

Program # 40013A - Early Childhood Svcs for First Time Parents

Version 3/31/2009 s

Priority:EducationLead Agency:Health DepartmentProgram Offer Type:Existing OperatingProgram Contact:WALLINDER Janet L

Related Programs:

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. 2325 parents will receive hospital Welcome Baby visits. 850 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 offer supports the outcomes and strategies in the County's Early Childhood Framework.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	# of maternity case management (MCM) visits to pregnant and postpartum women	5,714	5,025	5,675	5,675
Outcome	% of mothers enrolled in NFP services who are breastfeeding at 6 months	45.0%	50.0%	45.0%	50.0%
Outcome	% of Healthy Start families reading to or with their children 3 time per week	97.0%	95.0%	97.0%	97.0%
Outcome	% of children within normal limits for development at 1 year of age	96.0%	83.0%	87.0%	87.0%

Performance Measure - Description

- 2) The goal for % of women breastfeeding at 6 months of age is based on the Healthy People 2010 goal of 50%.
- 3) Required outcomeof state Healthy Start program. State benchmark 85%; state average for 07/08 92%
- 4) No national standard. Most work is focused on increasing the number of children screened early in life for early identification of problems. Academy of Pediatrics cites 1994 study estimating 12-16% of children have a developmental or behavioral problem.

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	2009	2009	2010	2010
Personnel	\$1,246,801	\$1,988,864	\$1,675,235	\$1,833,521
Contracts	\$575,076	\$1,390,840	\$384,821	\$1,647,699
Materials & Supplies	\$67,636	\$24,967	\$42,450	\$97,196
Internal Services	\$17,878	\$613,194	\$100,326	\$304,363
Capital Outlay	\$0	\$0	\$50,000	\$0
Subtotal: Direct Exps:	\$1,907,391	\$4,017,865	\$2,252,832	\$3,882,779
Administration	\$87,813	\$0	\$91,424	\$0
Program Support	\$598,116	\$56,776	\$617,904	\$47,656
Subtotal: Other Exps:	\$685,929	\$56,776	\$709,328	\$47,656
Total GF/non-GF:	\$2,593,320	\$4,074,641	\$2,962,160	\$3,930,435
Program Total:	\$6,66	7,961	\$6,892,595	
Program FTE	13.50	20.70	15.71	18.95
Program Revenues				
Indirect for dep't Admin	\$233,576	\$0	\$120,545	\$0
Intergovernmental	\$0	\$4,017,865	\$0	\$3,882,779
Program Revenue for Admin	\$0	\$56,776	\$0	\$47,656
Total Revenue:	\$233,576	\$4,074,641	\$120,545	\$3,930,435

Explanation of Revenues

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

Significant Program Changes

Last year this program was: #40013A, Early Childhood Svcs for First Time Parents

Healthy Start grant funding is reduced by 7% based on Governor's proposed budget. Staff reductions were in support staff, changing Welcome Baby staff from Community Health Nurse to Community Health Worker, and 2% reduction in community contracts. Program staffing reduced by nearly 1/2 across all EC offers to meet funding constraints. Additional Local 88 positions were funded using funds made available by Local 88's approval of a wage freeze for FY 2010.