

Nurse Family Partnership: Evidence Based Home Visiting

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Objectives

- Describe Nurse Family Partnership Home Visiting Program in Vermont
- Review 30 years of research about the impact of home visiting
- Reflect on the Role of Nurse Family Partnership and other MCH nursing visits in Blueprint for Health and other health reform initiatives
- Describe a day in the life of a nurse home visitor

NFP in Vermont

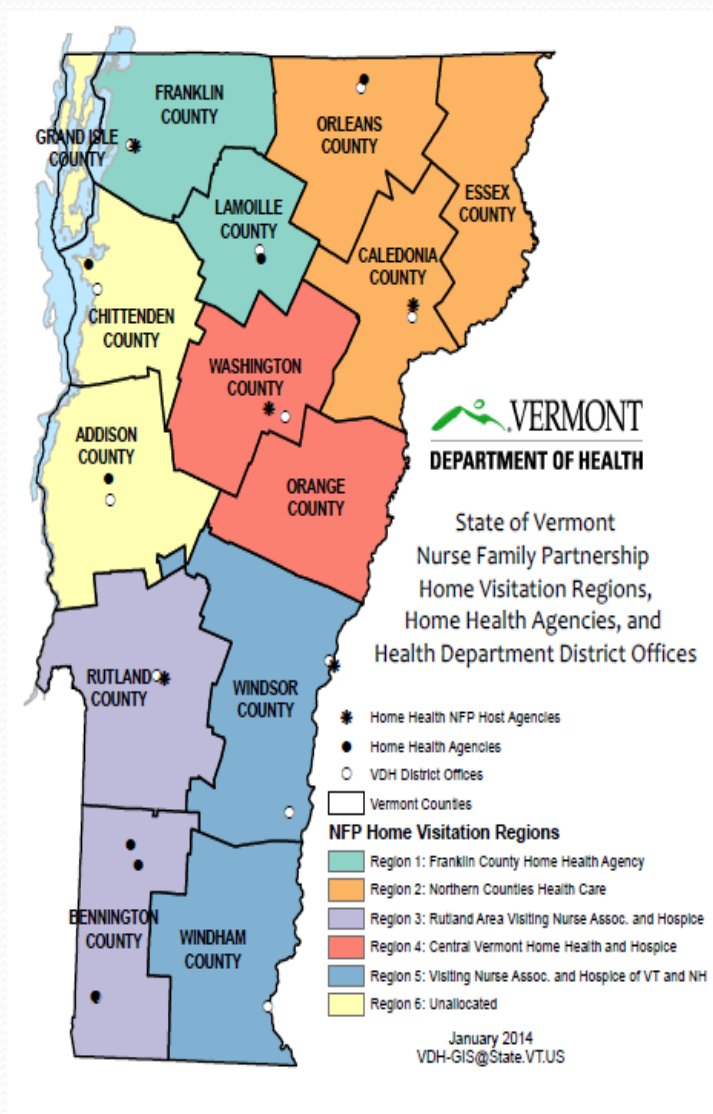
- In 2010, the Maternal Infant Early Childhood Home Visiting program was funded via the Affordable Care Act
- Funds support evidenced base home visiting programs as part of the continuum of services for pregnant women and young children
- A 2010 statewide needs assessment showed the lack of comprehensive, evidenced based home visiting programs and also pointed to the need for strengthening nurse-based MCH home visiting services.
- As a result of this needs assessment, the Vt Dept of Health and the Dept for Children and Families chose to fund NFP via the nursing services of Vermont Home Health Agencies.

NFP Program

- Nurse home visitors from community home health agencies visit lower income women who are pregnant for the first time
- The Nurse-Family Partnership Model is an evidenced based program that assists mothers to improve parenting, work on education and job skills, and learn how to be a good consumer for their child.
- The Nurse-Family Partnership is a nationally recognized, evidenced based home visiting model that has been shown to improve family and community well-being by reducing child abuse, reducing teen arrests, reducing emergency department visits for injuries, and reducing emotional and intellectual problems at school entry.

www.nursefamilypartnership.org

NFP Regions Vermont



NFP Vermont Data



Pregnancy Outcomes

- Smoking During Pregnancy: 24% reduction in tobacco smoked
- Complications of Pregnancy : 27% reduction in pregnancy-induced hypertension
- Preterm First Births : 28% reduction in births below 37 weeks gestation (37.5 fewer preterm births per 1,000 families served)
- Infant Deaths : 60% reduction in risk of infant death (3.4 fewer deaths per 1,000 families served)

Pregnancy Outcomes

- Closely Spaced Second Births: 31% reduction in births within 2 years postpartum
- Very Closely Spaced Births: 24% reduction in births within 15 months postpartum
- Subsequent Birth Rate: 31% reduction in second teen births (73.5 fewer children per 1,000 families served within 2 years postpartum & lifetime)
- Subsequent Preterm Births: 37.5 fewer subsequent preterm births per 1,000 families served

Child Health Outcomes

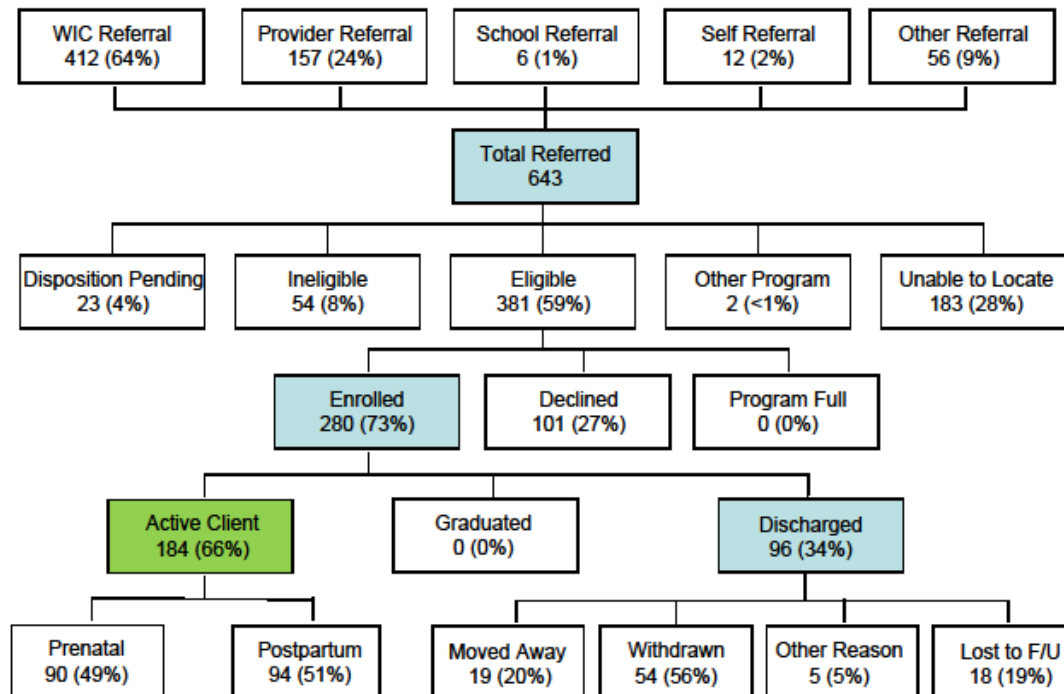
- Breastfeeding : 14% increase in mothers who attempt to breastfeed
- Childhood Injuries: 38% reduction in injuries treated in emergency departments, ages 0-2
- Child Maltreatment : 38% reduction in child maltreatment through age 15
- Language Development: 38% reduction in language delay; 0.14 fewer remedial services by age 6
- Immunizations: 23% increase in full immunization, ages 0-2

Long term Outcomes

- Youth Criminal Offenses: 46% reduction in crimes and arrests, ages 11-17
- Youth Substance Abuse: 53% reduction in alcohol, tobacco, & marijuana use, ages 12-15

Referral and Retention

Vermont MIECHV Home Visiting Program Referrals, Enrollment and Retention
June 1, 2012 through June 30, 2014



Early Learning Challenge-Race to the Top

- Evidence based home visiting
 - Parents as Teachers
 - Maternal Early Childhood Sustained Home Visiting (MECSH) Nurse Model for all pregnancies (NFP is first pregnancy only)



Community Health Teams and Nurse Family Partnership

- Primary goal is awareness
- Medical Home as referral source
- Care Alliance (Hub and Spoke)
 - Pregnant women
 - Pregnancy care medical homes

NY Times, 9-14-14

- Nicholas Kristof: The Way to Beat Poverty
- “One of the reasons the United States has not made more progress against poverty is that our interventions come too late. If there’s one over-arching lesson from the past few decades of research about how to break the cycles of poverty in the United States, it’s the power of parenting—and of intervening early, ideally in the first year or two of life or even before a child is born.”

NYTimes September 14, 2014

- Regarding the Nurse Family Partnership, Nicholas Kristof
 - "here we have an anti-poverty program that is cheap, is backed by rigorous evidence and pays for itself several times over in reduced costs later on. Yet it has funds to serve only 2 percent to 3 percent of needy families. That's infuriating."

Franklin County Home Health

- Becca Rainville
- A day in the life

Be in touch

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