



County of Monterey

Board of Supervisors
Chambers
168 W. Alisal St., 1st Floor
Salinas, CA 93901

Legislation Details (With Board Report)

File #:	16-1170	Name:	NFP
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File created:	10/7/2016	In control:	Health, Housing & Human Services Committee
On agenda:	10/20/2016	Final action:	
Title:	Accept recommendation to approve application to Nurse-Family Partnership National Service Office to implement Nurse-Family Partnership, an evidence based first time parent nurse home visitation program, in Monterey County.		
Sponsors:	Ray Bullick		
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Attachments:	1. Board Report		

Date	Ver.	Action By	Action	Result
10/20/2016	1	Health, Housing & Human Services Committee		

Accept recommendation to approve application to Nurse-Family Partnership National Service Office to implement Nurse-Family Partnership, an evidence based first time parent nurse home visitation program, in Monterey County.

RECOMMENDATION:

It is recommended that the Board of Supervisors Health & Human Services Committee:
Accept recommendation to approve application to Nurse-Family Partnership National Service Office to implement Nurse-Family Partnership, an evidence based first time parent nurse home visitation program, in Monterey County.

SUMMARY/DISCUSSION:

More than 29,000 children under in Monterey County - or 26.6 percent - live in poverty. In our County, 61% of babies are born to low-income mothers who qualify for Medi-Cal. Growing up in poverty can be harmful to a child's cognitive development, health, school performance, and social and emotional well-being. Research on brain development has shown that giving children a strong start in life begins before they are born, during a mother's pregnancy. Mothers struggling with poverty are at higher risk for poor birth outcomes such as delivering premature or low birthweight babies.

Nurse-Family Partnership, a nationwide evidence-based program, pairs vulnerable first-time parents with specially trained nurses. During home visits from early pregnancy through the child's second birthday, the nurses support first-time moms to have healthy pregnancies, become knowledgeable and responsible parents, and give their babies the best possible start in life. By strengthening families and improving early child development, Nurse-Family Partnership strengthens communities and aims to improve the health and well-being of residents.

Nurse home visitors and nurse supervisors complete core education sessions required by the Nurse-Family Partnership National Service Office and deliver the intervention with fidelity to the Nurse-Family Partnership model. Nurses visit enrolled families once monthly using strength-based and individualized approaches to

support and empower each family achieve their goals while assessing and educating across domains covering personal health, home, work and school, family planning, education and livelihood, maternal role, personal network relationships, and health and human services linkages. The long-term and intensive relationship with enrolled families limits nurses' caseload to no more than twenty-five families.

The cornerstone of Nurse-Family Partnership is the extensive research on the model conducted over the last three plus decades. Randomized controlled trials conducted with three diverse populations resulted in the following consistent lifetime benefits to children including: 48% reduction in child abuse and neglect, 59% reduction in arrests, 90% reduction in adjudications as persons in need of supervision for incorrigible behavior and similar rates of reduced arrests, convictions and days in jail. Consistent program effects include improved prenatal health, fewer childhood injuries, fewer subsequent pregnancies and increased intervals between births, increased maternal employment and improved school readiness for children. For each dollar invested, communities can expect up to five dollars savings within ten years by experiencing a decrease in the number of women and children enrolled in Medicaid and SNAP as the nurse-visited families gained academic and employment skills to become economically self-sufficient.

This work supports the following Monterey County Health Department 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:

More than 29,000 children under in Monterey County - or 26.6 percent - live in poverty. In our County, 61% of babies are born to low-income mothers who qualify for Medi-Cal. Growing up in poverty can be harmful to a child's cognitive development, health, school performance, and social and emotional well-being. Research on brain development has shown that giving children a strong start in life begins before they are born, during a mother's pregnancy. Mothers struggling with poverty are at higher risk for poor birth outcomes such as delivering premature or low birthweight babies.

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FINANCING:

The Health Department is preparing appropriate paperwork to request new staff allocations in anticipation of approval of application to implement Nurse Family Partnership. The anticipated annualized cost for personnel, training, and other services and supplies is \$1.5 million of which 50% will be reimbursed through the Maternal Child and Adolescent Health grant from federal sources with the County providing the 50% match requirement using 1991 Health Realignment dollars. The Department will prepare a future board action for modification to its existing FY 2016-17 Adopted Budgets (001-4000-8124 and 001-4000-8424) to increase appropriations and revenues by \$1.5 million once application is approved.

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