

**Lead Agency:** Health Department

**Program Contact:** RUMINSKI Diane T

**Program Offer Type:** Existing Operating

**Related Programs:**

**Program Characteristics:**

### Executive Summary

Early Childhood Home Based Services provides evidence based home visiting programs to first birth parents and children. The goal is to assure that children at risk for poor health outcomes receive the support, education and resources needed to achieve optimal health during the critical early years of life. These programs include Nurse Family Partnership (NFP) and Healthy Families America (Healthy Start of Oregon). We expect to screen approximately 2,800 first birth families for eligibility for home visiting services, and to enroll approximately 400 families in NFP and over 600 families in Healthy Start.

### Program Description

Voluntary home visiting programs have demonstrated positive changes in parenting practices, gains in child growth and development, increased readiness for school, reductions in the incidence of child abuse and neglect, low birth weight and prematurity, and improvements in maternal life course. The program targets high risk families including teens and racial and ethnic groups experiencing health disparities. Low income, single, first birth parents benefit the most from these interventions which help establish positive lifelong parenting practices. Long term benefits to the county include healthy children ready to learn, a healthier work force, and decreased costs related to school failure, juvenile crime, and chronic disease.

The Nurse Family Partnership Program (NFP) is offered to first-time low income pregnant women. Services begin in early pregnancy and follow families up to their child's second birthday. NFP evaluations demonstrate improved prenatal outcomes, fewer subsequent births, increased intervals between births, increased rates of breast feeding, and fewer childhood injuries. Research on the long-term benefits for children receiving NFP services has shown at age 15 they are more likely to be in school, and less likely to be in the criminal justice system. The mothers who received NFP services are more likely to have finished high school, be in the workforce, and not use public assistance.

Healthy Start is a state wide program also serving first birth families with the overall goals to reduce child abuse/neglect, improve school readiness and promote healthy growth and development of young children up to age three years. Last year over 2,850 families received screening at the time of birth and over 600 families were served in home visits. Healthy Start follows the "Healthy Families America (HFA)" model of home visiting--a best practice model delivered by highly trained staff through community-based agencies. These agencies include IRCO (Immigrant and Refugee Community organization), Impact NW and Insights Teen parent program. Nurse consultants provide additional health support to families and staff.

A \$300,000 HRSA Maternal Infant and Early Childhood Home Visiting grant will expand services to an additional 62 pregnant and parenting teens of color served through our Healthy Start Teen Insights program and Early Head Start programs at Albina, Mt. Hood and Oregon Child Development Coalition.

### Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	% of infants 0-12 months with developmental screening	70.0%	70.0%	70.0%	75.0%
Outcome	% of mothers enrolled in NFP services who are breastfeeding at 6 months	50.0%	50.0%	50.0%	50.0%
Quality	% of clients completing survey who are very satisfied/satisfied with services*	0.0%	80.0%	98.0%	98.0%
Output	% Healthy Start parents who report reading to /with child at least 3X/week	95.0%	90.0%	95.0%	95.0%

### Performance Measure - Description

\*Performance measure designed to obtain client input on services offered by measuring client satisfaction.

## Legal/Contractual Obligation

Nurse Family Partnership (NFP) complies with contractual program guidelines set forth by the NFP National Service Office to assure fidelity to the model. Healthy Start must comply with Healthy Families America (HFA) credentialing requirements and the state OCCF Healthy Start contract requirements. Failure to comply may result in disaffiliation with HFA and withholding of funding. OMB Circular A-87, LPHA State/Federal Program Requirements, FQHC Rulebook OAR 410-147-0595, MCM OAR 410-130-0595, TCM OAR 410-138-0000 through 410-138-0420, Title V/Maternal Child Health.

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2012	2012	2013	2013
Personnel	\$1,476,272	\$1,950,831	\$1,796,316	\$1,795,625
Contracts	\$804,582	\$94,224	\$1,590,412	\$1,118,307
Materials & Supplies	\$37,868	\$159,108	\$92,205	\$84,934
Internal Services	\$182,623	\$337,440	\$218,414	\$315,914
Total GF/non-GF:	<b>\$2,501,345</b>	<b>\$2,541,603</b>	<b>\$3,697,347</b>	<b>\$3,314,780</b>
Program Total:	<b>\$5,042,948</b>		<b>\$7,012,127</b>	
Program FTE	16.10	17.85	16.15	16.80
<b>Program Revenues</b>				
Indirect for dep't Admin	\$150,914	\$0	\$122,164	\$0
Fees, Permits & Charges	\$0	\$0	\$0	\$666,297
Intergovernmental	\$0	\$2,541,603	\$0	\$2,648,483
<b>Total Revenue:</b>	<b>\$150,914</b>	<b>\$2,541,603</b>	<b>\$122,164</b>	<b>\$3,314,780</b>

## Explanation of Revenues

The Nurse Family partnership Program is funded by county general fund, and Medicaid fees from: 1) Maternity Case Management (MCM) home visits conducted from pregnancy through two months postpartum and 2) Targeted Case Management (TCM) for infants and children up to age 5 years. CaCoon is a Care Coordination grant designed to serve children with special health care needs.

NFP Revenue Summary--Medicaid Maternity Case Management: \$314,356; Medicaid Targeted Case Management: \$1,270,025; Federal CaCoon Grant: \$62,024; county general fund: \$2,951,006. The Healthy Start Program is funded with a combination of state and federal grant funds and county general fund support. The Healthy Start grant has a 25% match requirement. There are significant decreases to Healthy Start due to prior year reductions in funding and Medicaid rule changes which no longer reimburse Healthy Start patient visits.

Healthy Start Revenue Summary--Healthy Start grant: \$1,399,962; Medicaid Administrative Claiming: \$120,000; CaCoon grant: \$23,259; county general fund \$612,729.

## Significant Program Changes

✔ Significantly Changed

**Last year this program was:** #40013A, Early Childhood Services for Pregnant/Parenting Families - N/NE

This program offer has changed to specifically reflect evidence based home visiting models focusing on interventions with first birth families. The Healthy Birth Initiative Program (HBI) and general home visiting services are now reflected in program offer 40013B as part of restructuring of our services to better align with health care reform, the expansion of patient centered primary care medical homes, and the delivery of more community based services focused on addressing health disparities. The two NFP teams will be consolidated under this single program offer rather than divided between the two Early Childhood offers. One of 5 Healthy Start Family Support teams was cut (IRCO). The team at IRCO was partially restored with 2 Healthy Start Family Support Workers focusing on teens of color funded through a new federal home visiting grant and a family support worker funded by one-time only funds approved by the Board. The Board also funded a family support worker at Impact NW and Teen Insights with one-time only general fund.