

Priority: Education
Program Offer Type: Existing Operating
Related Programs:

Lead Agency: Health Department
Program Contact: WALLINDER Janet L

Program Characteristics:

Executive Summary

First-time parents can receive a range of services, including home visits, hospital visits, classes and groups. Services begin in early pregnancy and continue through infancy to assure optimal maternal and infant health and assist parents in meeting their infant's basic health and developmental needs. 2120 parents will receive hospital Welcome Baby visits. 825 parents will receive intensive home visit services.

Program Description

This offer includes a range of services for first-time parents using evidence-based models. Nurse Family Partnership (NFP) is a nurse home visit program for first-time pregnant women that starts early in pregnancy and follows families to their child's 2nd birthday. Health Dept. nurse home visitors follow a nationally researched curriculum that focuses on mother and infant health, parenting education, and family relationships. NFP targets families at or below 185% of the Federal Poverty Level. Healthy Start (based on the Healthy Families America model) includes hospital-based Welcome Baby visits at birth to all first-time parents in Multnomah County to identify families in need. Based on risk, families are referred for intensive home visit services provided by contracts with community agencies. Young teen parent services are also provided by a contracted community agency and include home visits and support groups.

Program Justification

Helping first-time parents, who are the most inexperienced, develop the skills and abilities needed to best support their child establishes lifelong parenting patterns which benefit multiple generations. These programs focus on three major outcomes: improving pregnancy outcomes by helping women engage in good preventive health practices; improving child health and development by helping parents provide responsible and competent care; and improving the economic self-sufficiency of families. Well-documented research on the impact of prenatal and infant home visits (David Olds, Nurse Family Partnership Program) has shown long-term benefits for children receiving home-based services. When such children reach age 15 they are more likely to be in school, and less likely to be in the criminal justice system. The women are more likely to have finished high school, be in the workforce, and not use public assistance. This program offers supports strategies 1 and 2 of the Education Team.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY05-06)	Current Year Purchased (FY06-07)	Current Year Estimate (FY06-07)	Next Year Offer (FY07-08)
Output	# of maternity case management visits to pregnant and postpartum women	4,235	4,300	4,517	4,575
Outcome	% of mothers enrolled in NFP services who are breastfeeding at 6 months	47.0%	0.0%	46.0%	50.0%
Outcome	% of Healthy Start families reading to or with their children 3 times per week	83.0%	0.0%	84.0%	85.0%
Outcome	% of children within normal limits for development at 1 year of age	83.0%	75.0%	83.0%	83.0%

Performance Measure - Description

 **Measure Changed**

- The goal for % of women breastfeeding at 6 months of age is based on the Healthy People 2010 goal of 50%. Comparison data: WIC clients in Mult. Co. is 46%; NFP national rate is 29%.

Legal/Contractual Obligation

Healthy Start must comply with Healthy Families America credentialing requirements and state OCCF Healthy Start requirements.

Nurse Family Partnership (NFP) must follow the program guidelines set forth by the NFP National Service Office.

Services reimbursed by Medicaid must comply with Medicaid rules.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2007	2007	2008	2008
Personnel	\$990,966	\$1,040,706	\$1,261,158	\$1,755,459
Contracts	\$373,124	\$1,091,727	\$597,108	\$966,421
Materials & Supplies	\$29,624	\$32,473	\$53,934	\$76,820
Internal Services	\$93,744	\$329,824	\$139,772	\$437,821
Capital Outlay	\$0	\$0	\$0	\$0
Subtotal: Direct Exps:	\$1,487,458	\$2,494,730	\$2,051,972	\$3,236,521
Administration	\$74,992	\$0	\$89,022	\$0
Program Support	\$259,611	\$41,927	\$394,491	\$28,559
Subtotal: Other Exps:	\$334,603	\$41,927	\$483,513	\$28,559
Total GF/non-GF:	\$1,822,061	\$2,536,657	\$2,535,485	\$3,265,080
Program Total:	\$4,358,718		\$5,800,565	
Program FTE	15.42	20.56	13.10	18.75
Program Revenues				
Indirect for dep't Admin	\$120,018	\$0	\$188,895	\$0
Intergovernmental	\$0	\$2,494,732	\$0	\$3,236,521
Program Revenue for Admin	\$0	\$41,927	\$0	\$28,559
Total Revenue:	\$120,018	\$2,536,659	\$188,895	\$3,265,080

Explanation of Revenues

- Healthy Start grant, state general funds from OCCF
- Medicaid reimbursement for maternity case management and targeted case management

Significant Program Changes

Last year this program was:

New program offer, these programs were part of 40056A and 40056B

- For FY07 these services were included in the High-Risk Prenatal program offer. The CY Purchase for child development is the same; the CY Purchase for maternity case management visits is split between the two offers.