



CITY OF SAN ANTONIO
METROPOLITAN HEALTH DISTRICT

Healthy Start Contract Amendments for Program Evaluation, Monitoring and Quality Improvement

Presented by: Dr. Colleen M. Bridger, Director

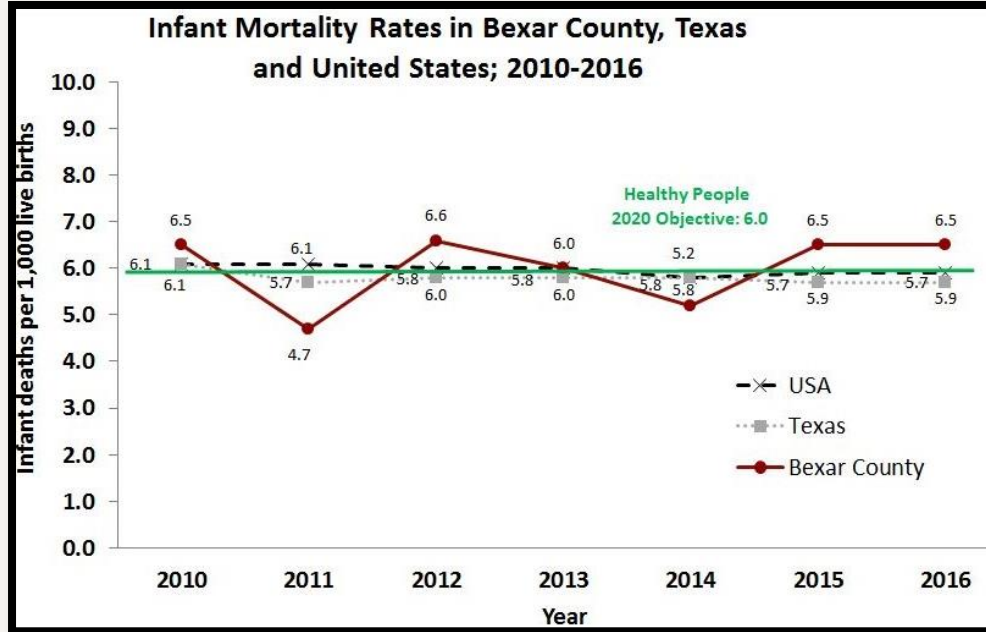
Agenda Item #21

August 16, 2018



Background

Infant Mortality Rates



- The purpose of the Healthy Start program is to engage communities in an effort to reduce infant mortality where rates are over one and a half times the national average
- Targeted areas span parts of Districts 1, 2,3,4,5, 6 and 7
- Jon Meyer Evaluation and UT Health are valuable partners with the historical knowledge to provide continuity in these areas

Infant mortality rate by census tract 2007-2009

Significant disparities in IMR exist, evaluation is critical!



Background

Healthy Start's Five Strategic Approaches:

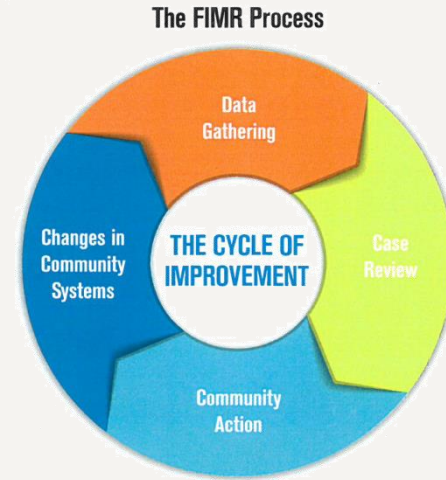
1. Improve women's health before, during, and after pregnancy
2. Promote quality services
3. Strengthen family resilience
4. Achieve collective impact
5. Increase accountability through quality improvement, performance monitoring, and evaluation
 - Surveillance, quality improvement, and evaluation are critical to planning and measuring success of the Healthy Start program and community action interventions





Background

- As a level three grantee, Metro Health's Healthy Start program is responsible for operating a Fetal Infant Mortality Review (FIMR)
- FIMR and Maternal Morbidity and Mortality Review (MMMR) allow for comprehensive study of individual cases of mortality and morbidity in order to identify and address local risk factors of poor pregnancy outcomes
- FIMR and MMMR are community-based, action-oriented processes that examine fetal, infant and maternal deaths through clinical abstraction and maternal and family interviews, determines preventability, and engages communities to take action
- UT Health provides the skilled abstractors who perform the records review, family interviews and summary presentation that are core tasks of FIMR and MMMR operations. Jon Meyer also serves as an active attendee at both review teams, providing a valuable linkage across evaluation functions



STEPS IN FIMR

Death Occurs



Cases Selected



Data abstracted



CRT reviews & recommends



CAT proposes & takes community action



Improved health



Fiscal Impact

- Funding Amount: Total \$98,498
 - Jonathan Meyer: \$48,500
 - UT Health: \$49,998
- Amendment: To extend the term for another grant year, April 1, 2018 through March 31, 2019 and increase compensation accordingly
 - Jonathan Meyer: \$24,999 to \$48,500
 - UT Health: \$24,999 to \$49,998
- There is no impact to the General Fund



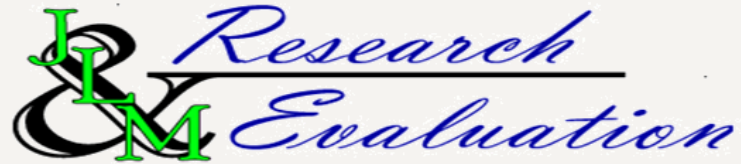
Recommendation



UT Health

San Antonio

School of Nursing



Staff recommends approval of the
amendments with Jonathan Meyer and
UT Health