

**California Department of Public Health
Maternal, Child and Adolescent Division
Black Infant Health Program
Program Standards**

Program Standards for the Black Infant Health (BIH) Program are intended to set clear expectations and provide guidance for program implementation. Adherence to these standards will be central to maintaining program fidelity, and monitoring performance--both for the BIH program overall, and for each Local Health Jurisdiction (LHJ)--with respect to these standards will be key for oversight and accountability. The BIH Program Standards have been defined to create a structure for decisions about day-to-day operations at the local level, with sufficient flexibility to allow site staff to make choices based on local circumstances; the goal is to enhance program effectiveness while maintaining fidelity to the BIH Program.

The Program Standards described in this document have been developed for the BIH Program by the California Department of Public Health/Maternal, Child and Adolescent Division (CDPH/MCAH) in collaboration with the Center for Social Disparities on Health at the University of California, San Francisco, and local BIH Program staff representatives. While attention to key governing concepts (i.e., focusing on approaches that are culturally competent, client-centered and strength- and cognitive-based) will be ongoing, the Program Standards will be updated regularly to remain up-to-date and consistent with the needs of clients and staff, current scientific knowledge, and available resources.

- Program Standards:** *Clearly-defined expectations for carrying out specific aspects of program implementation*
- Program Measures:** *Specific data-based measures used to assess compliance with program standards*
- Reference Level:** *Specific values of each program measure against which LHJ performance can be compared; reference levels are likely to change over time, reflecting actual experiences across BIH LHJs in meeting program standards*

PROGRAM STANDARDS	PROGRAM MEASURES	REFERENCE LEVEL	COMMENTS
GUIDANCE FOR CLIENT ACTIVITIES			
Recruiting clients into BIH			
<p>A. The BIH Program serves pregnant and postpartum African American women ages 18 years of age or older; clients should be enrolled as early as possible during pregnancy. The program has traditionally served primarily low-income women, and will continue to serve women covered by Medi-Cal.</p>	<ul style="list-style-type: none"> ○ Percentage of clients who are African American. ○ Percentage of clients who are 18 years of age or older. ○ Percentage of clients who are enrolled before beginning their 3rd trimester. ○ Prospective clients who are not enrolled will receive a standard health promotion message. 	<ul style="list-style-type: none"> ○ 100% of clients will be African American women; ○ A minimum of 95% of clients will be 18 years of age or older when they enroll in BIH. ○ At least 90% of clients will enroll during pregnancy, and 75% will enroll before their 3rd trimester. ○ All prospective clients who are not enrolled receive a standard health promotion message. 	<p><i>This ensures that every woman receives a minimum of the health message.</i></p>
<p>B. Each LHJ will develop its own site-specific Recruitment Plan for recruiting eligible women into BIH.</p>	<ul style="list-style-type: none"> ○ LHJ has developed Recruitment Plan meeting the P&P requirements; this Plan will be reviewed and revised annually. 	<ul style="list-style-type: none"> ○ 100% of sites will have a local recruitment plan that will be reviewed on an annual basis and updated as needed. 	
<p>C. For every woman who is referred/outreached, an initial attempt at follow-up contact by BIH staff will be made within 72 hours, with a minimum of 3 attempted contacts; recruitment forms will be completed for all referred/outreached women, whether or not successful contact is made.</p>	<ul style="list-style-type: none"> ○ Percentage of referred/outreached women who are followed by BIH staff until successful contact to determine eligibility and/or at least 3 attempts. 	<ul style="list-style-type: none"> ○ 100% of women who are referred into BIH or who receive direct staff outreach will be followed up by BIH staff either to successful contact and/or at least 3 attempts, as evidenced by completion of a recruitment form for each woman. 	<p><i>The 72-hour window corresponds to the State-legislated mandate for SIDS home visiting follow-up.</i></p>

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► Client Intake into BIH			
<p>D. Intake of each recruited and BIH-eligible prospective client will be <i>timely</i> (within 30 days of successful staff follow-up) and <i>complete</i> (completed orientation/consent and 3-part assessment forms and initiated Individualized client plan (ICP)).</p>	<ul style="list-style-type: none"> ○ Percentage of referred/outreached eligible women who <i>complete</i> intake process within 30 days of successful follow-up, including: <ul style="list-style-type: none"> ▪ Complete orientation/consent forms ▪ Complete initial assessment form ▪ Initiate an ICP 	<ul style="list-style-type: none"> ○ A minimum of 80% of eligible recruited women will complete the intake process within 30 days of successful staff contact. ○ 100% of enrolled clients will complete consent/contract and assessment forms and initiate the ICP. 	<p><i>This information will help sites assess (a) whether they are able to meet needs by enrolling eligible and interested women in a timely way, and (b) if not, why. Important for QA, demonstrating need for greater capacity and resources.</i></p>
► Program Participation: Enhanced Social Service Case Management			
<p>E. Every BIH client will receive enhanced case management services, including:</p> <ul style="list-style-type: none"> ○ <i>Throughout her participation in BIH:</i> Development and implementation of the ICP; completing all assessments; ongoing identification of her specific concerns/needs, and referral to services outside of BIH as needed based on her ICP. ○ <i>Prenatally:</i> Development of a personal Birth Plan that includes a breastfeeding plan and interconception plan before she gives birth; assessment and follow-up as needed to ensure that her home is ready for an infant; encouragement to participate in postpartum group sessions 	<ul style="list-style-type: none"> ○ Percentage of clients who receive case management: <ul style="list-style-type: none"> • Percentage of clients with completed all prenatal and postpartum assessments at appropriate time intervals <p><u><i>For each client:</i></u></p> <ul style="list-style-type: none"> • Percentage of referrals that are (1) followed up on (by client/BIH staff) and (2) completed (as evidenced by documented receipt of referral services) • Percentage of prenatally-enrolled clients who complete personal Birth Plans, including plans for infant feeding and family planning. 	<ul style="list-style-type: none"> ○ 100% of clients will receive case management: <ul style="list-style-type: none"> • A minimum of 65% of clients complete all assessments within the recommended time intervals (6 if enrolled prenatally, 3 if enrolled postpartum). <p><u><i>For each client:</i></u></p> <ul style="list-style-type: none"> • Disposition will be tracked on a minimum of 75% of referrals. • 85% of prenatally-enrolled clients complete personal Birth Plans. 	

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<p>(includes information about scheduled postpartum groups). <i>Postpartum:</i> Receipt of Edinburgh Postpartum Depression Screen (EPDS) by 6-8 weeks after baby's birth. Follow-up as needed to ensure that the home is safe and to assess parental bonding/attachment.</p>	<ul style="list-style-type: none"> • Percentage of prenatal clients with completed home assessment and appropriate follow-up • Percentage of postpartum clients who receive the EPDS within 6-8 weeks after giving birth • Percentage of postpartum clients who complete a Life Plan. 	<ul style="list-style-type: none"> • 85% of prenatally-enrolled clients have their homes assessed for infant readiness. • 75% of postpartum clients receive EPDS within 6-8 weeks after giving birth. 	
<p>F. <i>An initial case conference with key staff (i.e. BIH Coordinator, FHA, group facilitators and data entry person) will be conducted on all new clients.</i></p>	<ul style="list-style-type: none"> ○ Percentage of new clients for whom initial case conferencing is conducted. 	<ul style="list-style-type: none"> ○ 100% of new clients receive initial case conferencing. 	
<p>G. All clients reporting drug, alcohol and/or tobacco use at any point in case management process will be provided appropriate health information/counseling.</p>	<ul style="list-style-type: none"> ○ Percentage of clients reporting drug, alcohol and/or tobacco use who are provided appropriate health information/counseling. 	<ul style="list-style-type: none"> ○ 100% of clients reporting drug, alcohol and/or tobacco use will be provided appropriate health information/counseling. 	
<p>► Program Participation: Group Intervention</p>			
<p>H. <i>Every BIH client will participate in the group intervention.</i> Clients who enroll during pregnancy will participate in all 20 group sessions; clients who enroll after giving birth will participate in 10 postpartum group sessions. Exceptions must be clearly documented and meet</p>	<ul style="list-style-type: none"> ○ Percentage of enrolled BIH clients who participate in group sessions; clearly documented reasons for clients who do not participate in groups. 	<ul style="list-style-type: none"> ○ A minimum of 90% of enrolled clients participate in the group intervention; reasons for non-participation are clearly documented for every client who does not participate in group sessions. 	<p><i>This high percentage was chosen to reinforce the importance of the group intervention and to motivate sites to encourage participation.</i></p>

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defined criteria.			
<p>I. <i>Completion of group intervention:</i> Every client will complete both the prenatal and postpartum group intervention (by participating in at least 7 prenatal and at least 7 postpartum group sessions).</p>	<ul style="list-style-type: none"> ○ Percentage of clients who complete both the prenatal and postpartum group intervention <ul style="list-style-type: none"> ● Percentage of clients who complete 7 of 10 prenatal group sessions. ● Percentage of clients who complete 7 of 10 postpartum group sessions 	<ul style="list-style-type: none"> ○ 65% of clients complete both the prenatal and postpartum group. series <ul style="list-style-type: none"> ● 85% of clients enrolled during pregnancy complete 7 of 10 prenatal sessions. ● 75% of clients complete 7 of 10 postpartum sessions. 	
<p>J. <i>Timely initiation of group intervention:</i> Clients must begin their group participation no later than session 3 (prenatal) and session 13 (postpartum).</p>	<ul style="list-style-type: none"> ○ Percentage of clients who begin group participation by session 3 (prenatal) and/or session 13 (postpartum). 	<ul style="list-style-type: none"> ○ 100% of clients begin group participation by session 3 (prenatal) and/or session 13 (postpartum). 	
<p>K. <i>Group size:</i> Each group series will enroll 8-12 clients.</p>	<ul style="list-style-type: none"> ○ Percentage of group sessions at which between 5-8 clients are in attendance 	<ul style="list-style-type: none"> ○ On average, 80% of group sessions will include 5-8 clients in attendance. 	<p><i>This group size reflects the optimal number of participants in attendance at any single group session.</i></p>
<p>► BIH Client Case Closure</p>			
<p>L. Staff will follow the procedures outlined in the P&P for every client closing out of the program, including the following Exit Steps for the client:</p> <ul style="list-style-type: none"> ● Completes a Life Plan ● Completes her ICP ● Completes the Final Assessment Forms 	<ul style="list-style-type: none"> ○ Percentage of enrolled clients who complete the Exit Steps. 	<ul style="list-style-type: none"> ○ A minimum of 65% of clients will complete the BIH Program, as evidenced by completion of the Exit Steps. 	

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<p>M. A Closure Form is completed for every client closing out of the program.</p>	<ul style="list-style-type: none"> ○ Percentage of clients with Closure Forms completed. 	<ul style="list-style-type: none"> ○ 100% of closed out clients have completed Closure Forms. 	
<p>► Location and Staffing</p>			
<p>N. BIH Program client services should be provided at the local program sites whenever possible.</p> <ul style="list-style-type: none"> • At minimum, the clients are required to attend the <i>group intervention</i> sessions at the local site or at the site of a community partner. • Whenever possible, <i>case management</i> appointments should be held at the BIH office to ensure privacy and confidentiality. • The BIH Program does not include mandatory home visiting. If staff does conduct home visits under special circumstances or for required home safety assessments, a safety protocol must be in place. 	<ul style="list-style-type: none"> ○ Percentage of client contacts for group intervention and case management services that occur at the local program site. 	<ul style="list-style-type: none"> ○ 90% of client contact must occur within LHJ. 	

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<p>O. At minimum, each LHJ must have qualified personnel in place to carry out the following required key staffing roles:</p> <ul style="list-style-type: none"> • 1 BIH Coordinator • 2 Group facilitators • 1 FHA • 1 Data entry person 	<ul style="list-style-type: none"> ○ # of key staffing roles at each site that are filled by qualified personnel. 	<ul style="list-style-type: none"> ○ 100% of key staffing roles at site are filled by qualified personnel. 	
<p>P. Personnel responsible for each required staffing role meet the recommended qualifications outlined in the P & P.</p>	<ul style="list-style-type: none"> ○ # of key personnel at each site who meet the recommended qualifications. 	<ul style="list-style-type: none"> ○ 100% of key personnel at site meet the recommended qualifications outlined in the P & P. 	
<p>Q. Key personnel will complete all required trainings; adhere to guidance specified in the P&P; provide required feedback to CDPH/MCAH; and attend required meetings and participate in required capacity building calls.</p>	<ul style="list-style-type: none"> ○ # of key personnel at site who complete trainings; adhere to P&P guidance; provide required feedback; and attend meetings/participate in regularly scheduled calls. 	<ul style="list-style-type: none"> ○ 100% of key personnel at site complete trainings; adhere to P&P guidance; provide required feedback; and attend meetings/participate in regularly scheduled calls. 	
<p>► Client Recruitment</p>			
<p>R. Each LHJ will develop its own site-specific Recruitment Plan that meets the requirements defined in the P&P, including plans and goals for recruitment:</p> <ul style="list-style-type: none"> • <i>source</i> (% of clients recruited through <i>referrals</i> and through <i>direct BIH staff outreach</i>) • <i>effectiveness</i> (% of referred/ outreached women who are BIH-eligible) 	<ul style="list-style-type: none"> ○ LHJ has developed Recruitment Plan meeting the P&P requirements; this Plan will be reviewed and revised annually. 	<ul style="list-style-type: none"> ○ 100% of sites will have a local recruitment plan that will be reviewed on an annual basis and updated as needed. 	

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► Community Linkages and Referrals to Services Outside of BIH			
S. Each LHJ should develop and implement plans to ensure community linkages and effective referrals for services and resources outside of BIH.	<ul style="list-style-type: none"> ○ LHJ has developed a plan for ensuring community linkages and effective referrals in accordance with P & P requirements; this plan will be reviewed and revised annually. 	<ul style="list-style-type: none"> ○ 100% of sites will have a local plan for community linkages and effective referrals that will be reviewed on an annual basis and updated as needed. 	
► Data Collection			
U. Each LHJ should ensure that collection of client and program data (including entry into the BIH MIS, as required) is timely and complete.	<ul style="list-style-type: none"> ○ Percentage of client records into MIS entered within 30 days of collection on paper forms ○ Percentage of clients with required forms used in the BIH Program at exit 	<ul style="list-style-type: none"> ○ 90% of client records are entered into MIS within 30 days of collection on paper forms ○ 90% of clients have all required forms completed at exit. A list of all forms is included in the P & P 	
► Quality Assurance			
V. Each LHJ must develop and implement a QA Plan.	<ul style="list-style-type: none"> ○ LHJ has developed and is implementing a QA plan. 	<ul style="list-style-type: none"> ○ 100% of sites will have QA plans. 	
W. Clients participating in BIH find the experience satisfying.	<ul style="list-style-type: none"> ○ Percentage of Client Satisfaction Surveys completed 	<ul style="list-style-type: none"> ○ A minimum of 75% of clients report being “Somewhat Satisfied” or “Very Satisfied” with their participation in BIH. 	