

Program #40054 - Nurse Family Partnership 5/7/2015

Department: Health Department **Program Contact:** Jessica Guernsey
Program Offer Type: Existing Operating Program **Program Offer Stage:** As Proposed
Related Programs: 40055, 40056, 40058
Program Characteristics:

Executive Summary

Multnomah County Health Department is the only organization in the County to provide and support the Nurse Family Partnership Program (NFP). NFP is an evidence-based community healthcare program supported by 25 years of extensive research. NFP supports a partnership between low-income, first time mothers with a home-visiting Community Health Nurse to achieve the care and support they need to have a healthy pregnancy and provide competent care for their children and families. This program serves over 400 families per year.

Program Summary

Research shows the conditions of early life have a profound impact on long-term health and life stability. The Nurse Family Partnership Program (NFP) is a nurse home visiting program offered to first-time, low-income pregnant women through two Multnomah County teams, one team located in Northeast Portland, and one team located in East County. Home visiting services begin in early pregnancy and follow families up to their child’s second birthday. In 2014, the two NFP teams served 486 families.

NFP consistently demonstrates improved prenatal health, fewer childhood injuries, increased intervals between births, increased maternal employment and improved school readiness. Multnomah County has developed infrastructure that ensures fidelity to the NFP model and includes extensive staff training, reflective supervision, a Community Advisory Council, and rigorous evaluation support through the NFP National Service Office. NFP aligns with the first strategic priority of the Health Department’s Strategic Plan: to improve health outcomes and health equity. This program responds to racial and ethnic disparities outlined in the 2014 Report Card on Racial and Ethnic Disparities, and addresses underlying causes of poor population health by focusing on a life course health perspective. Long-term benefits to the county include healthy children ready to learn; a healthier work force; decreased costs related to child welfare involvement, school failure, juvenile crime, and chronic disease; and gains in equity for the county’s communities of color and low-income communities.

Additional work that is supported in this program offer includes funding a contract for the Right from the Start Coalition that works from a collective impact model to support strategies for childhood obesity prevention in formal and informal childcare settings. Additionally, this program offer supports the core public health work of data monitoring and reporting through the development, maintenance, and dissemination of the Multnomah County Maternal Child and Family Health Databook.

Performance Measures

Measure Type	Primary Measure	FY14 Actual	FY15 Purchased	FY15 Estimate	FY16 Offer
Output	Number of families served	486	400	486	450
Outcome	% of mothers enrolled in NFP services who are breastfeeding at 6 months	65%	60%	65%	60%
Quality	Client retention in prenatal phase of NFP program	71%	80%	71%	71%
Quality	Client satisfaction	NA	95%	98%	98%

Performance Measures Descriptions

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. 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. Targeted Case Management requires matching local funds.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2015	2015	2016	2016
Personnel	\$1,417,622	\$1,294,655	\$1,908,070	\$812,909
Contractual Services	\$406,847	\$22,756	\$33,038	\$431,012
Materials & Supplies	\$34,870	\$21,011	\$34,641	\$42,659
Internal Services	\$232,871	\$208,646	\$133,068	\$271,706
Total GF/non-GF	\$2,092,210	\$1,547,068	\$2,108,817	\$1,558,286
Program Total:	\$3,639,278		\$3,667,103	
Program FTE	11.92	10.20	17.80	5.40

Program Revenues				
Indirect for Dept. Admin	\$105,372	\$0	\$93,685	\$0
Intergovernmental	\$0	\$120,000	\$0	\$92,120
Other / Miscellaneous	\$13,516	\$0	\$14,190	\$0
Service Charges	\$0	\$1,427,068	\$0	\$1,466,166
Total Revenue	\$118,888	\$1,547,068	\$107,875	\$1,558,286

Explanation of Revenues

NFP is funded in part by Medicaid fees from Maternity Case Management (MCM) home visits conducted from pregnancy through two months postpartum and Targeted Case Management (TCM)* for infants and children up to age 5 years.

*Beginning July 1, 2015 TCM will roll over into the Coordinated Care Organization (CCO) global budget. The contracts with the CCOs are planned to assure the same ability for counties to match funding with the federal government and keep our current TCM programs whole.

Oregon Babies First grant: \$92,120

Significant Program Changes

Last Year this program was: FY 2015: 40054 Nurse Family Partnership

In FY15, Nurse Family Partnership and Healthy Birth Initiative (HBI) began the process of better connecting the two programs so that African American first time mothers are enrolled in NFP and receive all of the wraparound, culturally-specific services and leadership development of the HBI program. Additional families served through the coordinated programs are reflected in the HBI program offer.

In this Program Offer we have added an additional 0.5 FTE in support staff for both NFP teams to come into full compliance with the staffing levels outlined by the NFP National Service Office and we have added expenses to support an NFP Community Advisory Council, also a model element required by the NFP National Service Office.