

Memorandum



CITY OF DALLAS

DATE November 4, 2022

TO Honorable Mayor and Members of the City Council

SUBJECT **Upcoming Office of Community Care Agenda Item – ARPA Home Visiting Program**

On November 9, 2022, the following Office of Community Care (OCC) item authorizing an Interlocal Agreement will be considered by the Dallas City Council:

Item 22-2346: Authorize approval of an Interlocal Agreement between the City of Dallas and Dallas County, approved as to form by the City Attorney, for Parkland Health & Hospital System to implement a universal Newborn Nurse Home Visit Program as seen in **Exhibit A**, with matching funds to be provided by Dallas County - Total amount not to exceed \$2,000,000.00 - Financing: Coronavirus State and Local Fiscal Recovery Fund (\$2,000,000.00)

Background

The Novel Coronavirus Disease (“COVID-19”) pandemic and its resulting economic impacts have put a strain on health outcomes for many families in Dallas. The first few months after a baby’s birth is especially vulnerable for every family, particularly as mom heals from delivery and often finds herself home alone and learning to care for the new infant, heightening risk for postpartum depression. Research on one program has demonstrated that up to 94% of families have at least one nurse-identified risk or need postpartum. Yet there is no organized system of care to support low- and moderate-income families with newborns and children 0-5. Until a child enters school, families must navigate a complex landscape of disconnected services to survive and thrive. While there are programs, there is a lack of alignment of resources or care that connects families to relevant resources at the right time.

Universal newborn nurse home visiting is a community-wide program that can change this for families. One example of a program is called Family Connects. Family Connects is a population-level approach that coordinates care and aligns resources with a simple, evidenced-based strategy: a postpartum, nurse home-visit available to every family with newborns ages 2 to 12 weeks (and provides up to 3 home visits). In this model, nurse home visits are offered to all families in a community to assess family health and well-being at about three weeks postpartum. The touch point is light, as most families only need one visit, but they can leverage a community’s existing grid of resources and strengthen the overall early childhood system in a community therefore impacting public health and safety of young children, as well as early learning.

A study in the National Library of Medicine found that the COVID-19 pandemic has exacerbated the need for such programming as low-income families missed postpartum care appointments and delayed appointments/immunizations for their children during the

pandemic. Addressing these issues, universal newborn nurse home visiting has demonstrated efficacy in improving maternal and child outcomes and connecting families to critically needed services.

In FY 2021-22 the City of Dallas, Dallas County, and Parkland Health & Hospital System met several times to discuss a Home Visiting Program for the residents of the City and County. Parkland Health & Hospital System presented their Newborn Nurse Home Visit Program.

The Parkland Health & Hospital System universal Newborn Nurse Home Visit Program, informed by Family Connects, is a population-level approach that coordinates care and aligns resources with a simple, evidenced-based strategy that includes the below. The combined funding from City of Dallas and Dallas County will enable this service delivery to an anticipated one-third of births within the Parkland system annually:

- One to three postpartum, nurse home-visits available to every family with newborns ages 2 to 12 weeks with the number of visits based on a triaged assessment
- Offering of nurse home-visits to all families in a community on a voluntary basis and free of charge, to assess family health and well-being at approximately three weeks postpartum
- Referrals designed to leverage a community's existing grid of resources and strengthen the overall early childhood system in a community, therefore, impacting not just public health and safety of young children, but also early learning

The model aims to support low- and moderate-income families and enhance maternal and child health and well-being with the following key, specific targeted outcomes: 1) reduction of child abuse and neglect, 2) reduction of infant and toddler use of ER care, and 3) reduction of parental anxiety/depression.

This item authorizes approval of an Interlocal Agreement between the City of Dallas and Dallas County, for Parkland Health & Hospital System to implement a universal Newborn Nurse Home Visit Program, with matching funds to be provided by Dallas County

If you have any questions, please contact me or Office of Community Care Director, Jessica Galleshaw, at jessica.galleshaw@dallas.gov.



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Jack Ireland, Chief Financial Officer
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Exhibit A

Parkland Newborn Nurse Home Visit Program Proposal

Program

Short-term Universal Nurse Home Visiting Implementation at Parkland Health and Hospital System

Initial 3-Year Program Budget (2022 – 2024)

\$4,000,000

Statement of need

The time after a baby's birth is especially vulnerable for every family; research on one program has demonstrated that up to 94% of families have at least one nurse-identified risk or need postpartum, yet there is no organized system of care to support families with newborns and children ages 0-5. Until a child enters school, families must navigate a complex landscape of disconnected services to survive and thrive. While there are programs, there is no universal touch point, no ability to triage family needs, and no alignment of resources or care connecting families to the right resources at the right time.

Universal newborn nurse home visiting can change this for families. One example of a program is called Family Connects. Family Connects is a population-level approach that coordinates care and aligns resources with a simple, evidenced-based strategy: a postpartum, nurse home-visit available to every family with newborns ages 2 to 12 weeks (and provides up to 3 home visits). Nurse home visits are offered to all families in a community to assess family health and well-being at about three weeks postpartum. The touch point is light, as most families only need one visit, but they can leverage a community's existing grid of resources and strengthen the overall early childhood system in a community, therefore, impacting not just public health and safety of young children, but also early learning.

Unfortunately, COVID-19 has only exacerbated the need for such programming as children have missed appointments/immunizations, and mothers have missed postpartum care appointments. New parents are often without the resources they need to set their children on the right path to achieve their full potential. Addressing these issues, universal newborn nurse home visiting has demonstrated efficacy in improving maternal and child outcomes and connecting families to critically needed services.

Our solution calls for implementation of a universal newborn nurse home visiting program. One likely program is Family Connects, at Parkland Hospital under the [Family Connects North Texas Initiative](#). Connects North Texas.

Please watch this video about how Family Connects works: <https://vimeo.com/349037483>

Statement of Impact

Family Connects is a universal, short-term, nurse home visitation program that triages families' needs and connects them to right-fit resources at the right-time, leading to improved maternal and child health outcomes. The program changes the trajectory for families, but also improves coordination and alignment of resources amongst service providers. In addition to improved individual child and family outcomes, mortality and morbidity can be improved at the population-level, as data is gathered on community's needs to inform resource and program allocations. Family Connects provides a warm hand off to services and ensures a closed feedback loop. Research indicates Family Connects leads to a:

- 33% reduction in reports to CPS through age five
- 39% reduction in hospital emergency department visits through age five
- \$3.17 return on investment for every dollar spent

Family Connects is the most rigorously evaluated and disseminated short-term newborn nurse home visiting model but we are learning there may be other more home grown or nonproprietary models out there for consideration now or in future years.

Project Summary

Overview

The launch of Family Connects or another newborn nurse home visiting program at Parkland would be a partnership under the current Family Connects North Texas initiative. [Family Connects North Texas](#) is a **regional program** through a partnership with [Family Connects International](#), led by [My Health My Resources of Tarrant County](#) (MHMR), [TexProtects](#), [United Way of Metropolitan Dallas](#) and [Metrocare](#). Other organizations like Child Poverty Action Lab are engaged in data and evaluation of the program.

Family Connects North Texas is a population-level approach that coordinates care and aligns resources with a simple, evidenced-based strategy that includes:

- One to three postpartum, nurse home-visits available to every family with newborns ages 2 to 12 weeks with the number of visits based on a triaged assessment
- Offering of nurse home-visits to all families in a community on a voluntary basis and free of charge to assess family health and well-being at approximately three weeks postpartum
- Referrals designed to leverage a community's existing grid of resources and strengthen the overall early childhood system in a community, therefore, impacting not just public health and safety of young children, but also early learning

This proposal will support expansion of a newborn nurse home visiting implementation into Parkland Health with planning beginning in 2022. In 2019, the first North Texas site of Family Connects was launched in Arlington at THR Arlington. In June 2021, the program was launched at Texas Health Resources (THR) Presbyterian due to the support and partnership with the United Way of Metropolitan Dallas, MHMR Tarrant County, TexProtects, Metrocare Services and Child Poverty Action Lab.

Parkland and the Family Connects North Team will work closely with Family Connects International (FCI), the program model developer, based at Duke University although the program is in the process of spinning into its own 501c(3) anticipated for summer 2022. Family Connects has been implemented in 16 states across 42 sites, six of which are in Texas, including Dallas, Travis, Bexar, Victoria, Tarrant and Bastrop counties. FCI provides critical implementation support and technical assistance to all communities implementing Family Connects. Based on continued contract negotiations, model technical assistance fees and other considerations, the intent is to implement the Family Connects model into Parkland at this time, but there is flexibility in the use of other nurse home visiting models that in the future may reduce technical assistance or administrative costs in a site with the scale and reach like Parkland.

Goal

Family Connects aligns closely with and has demonstrated success on goals of reducing maternal morbidity and mortality and ensuring health equity. Family Connects is a universal, evidence-based program supporting mothers and children post-delivery with medical, behavioral health, and critical needs screening, as well as closed-loop connection to services. The intervention has been demonstrated effective at improving maternal and child health and mental wellbeing. Additionally, because the intervention is triaged and offered universally, it improves equity in health outcomes.

The model aims to support families and enhance maternal and child health and well-being with the following key, specific targeted outcomes: 1) reduction of child abuse and neglect, 2) reduction of infant and toddler use of ER care, and 3) reduction of parental anxiety/depression.

Metrics

The following metrics will be tracked and reported as components of program evaluation:

- Increased percentage of postpartum visits scheduled within 30 days and completed within 45 days of delivery (target 75%)
- Increased percentage of women with at least 2 completed postpartum visits before 85 days after delivery (target 45%)
- Increased percentage of women who complete postpartum depression screen (target 75%)
- Increased percentage of children completing at least 2 well child visits within first 8 weeks (target 60%)
- Increased percentage of infants who receive CDC recommended immunizations up to 4 months of age (Target TBD – baseline data needed)
- Reduced percentage of Emergency room visits related to infants and maternal health concerns (Target TBD – baseline data needed)
- Reduction of preventable maternal deaths occurring within 6 months post-partum (TBD– baseline data needed)

Evaluation Methodology

To evaluate efficacy of the program, we will track the above metrics utilizing:

- The FCI program participation database at the completion of the program, completion of the Edinburg Postpartum Depression screener and all referrals for medical, behavioral health or social services.
- The FCI database contains built in analytical functions to assess average participant needs, identify trends and resource gaps.
- Various analytical functions of the database will also allow Family Connects nurses to receive assignments, document assessments, track referrals, and monitor key performance indicators as well as support community-level decisions on resource allocation.
- Additionally, we will utilize data provided by the DFW Hospital Council, gathered by the Child Poverty Action Lab, for well-child visits and postpartum visits with respective primary pediatricians and OBGYNs.

Project Timeline with Key Milestones

Expansion of universal newborn nurse home visiting into Parkland Health will begin in October 2022. TexProtects utilizes the following FCI-mandated three-phase work plan when launching in a new hospital:

- Phase 1 – program preparation and feasibility which includes: 1) recruitment and hiring of FTEs 2) training of clinical and administrative staff on the program including OBGYNs, labor and delivery nurses and nurse supervisors 3) a site readiness assessment 4) community readiness plan, 5) data collection plan and full execution of a contract between the hospital and organization employing nurse visitors.
- Phase 2 – installation that involves scheduling and credentialing of Family Connects nurses and Community Alignment specialist, training them to be able to recruit and enroll patients from the labor and delivery floor into the program.
- Phase 3 – implementation which includes implementation of nurse home visits and triaged follow up visits to ensure connection to resources, as well as data input and analysis.

Approximately 6-9 months are required to move through phases 1 and 2 and begin implementation. Parkland Health staff are eager to launch and ensure this evidence-based program is offered to delivering mothers.

Program Population Impacted - Demographics

The program population will initially target 4,000 mothers delivering at Parkland Health each year, 1/3rd of the more than 12,000 mothers of babies. Parkland Hospital has one of the highest birth rates in the country.

Using 2017 Q4 - 2018 Q3 data from the DFW Hospital Council (one calendar year), there were 12,541 total births at Parkland Hospital annually, approximately 90% of them are Dallas County residents. Of the 11,367 Dallas County births, 65% of the births are City of Dallas residents.

Every 24 hours, 34 babies are born at Parkland representing one in every 250 births in the U.S. Parkland Health, as the local charitable hospital, serves patients at highest risk in our area. The highest-risk communities with the most significant health disparities represent deliveries of babies in Dallas in the following zip codes: 75210, 75212, 75215, 75216, 75217, 75241. The program will not be limited to these zip codes. Fifty percent or more of the participants will be residents of the city of Dallas. It will be eligible to mothers and newborns who meet the following qualifications:

- Residents of Dallas County and/or city of Dallas on day of delivery
- Delivered at Parkland
- Discharged with live birth
- Not receiving any other maternity nurse home visiting services – e.g., Extending Maternal Care After Pregnancy (eMCAP), Nurse Family Partnership
- Voluntary agreement to participate in the program

In a universal public health approach program or model, all families in a community are invited to participate at no cost to them. As part of certification requirements specifically for Family Connects, nurses receive training to provide culturally responsive visits and they meet families where they are, at their home, to reduce barriers to access. Sites map and liaise with diverse community resources, enhancing a nurse's ability to partner with families to identify right-fit referrals that consider family preference and demographic diversity, etc. linguistic, cultural, religious, gender identity or sexual orientation, socioeconomic status, ability. As part of community alignment, sites actively cultivate relationships with marginalized community members and leaders to promote visits and improve services. Data analysis helps identify service gaps to ensure the inclusion of all families. Each site takes measures to ensure equitable access: sites make reasonable accommodations for language interpretation and disabilities and hire nurses from the community who can provide culturally and linguistically relevant services.

Sustainability

Parkland shares the vision of Family Connects International where all children and their families have access to a continuum of community-based care to support their health and success. The program is made possible by supporters **across the region** including, Amerigroup Foundation, Arlington Tomorrow Foundation, Child Poverty Action Lab, Cook Children's Foundation, W.W. Caruth, Jr. Fund at Communities Foundation of Texas, The Meadows Foundation, The Baldrige Foundation, The Texas Department of Family & Protective Services and Texas Health and Human Services.

- Private philanthropic dollars as well as state dollars are currently funding most of the program in North Texas and in the other existing six Texas sites. Funding from local government entities plays a significant role in sustainability.
- TexProtects helped passed a Budget Rider in the 2021 Legislative Session that has the Texas Health and Human Services Commission looking into unlocking existing Children's Health Insurance Plan funds through the use of a Health Services Initiative that has the opportunity to provide upwards of \$30 million of annual funding in future years.

- Collaboration with Managed Care Organizations has led to three working Value-Based/Alternative Payment Method contracts to fund Family Connects in three different sites, which can provide approximately 25% of the costs in the associated implementation sites. The goal is to engage the Parkland Health Plan.
- HB 2333 in the 2021 session aimed to set up a competitive grant program under a Texas state agency to flow funding to Family Connects sites. While it failed to pass, there is optimism the bill can pass during the 2023 legislative session and provide a vehicle for tens of millions of state dollars to fund the initiative, in addition to the several millions currently invested in several sites, including North Texas, by the Department of Family and Protective Services and Department of State Health Services.
- As a statewide advocacy organization, TexProtects supports the Family Connects initiative in Dallas by building state infrastructure and looking to unlock all legislative policy and funding opportunities to support the initiative's local and statewide scale of universal newborn nurse home visiting.