Executive Summary Center on Urban Poverty and Community Development Case Western Reserve University

Background/Purpose:

Authorizing the Director of Public Health to enter into one or more contracts with The Center on Urban Poverty and Community Development at Case Western Reserve University to provide evaluation services for the MomsFirst Project.

MomsFirst is a program designed to reduce disparities in infant mortality in the City of Cleveland utilizing three approaches: 1) improve women's health, 2) improve family health and wellness, and promote systems change. All high risk City of Cleveland pregnant women are eligible for enrollment into the program.

The scope of work builds upon past evaluation activities, the existing data infrastructure, and current needs to support effective programmatic decision-making. Collectively, this work will expand the ability of MomsFirst to document its impact, inform program improvement processes and outcomes, and effectively plan to meet the needs of infants and their families in the City of Cleveland. The Center will work closely with MomsFirst staff to execute the evaluation.

These evaluation activities will be carried out through regular engagement with MomsFirst staff via:

- Regular Project Meetings CWRU proposes to meet with MomsFirst staff monthly during the funding period.
- Interim Presentations and Annual Reporting CWRU will provide biannual updates to the Executive Council each year on program performance.
- Quality Improvement Plan CWRU agrees to provide input to MomsFirst's annual Quality Improvement Plan and Annual Report in regard to measures and measurement plan, process and activities, analysis of results and recommendation for corrective action plans.
- Local Evaluation Report CWRU will provide analyses required to ensure the MomsFirst program is improving birth outcomes for mothers and infants served by the program.
- In-depth analysis of individual client-level social determinants of health factors and their association with program receipt and birth outcomes.

Contract Amount: \$89,000.00

Term: April 1, 2020 to March 31, 2021

Funding Source: 2020 General Fund

Center on Urban Poverty and Community Development Case Western Reserve University April 1, 2020 to March 31, 2021

BUDGET

Personnel Costs	\$55,988.00
Fringe Benefits	\$17,928.00
Other Direct costs	\$250.00
Subtotal Direct Costs	\$74,166.00
Subtotal Direct Costs Indirect Costs	\$74,166.00 <u>\$14,834.00</u>

Center on Urban Poverty and Community Development



Sponsor: City of Cleveland Department of Public Health

Project Period: April 1, 2020-March 31, 2021

Project: Evaluation of MomsFirst

Amount: \$89,000

The Cleveland Department of Public Health's MomsFirst Project is a long-standing, community-based, voluntary, home-visiting intervention designed to reduce the significant disparities in perinatal health experienced by African Americans in the City of Cleveland. The program's goal is to positively influence the current pregnancy, promote birth spacing, and plan for future healthy pregnancies. MomsFirst Community Health Workers (CHWs) recruit pregnant women, including teens and incarcerated women, who are at highest risk for poor birth outcomes. Participants receive case management, education on such topics as prenatal care, substance use, breastfeeding, family planning, and safe sleep, screening and assessment, and referrals to community agencies for issues that require more intensive services. MomsFirst CHWs can serve pregnant women and their families in their homes or other community-based settings twice a month until their child turns two years old.

Evaluation

The Center on Urban Poverty and Community Development (the Center) at Case Western Reserve University (CWRU) is submitting this scope of work to perform evaluation services for the MomsFirst program. The scope builds upon past evaluation activities over the 2014-2019 period, the existing data infrastructure, and current needs to support effective programmatic decision-making. Collectively, this work will expand the ability of MomsFirst to document its impact, inform program improvement processes and outcomes, and effectively plan to meet the needs of infants and their families in the City of Cleveland.

The Center will work closely with MomsFirst staff to execute the evaluation. MomsFirst has some data management and analysis capacity that allows them to undertake internal evaluation and quality improvement activities. The Center will work with MomsFirst to meet their data needs for internal program management and external data reporting. Their web-based data system allows CHWs to manage their caseloads and enter individual-level client data in real time. MomsFirst has a centralized data management function providing oversight on the quality, completeness and timeliness of data entered by CHWs, and the ability to run regular reports on client processes and outcomes.

Using data from the MomsFirst Well Family System, the focus of the evaluation will be on gauging the effectiveness of the MomsFirst program in producing the intended client-level outcomes for mothers and infants served by the program. Priority outcomes include the prevention of low birthweight and premature births and infant mortality. In addition to examining the characteristics of families served and the dose of services received, prenatal maternal behaviors and post-delivery positive parenting practices will also be assessed to gauge the extent to which mothers are engaging in the practices promoted through the program.

The evaluation plan makes use of a unique proprietary data system maintained by the Center at CWRU – the ChildHood Integrated Longitudinal Data (CHILD) system. The CHILD system is an example of an Integrated Data System (IDS), and these systems are increasingly recognized as vital tools for making human services more effective and efficient. IDSs are needed because governmental and nonprofit agencies serving children and families routinely gather administrative records. These records are often used internally to describe patterns of service utilization, risk factors, costs and outcomes, but individuals who use agency programs often utilize other programs at the same time, and traverse various systems as they move along in their development. In order to see larger systemic patterns of usage and to recognize opportunities for effectiveness and efficiencies, data need to be integrated, accessible and protected.

The CHILD system obtains individual record extracts from many agencies and sources and uses probabilistic matching techniques to link the records across time and systems. This creates a deduplicated file of longitudinal records for individual children in the county. All of the data in the CHILD System are held in a highly secure research environment (SRE) maintained by CWRU and only programmers trained in the protection of confidential data are allowed to work with the identifiable data. All data are protected in accordance with the laws governing the records of the particular agency (e.g. HIPPA; FERPA, etc.). Each data source and the entire data system operates under a confidentiality and data security protocol approved and overseen by the CWRU Institutional Review Board (IRB). CHILD system data include —

- Birth certificates
 - o Maternal health, education, age
 - o Low birth weight births
- Death certificates
 - o Infant mortality
- Child welfare
 - Abuse/neglect investigations
 - Placements and services
- Public school data
 - o Attendance
 - Kindergarten readiness
 - o Proficiency tests
 - Graduation
- Lead exposure data
- Homeless Services

- Public Assistance Receipt
 - o Medicaid receipt
 - o Food Stamp receipt
 - o TANF receipt
 - o Publicly-subsidized child care
- Program participation
 - o Home visiting services
 - o Special needs child care
 - o Early mental health
 - o Universal pre-k
- Juvenile Justice
 - o Delinquency Filings
- Geo-data
- Neighborhood and environmental conditions

The CHILD system provides the opportunity to analyze birth (and death) outcomes for all MomsFirst clients, including those who disengaged from the program prior to delivery. In such instances, client-level birth (and death) outcomes would remain unknown to MomsFirst. Use of the CHILD System also allows for comparisons of MomsFirst families and similar families who choose not to engage in the program, providing a unique opportunity to better understand factors associated with program uptake and program outcomes. Suitable comparison families can be identified based on risk variables from low-income neighborhoods across the county that were not served by the program.

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- Quality Improvement Planning CWRU agrees to provide input to MomsFirst's annual
 quality improvement planning and Annual Report in regard to measures and measurement
 plan, process and activities, analysis of results and recommendation for corrective action
 plans.

Project organization and management

Personnel

- Rob Fischer, Ph.D. Dr. Fischer, Associate Professor and Co-Director of the Center on Urban Poverty and Community Development, will devote 7% time. He will serve as Principal Investigator for the study and supervise all study activities.
- Beth Anthony, Ph.D. Dr. Anthony, Research Assistant Professor, is Co-Investigator and serves as project lead for the study. She will devote 20% time. She will be a key point of contact for all project activities and coordinate between the faculty leadership, team staff, and program representatives, in carrying out the project.
- Meghan Salas Atwell, Ph.D. Dr. Salas Atwell, Senior Research Associate will serve as key project staff for the evaluation. She will devote 20% time. She will work closely with the faculty leadership and programmer staff to conduct analyses and create reports and presentations based on the analyses.
- Programming Staff The evaluation will use Programmer/Analysts in the conduct of the components of the study (0.55 FTE). A lead programmer will coordinate all technical work on the CHILD system, supervising data acquisition and matching work and supervise relevant staff and students.
- Administrative Support The evaluation will use Center administrative support personnel to support the overall project (10% time). These staff will provide administrative support for all aspects of the study including: purchasing of supplies and software, processing of invoices and travel reimbursements, supervising student workers, providing computer and technology support, preparing PowerPoint presentations, editing and producing reports, conducting mailings, and scheduling meetings.

Non-Personnel Costs

• Local travel (\$250) – Costs for mileage and parking associated with project-related meetings.

Fringe and Indirect Rates

• Fringe benefit rates apply to all personnel expenses (excluding students and contractors). The University's salary fringe rate is 33.0% (effective July 1, 2018). For this contract, the indirect rate charged by the University for overhead expenses is calculated at 20% of total direct costs, well below the University's negotiated federal indirect rate of 60.0%. CWRU includes categories of facilities and administration expenses in the indirect charge according to relevant federal standards (Office of Management and Budget Circular A-21, 2004).

Total Request

The total budget for the proposed scope of work is \$89,000 (\$74,166 direct; \$14,834 indirect).

Organizational Capacity

The Center on Urban Poverty and Community Development was created in 1988 with founding grants from The Cleveland Foundation and the Rockefeller Foundation. The Center, originally known as the Center on Urban Poverty and Social Change, changed its name in 2006 to reflect its expanding work in the area of Community Development. The Center, located within the Jack, Joseph and Morton Mandel School of Applied Social Sciences (MSASS) at CWRU is one of the nation's preeminent university-based poverty research programs. The mission of the Center is to create, apply, and communicate valuable knowledge to a broad range of audiences and constituents concerned with the ultimate goal of reducing the negative effects of urban poverty and enhancing the quality of life in communities. Unlike some academic scholars who appear to view the poor as statistics and urban neighborhoods as laboratories, the Center embraces a participatory approach to research—all of which places primary value on being responsive to the research questions and issues that emerge from the community, and other stakeholders. Nationally, the Center is part of a network of poverty researchers and has good working relationships with other institutes, such as the MDRC, The Brookings Institution, The Annie E. Casey Foundation, the Aspen Institute, and the Urban Institute, where the Center is a founding member of its National Neighborhood Indicators Project. The Center is also a member of the Actionable Intelligence for Social Policy (AISP) network hosted by the University of Pennsylvania.