

Testimony to  
Oregon State Senate Committee on  
Health Care

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My name is Kimberly Friedman, and I am the Managing Director of External Relations for Family Connects International based in Durham, NC.

This written testimony is intended to share information about the Family Connects model, a rigorously researched model of universal newborn nurse home visiting. Family Connects Oregon is based on the Family Connects International home visiting model and is intended to build on Oregon's current home visiting programs, expanding services to all families, regardless of income or background.

The Family Connects universal newborn nurse home visiting program is an evidence-based model designed to ensuring essential connections for each and every newborn. Taking a population-based approach, Family Connects transforms connections of families with newborns to their community care systems for equitable outcomes. It is a voluntary program and is provided at no cost to families.

While delivered universally, the program is tailored in intensity based on screening to target a family's unique needs, preferences and priorities. This approach is similar to primary medical care in pediatrics, in which the primary care provider delivers universal care, screens for medical issues, and (when necessary) refers a child for specialist diagnosis and intervention.

A registered nurse connects with a family in their home shortly after birth to share the joy of the birth; assess the child's and birthing person's physical health status (as applicable); assess unique family strengths and challenges; and respond to immediate family needs. The program is also available in the case of adoption, foster or kinship care. Working together with the family and building on identified strengths, the nurse connects the family with local community resources based on individually identified needs, priorities and preferences. And in turn, the caregiver connects with their child's needs, supporting caregiver and child health, caregiver-child relationship, child development, and long-term family adjustment.

By offering Family Connects to all families within a community, Family Connects improves health outcomes at the population level and establishes a new norm for how families of newborns are welcomed and supported in the community. The model has 3 central components that work together:

1. Integrated Home Visit
2. Community Alignment
3. An Integrated Data System

Key health areas covered during a Family Connects nurse visit include:

- A systematic discussion about the family's supports, strengths, vulnerabilities and needs using the 12 factors of the Family Support Matrix.
- Health assessment for postpartum birthing person (as applicable) and infant. The health assessment includes a blood pressure check and limited physical exam, if indicated, for birthing person and weight/length/head circumference, and physical exam for infant.
- Screening for SDOH and ACEs through Nurse query regarding mental health history, substance use history, previous parenting history, interpersonal violence exposure, incarceration of parent or partner, history of abuse/neglect and involvement of Child Protective Services as a child or adult.
- Validated written screening tools to allow another opportunity to query about level of concern, including postpartum mood disorders, substance misuse, and intimate personal violence.
- Support and guidance about topics relevant to all newborns and caregiver health needs, including:
  - o Reinforcement of connection to the medical home for caregiver(s) and infant to reduce unnecessary emergency department visits.
  - o Breastfeeding support.
  - o Safe sleep practices and Sudden Infant Death Syndrome (SIDS) prevention.
  - o Postpartum care, including scheduling postpartum appointment as needed.
  - o Caregiver-child interaction assessment and coaching.
  - o Dialogue regarding the growing relationship between caregiver(s) and child.
- Specific education and demonstrations in response to caregivers' questions and concerns or those that arise from observations during the home visit.

collaborative plan for recommendations and referrals to community services as identified by

nurse visitor and caregiver(s) including:

- o Perinatal mood disorder referrals.
- o Postpartum care, including scheduling postpartum appointment as needed.
- o Tobacco cessation referrals.
- o Intimate partner violence referrals.
- o Assistance with obtaining health insurance coverage/enrolling in Medicaid, childcare, and social services.
- o Family networking, social support building and "who do you call when you need support?"
- Signed agreements for releases of information to health providers and referral agencies, as needed.
- Plans for follow-up home visit(s) and/or telephone contacts.

Nurses can make up to three home visits to a caregiver's home, as needed, although most families receive only one visit. At 4 weeks after the last home visit, a Family Connects staff member contacts the caregiver to assess satisfaction with the program, to determine if any new needs have arisen, and to follow up on all community referrals to ensure successful connection.

### **Impact of Family Connects**

Randomized controlled trials of Family Connects published in *Pediatrics*, the *American Journal of Public*

*Health*, and *JAMA Network Open* have shown positive effects for families in several key areas

including:

- In contrast with control infants, those randomly assigned to Family Connects had significantly lower rates of infant emergency room visits and hospital overnight stays in the first year of life; these results were sustained through the fifth year of life.
- In contrast with control families, those randomly assigned to Family Connects were less likely to be investigated for child maltreatment.
- Family Connects mothers were less likely to report possible postpartum clinical anxiety.

- Family Connects mothers reported significantly more positive parenting behaviors, such as hugging, comforting and reading to their infants.
- Home environments were improved — homes were safer and had more learning materials to support infant development.
- Community connections were higher for Family Connects families.
- When using out-of-home childcare, Family Connects families used higher quality care.
- Family Connects families were more likely to use out-of-home childcare.
- Family Connects mothers were more likely to complete their six-week postpartum health check but also had more emergency department visits. (*The manuscript noted that the difference in emergency department visits might be due to an effect of Family Connects on mothers' increased awareness of their own health needs in the fourth trimester period*).

### **References:**

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