

SB 526: Universal Home Visiting  
*Senator Elizabeth Steiner Hayward*

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**Senate Bill 526 (once amended) establishes a Universal Home Visiting program in Oregon. A home visit performed by a Public Health Nurse will be offered to all new parents - regardless of income level or socioeconomic background. Participation in the program is optional.**

**Problem**

The birth of a child is a big change for any family. While the needs of each family differ, most families report they welcome support as they move through this transition. We know a safe and healthy environment during early childhood forms the foundation for a lifetime of physical and mental wellbeing and healthy relationships. We also know the importance of meeting families where they are. While Oregon's home visiting system has many assets, some critical gaps exist. *Only about 20% of families eligible for current programs are being served* by home visiting due to capacity and resource constraints. In addition, the initial connection, coordination and triage for families is missing in most communities. While several communities have explored using a common entry form, success has been variable.

**Solution**

SB 526 will allow Oregon to partner with *Family Connects*® in order to expand access and resources for a Universal Home Visiting program that is offered to all families after the birth of a new child. *Family Connects*® is an evidence-based universal nurse home visiting model. Participation is *voluntary* for families. In collaboration with hospitals and birth attendants, the Family Connects program connects with every mother (and father) of a newborn shortly after birth, ideally face-to-face while the mother is still in the hospital, to engage the family in services and offer a home visit. If requested, a brief home visit will be conducted by a Public Health Nurse (PHN) in the first weeks of life to address time-sensitive family needs. Beyond the first home visit, participants in the UHV program may then request up to two additional visits from their nurse.

**General FAQ**

*When SB 526 passes, will home visits for new parents be mandatory?*

No. Participation in Oregon's Universal Home Visiting program will be completely optional. New parents will only participate in a home visit if they chose to do so, and additional visits are always optional.

*Is a program like this already offered in Oregon?*

Yes and no. The State does offer in-home visits for Oregonians on the Oregon Health Plan, but they are not offered universally. SB 526 will roll out the *Family Connects*® program over the course of 4 years, and ensure the program is available to all Oregonians - regardless of income level, insurance type, or socioeconomic background. *Family Connects*® does already have a pilot program operating in Lincoln County, but not state-wide.

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*How does exactly will a Universal Home Visiting program work?*

After a brief initial in-home visit has been scheduled and performed, a comprehensive home visit will then be offered at 2-3 weeks post hospital discharge. The Public Health Nurse will assess the physical health status of mother and child; assess unique family risks and needs across 12 domains; respond to immediate family needs such as feeding, weight gain, sleep, parenting stress, substance abuse and mental health; and connect the family with matched local community services and resources based on individually identified needs and family wishes. Service referrals may include: medical and dental care, more intensive home visiting (e.g. Healthy Families Oregon, Babies First!, CaCoon, Early Head Start), WIC, TANF, childcare, parenting support, behavioral health services and housing. The referral might go to faith-based organization, non-profits, or government programs. Follow-up visits (0-2 total) and telephone calls as needed are offered for further assessment, facilitating linkage to community services, and family support. A call will occur 1 month after case closure for customer satisfaction, quality assurance, and confirmation of connections to community resources.

*What will the program cost and who is paying for it?*

The cost per family is approximately \$600. This will likely come from a combination of general fund and private sources such as foundations and commercial insurers. Data from other states show that there is a 2:1 return on investment in the first year of the program due to significant decreases in emergency department visits in the first year of a baby's life.

*What are the benefits to the State?*

We know that increasing access to comprehensive, preventive healthcare leads to healthier individuals, and a healthier state. Establishing a UHV program will help Oregon cut down on costly, unnecessary emergency room visits for children under the age of one. The *Family Connects*® model estimates that for every dollar invested in the program, there is a \$3.17 savings, primarily from reduced infant emergency medical care.

*For more information on Family Connects® visit: <http://www.familyconnects.org/>*

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