

Quality and Productivity Commission
34th Annual Productivity and Quality Awards Program
"Leading with Excellence"

2021 APPLICATION

Title of Project (Limited to 50 characters, including spaces, using Arial 12-point font):

NAME OF PROJECT: AAIMM VILLAGE FUND

DATE OF IMPLEMENTATION/ADOPTION: JUNE 30TH 2019

(Must have been fully implemented for a minimum of at least one year - on or before July 1, 2020)

CHECK HERE IF THIS PROJECT IS BEING SUBMITTED FOR THE COVID-19 IMPACT AWARD ONLY. (Projects must be implemented on or before December 31, 2020. **Note:** Projects implemented less than one year ago will not be eligible for any other PQA awards. In addition, once a project is submitted, you cannot submit the same project for awards consideration in subsequent years).

PROJECT STATUS: X Ongoing One-time only

HAS YOUR DEPARTMENT PREVIOUSLY SUBMITTED THIS PROJECT? Yes X No

EXECUTIVE SUMMARY: Describe the project in 15 lines or less using Arial 12 point font. State clearly and concisely what difference the project has made.

1 The African American Infant and Maternal Mortality (AAIMM) Prevention Initiative, led by
 2 the Los Angeles County Department of Public Health, recognizes racism and stress
 3 engendered by racism as root causes of disproportionately high rates of Black preterm
 4 birth and infant deaths. Designed by Black-led community-based organizations, DPH
 5 staff, and private funders, the AAIMM Village Fund is a public-private-community
 6 collaboration that trusts and invests in the work of community members and community-
 7 based organizations to reduce stress and improve birth outcomes for Black families. The
 8 Fund invests small to midsize grants in community members and community-based
 9 organizations' efforts outside of the traditional boundaries of philanthropy or county
 10 funding or what is typically considered health care. The Village Fund proposal review and
 11 selection process is uniquely and completely community-led with county staff and
 12 experienced funders' technical assistance, distributing power and housing decision-
 13 making within the communities to be served. Grantees are invited to be messengers
 14 about the role of racism in Black-white birth outcomes disparities, critical members of the
 15 AAIMM network, and resources of hope for an equitable tomorrow.

BENEFITS TO THE COUNTY

(1) ACTUAL/ESTIMATED ANNUAL COST AVOIDANCE	(2) ACTUAL/ESTIMATED ANNUAL COST SAVINGS	(3) ACTUAL/ESTIMATED ANNUAL REVENUE	(1) + (2) + (3) = TOTAL ANNUAL ACTUAL/ESTIMATED BENEFIT	SERVICE ENHANCEMENT PROJECT
\$12,150,000	\$ NOT YET DETERMINED	\$ N/A	T \$ 12.150.000.	<input type="checkbox"/>

ANNUAL = 12 MONTHS ONLY

SUBMITTING DEPARTMENT NAME AND COMPLETE ADDRESS Dept. of Public Health, 313 N. Figueroa St., Los Angeles, CA 90012	TELEPHONE NUMBER (213) 639-6400
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PROGRAM MANAGER'S NAME Helen O'Connor, MSPH, MA, LES EMAIL hoconnor@ph.lacounty.gov	TELEPHONE NUMBER (323) 440-9822
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PRODUCTIVITY MANAGER'S NAME AND SIGNATURE <small>(PLEASE CALL (213) 893-0322 YOU DON'T KNOW YOUR PRODUCTIVITY MANAGER'S NAME)</small> Catherine Mak, MBA 	DATE 6-25-21	TELEPHONE NUMBER 626-299-4133 CMAK@PH.LACOUNTY.GOV
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DEPARTMENT HEAD'S NAME AND SIGNATURE Barbara Ferrer, MPH, MEd, PhD 	DATE 6/24/21	TELEPHONE NUMBER 213-288-8117
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****ELECTRONIC, WET, OR SCANNED SIGNATURES ARE ACCEPTABLE****

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1st FACT SHEET – LIMITED UP TO 3 PAGES ONLY: Describe the **challenge(s), solution(s), and benefit(s)** of the project **to the County**. What quality and/or productivity-related outcome(s) has the project achieved? Provide measures of success **and specify assessment time frame**. Use Arial 12 point font.

Black infants are three times more likely to die before their first birthday than their white counterparts. The African American Infant and Maternal Mortality (AAIMM) Prevention Initiative, led by the Los Angeles County Department of Public Health, recognizes racism and stress engendered by racism as root causes of this disparity. The AAIMM strategy to address racism as a driver of birth outcome inequality includes major systems change efforts - the advancement of preconceptional and group prenatal care on a countywide basis and a far-reaching media campaign that takes on false narratives blaming the behavior of Black women for adverse outcomes. Simultaneously, our strategy recognizes the important contribution that grassroots efforts have, particularly if engaged as part of a larger whole. The Village Fund allows the AAIMM message to come from trusted community sources and to reach families who may be impacted with tangible, culturally aligned resources to mitigate adverse outcomes, again from trusted sources.

The Village Fund is an innovative grant program that includes public and private funders to award small grants to individuals, organizations, and networks that provide valuable support and services to Black birthing women. The Fund encourages small, even solo operations to apply, overcoming an immense countywide challenge of getting funds to historically under-resourced community agencies that simply do not have the infrastructure to apply for and receive government grants. Many individuals who serve the community have done so through their personal finances and do not have non-profit status. The Village Fund offers fiscal sponsorship through the California Black Women's Health Project for applicants without nonprofit status but with a history of and commitment to serving Black families. The Village Fund works to ensure larger numbers of Black-led agencies become equipped to secure county or philanthropic funding, enabling more equitable distribution of funding in the future and the inclusion of Black voices in decision-making.

A benefit to the county aside from working in concert to reduce the Black/White infant and maternal disparities gap is creating community ambassadors who carry the message of AAIMM and DPH. We accomplish this by including a condition of funding that requires each cohort of grantees to participate in a learning community to receive ongoing training and support for the grant year. The cohorts co-design learning and practice and determine their own capacity/growth-building and organizational learning needs. The LA Partnership for Early Childhood Investment convenes quarterly learning community meetings and offers each participating organization a stipend in addition to their grant award. This was critical to upholding a central value of AAIMM: recognizing and compensating community-based partners in all aspects of their work.

Since the idea was conceived in 2019, DPH and the AAIMM Village Fund planning committee developed its infrastructure, selection mechanisms, and staffing for the Fund. An initial cohort of eight community-based awardees, listed below, were selected in 2020, and its learning collaborative is underway. Many more agencies applied, demonstrating interest in this innovative

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model. The ongoing nature of the Fund and engagement with philanthropic investors makes it a sustained funding source, not reliant on one funding stream. The Village Fund grantees offer new services to county residents and fill gaps in the availability of existing services. The Fund itself taps new funding streams for perinatal health and racial equity projects and enhances the level of citizen participation in government programs. A broad evaluation of the AAIMM Initiative, to begin in 2021, will assess knowledge, satisfaction, capacity/preparedness, and client pregnancy and birth outcomes of Village Fund grantees.

We congratulate the first cohort of AAIMM Village Fund grantees:

- [Luna and Sol Yoga](#)
- [Lydia O. Boyd](#)
- [Men Taking Over Reforming Society](#)
- [Mighty Little Giants](#)
- [Parenting for Liberation](#)
- [Project Joy](#)
- [TaVia Iles](#)
- [Youth With A Purpose](#)

The first round of Village Fund grantees was selected during the COVID-19 pandemic. People of color and their businesses have been the hardest hit by job losses, reduced hours, and business closures throughout the pandemic. The Village Fund provides financial stability to its grantee agencies who can, in turn, continue to provide services at low or no cost to the Black community. The Village Fund was a recipient of a National Association of Counties (NACo) award in 2021.

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Linkage to the County Strategic Plan – 1 page only. Which County Strategic Plan goal(s) does this project address? Explain how. Use Arial 12-point font.

The Village Fund supports Goal II.1.2, to Support Small Businesses and Social Enterprises, and Goal 1.1.1 to Increase Our Focus on Prevention Initiatives. Additionally, the Village fund supports the County Health Agency’s 5-Year Plan to address the Black-White infant mortality gap in Los Angeles County by 30% by 2023. Grantees of the fund address the county’s strategies by incorporating the actions mapped out in the Center for Health Equities Pathway to Equity. Blocking the pathway at each juncture: to address the causes of stress, to help women avert chronic physical stress as a response to social stress, and to intervene early and effectively when chronic stress has placed a woman at risk.

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COST AVOIDANCE, COST SAVINGS, AND REVENUE GENERATED (ESTIMATED BENEFITS TO THE COUNTY): If you are claiming cost benefits, include a calculation on this page. Please indicate whether these benefits apply in total or on a per unit basis, e.g., per capita, per transaction, per case, etc. You must include an explanation of the County cost savings, cost avoidance or new revenue that matches the numbers in the box. Remember to keep your supporting documentation. Use Arial 12-point font

Cost Avoidance: Costs that are eliminated or not incurred as a result of program outcomes. Please indicate whether these are costs to the County or to other entities.

Cost Savings: A reduction or lessening of expenditures as a result of program outcomes. Please indicate whether these were expenditures by the County or by other entities.

Revenue: Increases in existing revenue streams or new revenue sources to the County as a result of program outcomes.

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\$12,150,000.	\$ NOT YET DETERMINED	\$ N/A	\$12,150,000.	<input type="checkbox"/>

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**A PRETERM BIRTH COSTS ~\$50,000. THE PRETERM BIRTH RATE FOR AFRICAN AMERICANS IN LA COUNTY IS 9% AND THERE ARE 9,000 BIRTHS TO AFRICAN AMERICAN MOTHERS ANNUALLY IN LAC. A 30% REDUCTION IN AA PRETERM BIRTH WOULD LEAD TO \$12,150,000 IN COST AVOIDANCE IN HEALTH CARE, SPANNING DHS AND COUNTYWIDE.
 (9% OF 9,000 = 810. 30% OF 810 = 243. 243 BABIES NOT BORN PREMATURELY X \$50,000 = \$12,150,000.**