is to assist agencies in forging community collaboration, in addition to building the general capacity of funded agencies.
- Award recipients will be required to participate in on-going site visits to discuss performance and provide demonstration of program activities.

<b>PROPOSAL COMPONENTS</b>
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**Goal**

The primary goal of this RFP is to identify two agencies to subcontract with to provide MomsFirst services. One agency will have a staff of one Case Manager, one Licensed Social Worker (Jail Component) and three Community Health Workers (Adolescent Component). One agency will serve the selected east-side neighborhoods named above.

**Objectives**

1. To identify and enroll, through community outreach, women and families at risk of experiencing poor birth outcomes in the identified underserved areas of need.
2. To provide evidence-based services in communities underserved by the existing perinatal health network.
3. To increase the screening for perinatal depression and developmental delays in the City of Cleveland.
4. To foster father involvement in programs/services in the lives of children.
5. To build and promote natural systems of support for pregnant and then parenting women and families.
6. Deliver services utilizing a culturally appropriate approach.

**Outcomes**

1. Provide all required health education topics using standardized curricula.
2. Provide Peer Advisories in 8 CMSD high schools and Baby Basics Moms Clubs in Cuyahoga County Jail (specialized component only) and include mandatory education topics. Or, provide six community-based health education sessions annually.
3. Offer child development screening to all participants at designated intervals.
4. Raise community awareness about perinatal depression and infant mortality.
5. See Attachment A for Federal Performance Measures.

**Work Schedule**

On or about April 1, 2019-March 31, 2024 based upon performance and the availability of funds.

PROPOSAL COMPONENTS
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Each proposal must contain the following format and content requirements. Failure to do so will result in exclusion from the funding process.

### Content

1. Agency programs must have two years of successful experience providing case management services to the adolescents and/or women and families in the communities they intend to serve. This experience must include the use of risk assessment tools, case planning, an understanding of community resources as well as the county wide social service system, support for the rights of participants and the confidentiality of their involvement and information, documentation standards, and staff supervision.
2. Proposals must document previous and current experience in working with the target population, particularly as these relate to culture-specific norms, values, and realities of the target population.
3. Agencies must have participant recruitment outreach experiences that focus on neighborhood canvassing and establishing relationships with community institutions and businesses such as supermarkets, shopping areas, social service agencies, beauty salons, and churches.
4. Proposal must identify what specific communities are to be served (all of the east-side neighborhoods listed on page 2 **OR** specialized adolescent and jail component).
5. Proposals must identify at least two collaboration or partnerships experiences with other agencies involved with maternal and child health and/or other community based health promotion.
6. Programs must demonstrate the capacity to manage decentralized data entry and identify their current internal technical support resources.
7. Begin each section of the narrative on a new page. Limit your answer to the amount of space specified for that particular section of the narrative.
8. Remove staples from all supporting documentation, including financial statements.
9. **Deadline extensions will not be granted for any reason. No faxes or emails will be accepted.**

## Format

Cover Page 1 page maximum

- Name and address of the applicant agency.
- Phone, fax numbers, and email address of the applicant organization.
- Name and title of contact person.
- Year of Proposed Project: 2019-2024

Abstract 1 page maximum

- Name of the applicant agency
- Address of applicant agency
- Name of agency Executive Director
- Contact phone numbers (voice, fax)
- Email address
- Website address (if applicable)
- Intended population agency proposes to serve (all of the east-side neighborhoods listed above OR specialized adolescent and jail component)

Agency Capacity 2 page maximum

- A description of the agency including a concise explanation of the agencies capacity to carry out the proposed project
- Identify other agency services and programs that will support the needs of the participant and her family. Special attention should be given to the provision of basic needs activities such as food centers, housing assistance, job training, and education support, as well as other supportive services such as day care, mental health counseling, and health promotion programs.

Target Population Description 3 page maximum

- Agency's qualification and prior experience working with the target population.
- Description of how program participants will be identified. What outreach is proposed or in place to attract members of the target population?

Program Narrative 5 page maximum

- Description of how the staffing structure (one Case Manager and 4 CHWs) fits within the agency's existing organizational structure.
- Description of collaboration with area agencies providing services that address the social determinants of health.
- Description and identification of the agency's current or historical provision of case management services. Discuss experiences providing maternal and child health programs.
- Description of how the agency engages the target population (and/or community) to inform programming and service delivery.
- Description of agency programming that addresses racial disparities and/or trainings staff have participated in regarding racial equity.

## Budget and Budget Narrative

- A line item budget must account for all costs (including in kind costs and outside grants) that contribute to the maintenance of the proposed project using Budget Forms 1-2.
- An accompanying budget narrative should be submitted explaining each line item in detail, and describing how the amount requested was calculated.
- Budgeted amounts for salary must reflect a minimum \$15/hour wage (or \$31,200 equivalent annual salary) for Community Health Workers and a minimum \$20/hour wage (or \$41,600 equivalent annual salary) for Case Manager.

Reviewers will be evaluating the budget based on the following questions:

- Does the budget reflect the total cost of the proposed program, including in-kind costs?
- Does the applicant appear to have the ability to realistically provide the listed in-kind costs?
- Does the budget justification provide a basis for the program proposed and the number of individuals targeted?
- Does the requested funding account for more than 50% of the agency's total operating budget for the project year? Is the request reasonable?
- Are detailed provisions for the timely hiring of staff included? Is the level of supervisory staff and administration consistent with the scope of work and 3% administrative overhead?

## Supplemental Materials

- Assurances that the applicant will implement the project structure as identified in this RFP, including the use of the Position Description(s) for all project staff. If the project will use existing staff of the applicant organization, resumes/qualifications of these staff members should be included in the application.
- IRS Letter of Exemption: A copy of the applicant organization's IRS letter of exemption should be included with the proposal.

Letters of Support:

- Two letters from a collaborative partner for community based programs or services
- One letter from past or current funder

REVIEW CRITERIA
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Applications meeting the minimum requirements will be reviewed and evaluated in the following areas:

Cover Page and Abstract	5 points maximum
Agency Capacity	20 points maximum
Target Population Description	20 points maximum
Program Narrative	25 points maximum
Budget Narrative	20 points maximum
Supplemental Materials	5 points maximum
Letters of Support (3)	5 points maximum

APPLICATION CHECKLIST
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Make sure that the application is complete before it is submitted by checking the following list:

Proposal

- Cover Page
- Abstract
- Target Population Description
- Program Narrative
- Budget Narrative

Supplemental Requirements

- Budget Forms 1-2
- Agency Non-Contact Reviewer Agreement
- Acknowledgement of Insurance Requirements
- Registration with SAM & DUNS Number
- IRS Letter of Exemption
- Letters of Support (3)

BUDGET FORM 1

Name of Project \_\_\_\_\_

Applicant Agency \_\_\_\_\_

Personnel		Hours Per Week on Project	Source of Project Funds		
Name	Position Title		Grant Funds*	Other Funds**	Total Project Costs
SUBTOTAL PERSONNEL					
FRINGE BENEFITS Insurance Social Security Retirement Disability Medical Dental					
TOTAL PERSONNEL					

\* These are grant monies, which are being requested.

\*\* These are monies outside the grant process which will help pay for the project (e.g. in-kind, or matching funds from another grantor, foundation, or the agency).

## BUDGET FORM 2

Name of Project \_\_\_\_\_ Applicant Agency \_\_\_\_\_

Category	Grant Funds	Other Funds	Total Project Costs
TOTAL PERSONNEL (from prior page)			
Consumable Supplies			
Medical/Lab			
Office			
Educational			
Postage			
Travel			
Per diem			
Lodging			
Registration Fees			
Local Mileage			
Space Rent			
Utilities			
Contractual Services (Accounting Fees & Audit Fees)			
<u>Other Expenditures</u>			
Communications (Phone)			
Printing/Photo Coping			
Consortium Development			
Maintenance and Repairs			
TOTAL BUDGET			

**Table should be amended as needed to include all applicable program costs.**

### Agency Non-Contact Reviewer Agreement

I, \_\_\_\_\_, an authorized representative of  
(Name)

\_\_\_\_\_, agree that the employees,  
(organization name)

board members, their spouses, and any person negotiating on behalf of the organization is prohibited from contacting any member of the proposal review committee before, during, and after the review process for the sole purpose of discussing our agency's or another agency's application. I understand that such contact will result in the termination of our application and suspension of consideration of our proposal in this funding process.

\_\_\_\_\_  
(Print name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

### Acknowledgement of Insurance Requirements

I, \_\_\_\_\_, an authorized representative of  
(Name)

\_\_\_\_\_, agree that the organization carries  
(organization name)

all of the insurances required for CDPH subgrantees at or above the minimums indicated in this RFP.

- Worker's Compensation Insurance
- Commercial General Liability Insurance
- Business Automobile Liability Insurance
- Professional Liability Insurance/Errors & Omissions Liability Insurance
- Cyber Risk Insurance

\_\_\_\_\_  
(Print name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

### Registration with SAM & DUNS Number

\_\_\_\_\_ is registered with SAM (System for Award  
(organization name)

Management). The DUNS (Data Universal Numbering System) number is

\_\_\_\_\_.

\_\_\_\_\_  
(Print name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

Attachment A  
Healthy Start Benchmarks

- i. Increase the proportion of HS women and child participants with health insurance to 90 percent (reduce uninsured to less than 10 percent).
- ii. Increase the proportion of HS women participants who have a documented reproductive life plan to 90 percent.
- iii. Increase the proportion of HS women participants who receive a postpartum visit to 80 percent.
- iv. Increase proportion HS women and child participants who have a usual source of medical care to 80 percent.
- v. Increase proportion of HS women participants that receive a well-woman visit to 80 percent.
- vi. Increase proportion of HS women participants who engage in safe sleep practices to 80 percent.
- vii. Increase proportion of HS child participants whose parent/ caregiver reports they were ever breastfed or pumped breast milk to feed their baby to 82 percent.
- viii. Increase proportion of HS child participants whose parent/ caregiver reports they were breastfed or fed breast milk at 6 months to 61 percent.
- ix. Increase the proportion of pregnant HS participants that abstain from cigarette smoking to 90 percent.
- x. Reduce the proportion of HS women participants who conceive within 18 months of a previous birth to 30 percent.
- xi. Increase proportion of HS child participants who receive the last age-appropriate recommended well child visit based on AAP schedule to 90 percent.
- xii. Increase the proportion of HS women participants who receive depression screening and referral to 100 percent.
- xiii. Increase proportion of HS women participants who receive intimate partner violence (IPV) screening to 100 percent.
- xiv. Increase proportion of HS women participants that demonstrate father and/or partner involvement (e.g., attend appointments, classes, etc.) during pregnancy to 90 percent.
- xv. Increase proportion of HS women participants that demonstrate father and/or partner involvement (e.g. attend appointments, classes, infant/child care) with their child participant to 80 percent.
- xvi. Increase the proportion of HS child participants aged <24 months who are read to by a parent or family member 3 or more times per week to 50 percent.
- xvii. Increase the proportion of HS programs with a fully implemented Community Action Network (CAN) to 100 percent.
- xviii. Increase the proportion of HS programs with at least 25 percent community members and HS program participants serving as members of their CAN to 100 percent.
- xix. Increase the proportion of HS programs who establish a QI and performance monitoring process to 100 percent.

## Attachment B

## Position Descriptions

**Job Description**

**Title:** Community Health Worker

**Supervisor:** Case Manager

**Overview:** Provide ongoing home visiting, assessment, education and support to at least 30 women at risk of a poor birth outcome.

**Responsibilities:**

- Provide community-based outreach and participant recruitment to high-risk pregnant women in need of perinatal and infant health care and supportive services.
- Assist participants to develop individualized service plans.
- Carry out case management activities including: monthly home visitation, risk assessment, service referral and follow-up, resource distribution, timely documentation, and case file maintenance.
- Provide education on topics, such as breastfeeding, family planning, safe sleep and birth spacing.
- Administer the Edinburgh Perinatal Depression Scale to program participants at pre-determined intervals and as needed/indicated.
- Administer the Ages and Stages Questionnaire with program participants and their children at pre-determined intervals.
- Attend and complete all required trainings and continuing education programs.
- Assist in securing participant involvement in program events, meetings and activities.
- Maintain accurate and up-to-date documentation on all participant activity.
- Participate in ongoing training/staff development.

**Qualifications:**

An Associate's Degree in Social Work or related field is required, but a Bachelor's Degree in Social Work or a related field is preferred. Community Health Worker certification is preferred (and required within a year of hire, if funding is available). Must be knowledgeable of community health and social service resources and have at least two years of outreach, case management, or home health care experience. Must be able to use a computerized data system. Valid driver's license and dependable transportation is required.

## Attachment B

## Position Descriptions

**Job Description**

**Title:** Case Manager

**Supervisor:** Center Director/Program Manager

**Overview:** Supervise Community Health Workers and, if necessary, carry out MomsFirst core services for program participants. Manage and review all participants' case files. Lead health education activities within a community setting. Attend all required administration meetings and complete necessary reports.

**Responsibilities:**

- Manage community-based outreach and participant recruitment activities to high-risk pregnant women in need of perinatal health care and supportive services.
- Oversee the development of individualized care plans for every participant.
- Provide supervision of Community Health Workers on a weekly basis, including review of case management activities such as: compliance with monthly home visitation standards, frequency of Screening Tools, identification of service referrals, timely documentation, and distribution and allotment of incentive items and resources.
- Complete quality assurance audits of case files on a quarterly basis.
- Direct the development and provision of community consortia events and other community-based health education activities.
- Develop and maintain rapport with community stakeholders including other health and social service providers, resident advocates, and faith-based institutions.
- Attend and complete all required trainings and continuing education programs.
- Ensure all documentation of participant activity is accurate and up-to-date.
- Complete monthly and quarterly reports.
- Attend required meetings.
- Assist with special projects to maximize program resources and enhance system efficiencies.
- Assist with recruitment and service delivery, as needed.

**Qualifications:**

A Bachelor's Degree in Social Work or a related field is required, and a Master's Degree in Social Work or a related is preferred. Must be knowledgeable of community health and social service resources and have three – five years of outreach, case management, or home health care experience. Prior supervisory experience is required. Must be able to use a computerized data system. A working knowledge of the issues relating to racial health disparities is preferred. A valid driver's license and dependable transportation is required.