



N.C. Nurse Family Partnership Sustainability & Expansion Resource Manual In Summary

Prevent Child Abuse North Carolina
April 2010

The purpose of this Resource Manual is to make available essential information for sustaining and expanding the Nurse-Family Partnership (NFP) program in North Carolina. NFP is the nation's oldest and most tested home-visitation program. Currently, there are eight North Carolina NFP programs serving families in ten counties and all hope to expand so they can serve the full need of their service area.

In March 2010, Congress and President Obama enacted a new federal program to provide grants for states to begin or to expand evidence-based home-visiting programs. This report hopes to jump-start and inform North Carolina's efforts to apply for federal funding, to support the current NFP programs, and to expand NFP to more areas of the state.

Nurse Family Partnership in North Carolina

- North Carolina has eight local NFP programs funded to serve up to 800 families in ten counties.
- NFP is a high intensity program for low-income new families from pregnancy until the baby turns age 2.
- Thirty years of research defined 18 required program elements, including methods of quality program implementation.
- NFP achieves three goals when implemented with fidelity:
 - Improved maternal health and birth outcomes;
 - Improved child development and health; and
 - Increased family self-sufficiency.



N.C. Pregnant Women and Young Children Have Significant Health, Safety and Economic Security Needs

- **Thirteen years of Improvement:** Most of North Carolina's maternal health and birth outcomes improved between 1990 and 2003.
- **Stagnant since 2003:** Improvement of most indicators has flattened out or worsened since 2003.
- **N.C. Below National Average:** North Carolina remains among the 15 poorest performing states for most maternal and birth outcome measures and overall child well-being.
- **African-American Outcomes Lag:** African-American maternal health and birth outcomes lag significantly behind those of Whites. Black infant under 1 year die at twice the rate of Whites.
- **Abuse & Neglect Highest Among Youngest:** Children Ages 0-5 are 26% of the state's child population but 51% of the reports of abuse and neglect.
- **Poverty Highest Among Youngest:** Half of all N.C. births are Medicaid eligible and children under 5 years of age are in poverty a rate of 1.5 times that of the overall poverty rate.

NFP meets N.C. Family Needs and Complements Current Services

- **Four other home-visiting programs in North Carolina:** Maternity Care Coordinator Program, Early Head Start, Healthy Families and Parents as Teachers.
- **The scope, duration, methodology and intensity of NFP differs** from the other four home-visiting programs in North Carolina. Research of NFP is greater than any other program.
- **Significant unmet need among low-income pregnant women:** The non-NFP home-visiting programs are funded to serve about 30% of the 65,000 Medicaid covered births in North Carolina annually. NFP complements this by serving high-risk new families from pregnancy to age two.
- **There is significant unmet need among low-income children under three.** More than 91,000 North Carolina children under three lived in poverty in 2008 and Early Head Start and Parents as Teachers were funded enough to serve fewer than 10,000 children. If NFP were implemented statewide, the three programs combined would still not serve one-third of North Carolina's low-income children less than three years of age.

State Infrastructure Needed To Conduct Five Administrative Functions

- The NFP National Service Office has advised North Carolina to create an infrastructure to meet five administrative functions:
 1. Nursing practice support;
 2. Program implementation support from training materials to convening;
 3. Generating and using data to inform performance improvement;
 4. Advocacy and political support, including communications and
 5. Fiscal oversight, budget management and contracts management.
- Government and non-government agencies, or a combination, conduct these five state administrative functions in other states with multiple local programs.

Costs and Benefits of NFP in North Carolina

- NFP costs about \$5,000 per family per year.
- Full Implementation of NFP statewide with no waiting lists would cost about \$50.6 million total.
- Benefits outweigh the Costs:
 - Independent research finds \$2.88 to \$5.70 benefit for every \$1.00 spent.
 - Rand Corporation Study found 54% savings to federal government for every \$1.00 spent.

Federal Home-Visiting Grant Program

- New program enacted March 23 and state needs assessment due September 23, 2010.
- U.S. HHS to grant \$1.5 billion to states over five years beginning in 2010, but details not released yet.

Now is the Time, Next Steps for North Carolina NFP

1. Further develop the state infrastructure to conduct the five administrative functions.
 - Consider best structure to support fidelity for the long-term
 - Select primary provider of each state function
 - Define collaborative process and role of state advisory group
2. Local NFP programs graduate first families and plan for expansion as appropriate.
3. Secure Long-term funding for N.C. NFP, including application to federal government.
4. Address shortfall in baccalaureate nurses.