PE-42 Summary of Proposed Changes

1.30.19

Wording changes (attempt to clarify, align services and funding) so that MCAH Services are now consistently described as:

* Title V MCH Block Grant Services
* Perinatal, Child and Adolescent Health General fund Preventive Health Services
* Oregon Mothers Care (OMC) Services
* MCH Public Health Nurse Home Visiting Services (Babies First!, Family Connects, Nurse Family Partnership)

Addition of an equity requirement (bottom of page 2): *MCAH Services must be implemented with a commitment to racial equity as demonstrated by the use of policies, procedures and tools for racial equity and cultural responsiveness.*

Changes to MCH PHN Home Visiting Services Procedural and Operational Requirements (beginning bottom of page 5):

* Elimination of Maternity Case Management (MCM) Services and addition of Family Connects Services
* Addition of Babies First! staffing requirements:
  + *B1st! Services must be delivered by or under the direction of a RN/PHN. Minimum required staffing is .5 FTE RN/PHN with a required minimum caseload of 20. RN/PHN BSN staff are preferred but not required.*
  + *If a local program is unable to meet the minimum staffing or caseload requirement, a variance request, completed in consultation with an MCH Nurse Consultant and approved by an MCH Section manager, must be in place.*
* Babies First! activities and services now reference Program Guidance (rather than describing specific requirements in PE)
  + *Services must be delivered in accordance with Babies First! Program Guidance provided by the Maternal and Child Health Section.*
* Addition of language around cross County collaboration regarding home visiting
  + *If a local Babies First!/Family Connects/NFP program is implemented through a cross county collaboration with shared staff across jurisdictions a subcontract and/or Memorandum of Understanding must be in place defining the supervision agreements*
* Addition of language on nursing practice (page 6):
  + *All PHNs working in the Babies First!, Family Connects, or Nurse Family Partnership programs must adhere to nursing practice standards as defined by the Oregon State Board of Nursing.*
* Change in EHDI language to notifications (bottom of page 6):
  + *B1st!/Family Connects/NFP Services must receive notifications made by OHA for Early Hearing Detection and Intervention as described in ORS 433.321 and 433.323 and report back to OHA on planned follow-up.*

Change in language around data collection for MCH PHN Home Visiting (page 7):

* *For all individuals who receive MCH PHN Home Visiting Services, LPHA must ensure that Supervisors and Home Visitors collect required data on client visits and enter it into the state-designated data system in a timely manner that is aligned with expectations defined by each program and within no more than thirty (30) business days of visiting the client and 45 days of case closure.*