

**Program #40054 - Nurse Family Partnership** FY 2024 Proposed

**Department:** Health Department **Program Contact:** Elizabeth Carroll  
**Program Offer Type:** Existing **Program Offer Stage:** Proposed  
**Related Programs:** 40055, 40056, 40058, 40097  
**Program Characteristics:**

**Executive Summary**

Parent Child Family Health (PCFH) Nurse Family Partnership Program (NFP) is an evidence-based community healthcare program supported by more than 30 years of research. NFP supports a partnership between low-income, first-time pregnant people with a home visiting Community Health Nurse to support new parents experience a healthy pregnancy. This partnership and the education and support offered, enable families to build confidence and work towards family stability and achieve goals.

**Program Description**

NFP is a nurse home visiting program offered to first-time, low-income pregnant people through two Multnomah County teams serving the entire County. The goals of NFP are to improve pregnancy outcomes by promoting health-related behaviors; and improve child health, development, and safety by promoting competent care-giving. Home visiting services begin in early pregnancy and follow families up to their child's second birthday. NFP consistently demonstrates improved prenatal health, fewer childhood injuries, increased intervals between births, increased maternal employment, and improved school readiness for children.

PCFH has developed infrastructure that ensures fidelity to the NFP model and includes extensive staff training, reflective supervision, a Community Advisory Board, and rigorous evaluation support through the NFP National Service Office and State Nurse Consultant. Long-term benefits to the county include healthy children ready to learn; decreased costs related to child welfare and juvenile justice; and over the long-term, families less affected by chronic disease. PCFH has connected the NFP model with the Healthy Birth Initiative (HBI). This partnership provides African American first-time pregnant people who are enrolled in NFP with all of the wraparound, culturally specific services and leadership development of the HBI program. African American families receiving NFP services through HBI are reflected in the HBI Program Offer (40058). NFP's Community Advisory Board enables clients to influence and guide how they engage in PCFH services and provide input assure services are reflective of families served, impacting program design and/or implementation.

**Performance Measures**

Measure Type	Primary Measure	FY22 Actual	FY23 Budgeted	FY23 Estimate	FY24 Offer
Output	Number of families served	284	200	285	330
Outcome	Percent of mothers enrolled in NFP services who are breastfeeding at 6 months	49%	65%	60%	65%
Quality	Participants who remain in program until child is two years old	85%	80%	80%	80%
Quality	Percent of participants who express satisfaction with program's cultural responsiveness	N/A	95%	97%	95%

**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. Federal Uniform Grant Guidelines, LPHA State/Federal Program Requirements, TCM OAR 410-138-0000 through 410-138-0420, Title V/Maternal Child Health. Targeted Case Management requires matching local funds.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	<b>2023</b>	<b>2023</b>	<b>2024</b>	<b>2024</b>
Personnel	\$90,352	\$1,580,995	\$41,456	\$1,876,725
Contractual Services	\$462,147	\$2,000	\$701,808	\$0
Materials & Supplies	\$37,906	\$23,976	\$38,997	\$23,834
Internal Services	\$147,257	\$254,842	\$75,194	\$386,627
<b>Total GF/non-GF</b>	<b>\$737,662</b>	<b>\$1,861,813</b>	<b>\$857,455</b>	<b>\$2,287,186</b>
<b>Program Total:</b>	<b>\$2,599,475</b>		<b>\$3,144,641</b>	
<b>Program FTE</b>	0.44	8.56	0.11	9.09

<b>Program Revenues</b>				
Intergovernmental	\$0	\$88,802	\$0	\$88,802
Other / Miscellaneous	\$0	\$46,556	\$0	\$46,556
Beginning Working Capital	\$0	\$566,348	\$0	\$0
Service Charges	\$0	\$1,160,107	\$0	\$2,151,828
<b>Total Revenue</b>	<b>\$0</b>	<b>\$1,861,813</b>	<b>\$0</b>	<b>\$2,287,186</b>

## Explanation of Revenues

This program generates \$262,178 in indirect revenues.

- \$ 46,556 - Miscellaneous Revenues
- \$ 2,151,828 - NFP Medicaid Babies First
- \$ 88,802 - State Babies First grant

## Significant Program Changes

**Last Year this program was:** FY 2023: 40054 Nurse Family Partnership

In FY23, NFP made a return to in-person services while continuing to make televising an option based on family preference and safety. NFP is scheduled, along with all of PCFH, to transition from paper charting to electronic health records (EHR) in late FY23, ultimately streamlining charting, billing and medical records workflows. This transition, and a new mix of in-home and telehealth visits, enables increased projected revenue for NFP to maximize their billing. 1.0 CHN added in FY24. Challenges in hiring new nurses, especially into cultural KSA positions, has taken exceptionally long times in the past year. New HR streamlining of processes and staff stabilization measures such as retention bonuses are expected to be helpful in maintaining full staffing and meeting visit goals. The NFP program is expected to consolidate staff into one physical location in FY24, as a part of a larger PCFH space consolidation.