

## Children First: Oklahoma's Nurse-Family Partnership Oklahoma State Department of Health

**The Nurse-Family Partnership Mission:** Empower first-time mothers living in poverty to successfully change their lives and the lives of their children through evidence-based nurse home visiting.

**History:** In 1996, Representatives from the Tulsa “Children First” Consortium, the Oklahoma State Legislature and the Oklahoma State Department of Health reviewed home visiting models and chose to implement the Nurse-Family Partnership (NFP) model as an innovative strategy to prevent child abuse and neglect. Implementation began in SFY 1997 with four pilot sites. Today, services are provided in most Oklahoma counties and known locally as **Children First**.

**The NFP Model:** *NFP* is based on more than three decades of research by David Olds, Ph.D. and colleagues. It is recognized as an evidence-based model by the United States Department of Health and Human Services,<sup>1</sup> by the Coalition for Evidence-Based Policy,<sup>2</sup> and by the Centers for Disease Control and Prevention.<sup>3</sup>

This model has three goals:

- Improve pregnancy outcomes by helping women alter their health-related behaviors, including reducing use of cigarettes, alcohol and illegal drugs;
- Improve child health and development by helping parents provide more responsible and competent care for their children; and
- Improve families’ economic self-sufficiency by helping parents develop a vision for their own future, plan future pregnancies, continue their education and find work.

**Enrollment Criteria:** Women enrolling in *NFP* must meet the following criteria:

- The participant must be a first time mother;
- The monthly household income must be at or below 185% of the federal poverty level; and
- The mother must be less than 29 weeks pregnant at enrollment.

Participation in *NFP* is voluntary. While the *NFP* intervention is designed to start early in the pregnancy and continue until the child’s second birthday, clients are not obligated to participate for any finite length of time.

**Services:** Home visitation services are provided through the county health departments under the Oklahoma State Department of Health and at the independent City-County Health Departments in Oklahoma and Tulsa Counties. Trained public health nurses provide assessments, education, information and linkages to community services to meet needs identified for each family. Nurse home visitors follow public health protocols and NFP visit guidelines that focus on five domains of functioning: 1) personal health, 2) environmental health, 3) maternal life course development, 4) maternal role development, and 5) networks for supportive relationships. Standardized assessment tools are utilized to assess risks for depression, substance abuse, intimate partner violence, physical abnormalities, child growth and developmental delays. Services rendered by the nurses are not intended to replace services provided by the Primary Care Provider (PCP). In fact, nurses often consult and collaborate with both the client’s and child’s PCP to ensure continuity of care and improved health outcomes.

**Participant Characteristics:**<sup>4</sup> A total of 3,022 families were served during State Fiscal Year (SFY) 2014 with 1,372 of those families having enrolled during that same year. For those that enrolled during SFY 2014, 35 percent of participants were under the age of 20 and 77 percent were under the age of 25; 77 percent were single, never married; 46 percent identified themselves as white; sixty-three percent had an annual household income of \$20,000 or less; 68 percent had completed high school or a GED; and 51 percent were unemployed.

<sup>1</sup> Avellar, S., Paulsell, D., Sama-Miller, E., and Del Grosso, P. (2013). Home Visiting Evidence of Effectiveness Review: Executive Summary. Office of Planning Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services, Washington, D.C., <http://homvee.acf.hhs.gov/Models.aspx>

<sup>2</sup> Coalition for Evidence-Based Policy. Retrieved from: <http://topevidence.org/wordpress/>.

<sup>3</sup> Child Maltreatment: Prevention Strategies. Centers for Disease Control and Prevention. Retrieved from: <http://www.cdc.gov/ViolencePrevention/childmaltreatment/prevention.html>.

<sup>4</sup> Data does not include information from NFP teams funded by the Federal Maternal, Infant and Early Childhood Home Visiting (MIECHV) Grant.

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### **Selected Outcomes:**<sup>5</sup>

**Child Maltreatment:** Of the 1,932 children who received at least one home visit, 90 percent had not been named as a potential victim of an OKDHS report after enrollment. Furthermore, 98 percent have not had a confirmed child maltreatment case with OKDHS after enrollment. None of the **NFP** children served in SFY 2014 had been named in a report to OKDHS for sexual abuse. [The family may or may not have been participating in **NFP** at the time the report was made.]

**Postnatal Depression:** Edinburgh Postnatal Depression Scale screenings were administered to 1,454 mothers, with approximately 14 percent of these screenings requiring immediate attention by a healthcare or mental health professional.

**Smoking Cessation:** Ninety-two percent of participants served quit, reduced or never began smoking between intake and 36 weeks of pregnancy.

**Breastfeeding:** Of those participants that gave birth during SFY 2014, 88 percent initiated breastfeeding.

**Immunizations and Well Child Exams:** At their last home visit during 2014, 92% of participants reported that their child was up-to-date on their immunizations and 82% were up-to-date on well child exams.

**Domestic Violence:** During enrollment, 26 percent of participants reported that they had recently experienced domestic violence. Yet, 97 percent of participants reported that they had not experienced domestic violence at their six month update.

**Car Safety:** Ninety-eight percent of participants reported always traveling with their child in a car seat.

**Safe Sleep Practices:** Forty-six percent of participants with a child two months of age reported never co-sleeping with their child and 34 percent reported co-sleeping with their child only some of the time.

**Pregnancy Spacing:** Only 10 percent of participants were pregnant with their second child before their first child reached one year of age.

**Education:** Among the participants over the age of 18 who did not have a high school diploma or GED at enrollment, 50 percent earned their high school diploma or GED by the time their child was 18 months of age.

**Household Income:** Forty-six percent of the participants increased their household income by the time their child was 12 months of age.

**Employment:** Of those participants that were unemployed at enrollment, 73 percent had found work by the time their child was six months of age.

### **Program Expenditures for SFY 2015 to date:**

State:	\$ 4,514,188
County Millage:	\$ 3,753,981
Medicaid Reimbursement:	\$ 1,908,958
MIECHV	\$ 340,507
<b>TOTAL:</b>	<b>\$10,517,634</b>

<sup>5</sup> Data does not include information from NFP teams funded by the Federal MIECHV Grant. All data pulled from the "Children First: Oklahoma's Nurse-Family Partnership Annual Report State Fiscal Year 2014." <http://www.ok.gov/health2/documents/Children%20First%20AR%20SFY-2014.pdf>