



Monterey County

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Board Report

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Adopt a Resolution to:

- a. Approve submission of application to Nurse-Family Partnership National Service Office for implementation of the Nurse-Family Partnership program in Fiscal Year 2016-17; and
- b. Amend Fiscal Year (FY) 2016-17 Health Department Budget 4000-HEA003-8124 to add one (1.0) FTE Supervising Public Health Nurse; and
- c. Amend Fiscal Year (FY) 2016-17 Health Department Budget 4000-HEA003-8124 to add two (2.0) FTE Public Health Nurse II positions; and
- d. Authorize the County Administrative Office to reflect approved changes (Attachment A) in the Fiscal Year 2016-17 Adopted Budget.

RECOMMENDATION:

It is recommended that the Board of Supervisors:

- a. Approve submission of application to Nurse-Family Partnership National Service Office for implementation of the Nurse-Family Partnership program in Fiscal Year 2016-17; and
- b. Amend Fiscal Year (FY) 2016-17 Health Department Budget 4000-HEA003-8124 to add one (1.0) FTE Supervising Public Health Nurse; and
- c. Amend Fiscal Year (FY) 2016-17 Health Department Budget 4000-HEA003-8124 to add two (2.0) FTE Public Health Nurse II positions; and
- d. Authorize the County Administrative Office to reflect approved changes (Attachment A) in the Fiscal Year 2016-17 Adopted Budget.

SUMMARY/DISCUSSION:

The Health Department (Department) will implement the Nurse-Family Partnership (NFP) program throughout Monterey County in the current fiscal year. NFP is an evidence-based health program that transforms the lives of vulnerable first-time mothers and their babies. NFP will enroll Medi-Cal eligible women early in their pregnancy and conduct the first home visit by no later than the end of week 28 of pregnancy. The Department will pair these women with an NFP nurse that will visit the home and work with the family until the child's second birthday. Each nurse will address health topics in the domains of personal health, environmental health, life course, maternal role, friends and family, and health and human services.

Sixty one percent (61%) of all births in Monterey County are Medi-Cal eligible, which reflects a high proportion of children living in poverty. Poverty has been identified as a risk factor for poor health outcomes. Six and a half percent (6.5%) of live births are less than 37 weeks gestation, which indicates that some women still struggle to access early prenatal care. Thirty three percent (33%) of women give birth to a second child within 24 months of a previous pregnancy, which may be attributed to poor access to contraception services and poor understanding of the benefits of family planning. These data suggest that many women in

Monterey County are at increased risk for adverse birth outcomes such as pre-term labor, premature delivery, and neonatal complications. Prevention, early intervention and continuity of care approaches, such as nurse home visitation, are known to reduce disparities in birth outcomes associated with Medi-Cal eligible births.

Nurse Family Partnership has been shown to improve health outcomes among participants, such as decreased prenatal cigarette smoking, reduced hypertensive disorders of pregnancy, decreased childhood injuries, reduced subsequent pregnancies, and increased intervals between births. By achieving similar outcomes among first-time mothers in Monterey County, the Department through implementation of NFP will support efforts to provide higher quality care and to reduce health care costs.

The cornerstone of NFP is the extensive research on the model conducted over the last 39 years. Randomized controlled trials conducted with three diverse populations resulted in the following consistent lifetime benefits to children: 48% reduction in child abuse and neglect, 59% reduction in arrests, and 90% reduction in adjudications as persons in need of supervision for incorrigible behavior. In 2009, the Pacific Institute for Research and Evaluation concluded that Nurse Family Partnership services resulted in a decrease in the number of women and children enrolled in Medicaid and Supplemental Nutrition Assistance Program as the nurse visited families gained academic and employment skills to become economically self-sufficient. The quantifiable long-term return on investment is one dollar (\$1.00) expended on NFP services generates up to five dollars (\$5.00) savings within ten years.

This recommendation will add 1.0 FTE Supervising Public Health Nurse and 2.0 FTE Public Health Nurse II positions to be added to two existing vacant PHN II positions to the Department's Public Health Bureau's Maternal Child and Adolescent Health program as the initial core staff to implement the NFP program in Monterey County.

The NFP nurse home visitor will complete core educational sessions required by the Nurse Family Partnership National Service Office and will deliver the intervention with fidelity to the NFP model. Nurses will apply theoretical frameworks of NFP that emphasize self-efficacy, human ecology and attachment theories. Each full-time equivalent NFP nurse home visitor will carry a caseload of no more than 25 active clients, which is also a National NFP requirement. In our initial phase we will recruit and hire four nurses, which will provide the Department the capacity to serve up to 100 first-time mothers. One supervising nurse will be hired to supervise the nursing staff and an existing Office Assistant III will be reassigned to support the NFP team.

This action will support the Monterey County Health Department's 2011-2015 Strategic Plan Initiatives: 1. Empower the community to improve health through programs, policies, and activities; 2. Enhance community health and safety by emphasizing prevention; and 3. Ensure access to culturally and linguistically appropriate, customer-friendly, quality health services. This work also supports three of the ten essential public health services: Inform, educate, and empower people about health issues; link people to needed personal health services and assure the provision of health care when otherwise unavailable; and assure competent public and personal health care workforce.

OTHER AGENCY INVOLVEMENT:

Human Resources Department has reviewed and agrees with the recommendation. The Health and Human Services Committee reviewed and supported recommendation to submit application for implementation of Nurse Family Partnership at their October 20, 2016 meeting.

FINANCING:

NFP program costs for FY 2016-17 are \$162,027 and for FY 2017-18 are \$1,222,715. Funding sources are 45% Medi-Cal and 55% Realignment in FY 2016-17 and 43% Medi-Cal and 57% Realignment in FY 2017-18 and thereafter. Anticipated Realignment amounts in FY 2016-17 are \$89,115 and in FY 2017-18 are \$690,966. The Health Department is applying for multiple grants to offset the use of Realignment monies.

The County received unanticipated Health Realignment revenues in FY 2016-17 that are eligible to fund this program.

The Department's Public Health's FY 2016-17 Adopted Budget (001-4000-HEA003-8124) does not include appropriations or estimated revenues for this program. As necessary, Health will report to the Budget Committee and Board of Supervisors in spring, 2017, regarding additional appropriations, Realignment, and other estimated revenues. Public Health will include program funding in its FY 2017-18 Requested Budget.

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Resolution is on file with the Clerk of the Board