

Running Head: Nurse Family Partnership Initiative

Nurse Family Partnership Initiative

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Abstract

The purpose of the Nurse-Family Partnership (NFP) Project is to establish a collaborative initiative which will include Horry County First Steps, South Carolina Department of Health and Environmental Control Region 6 (SCDHEC) and other community partners focused on improving pregnancy outcomes, child health and developmental progress and overall economic self-sufficiency of families of first time, low-income pregnant women in Horry County. The South Carolina First Steps to School Readiness and The Duke Endowment came together to implement the NFP Model in South Carolina. Their goal is to introduce the NFP in two counties in South Carolina within the next year. SCDHEC Region 6 and Horry County First Steps worked together to apply for funding for implementation of the NFP Initiative in Horry County.

In 1999, in recognition of the importance of the first years of a child's life as the cornerstone in preparing a child for the demands of school, South Carolina established the First Steps to School Readiness early childhood agency. Each county in South Carolina receives federal funding to maintain individual First Steps offices that are governed by a diverse local board and offers a broad array of services to moms, infants, and young children to promote success for the child when reaching school age. The NFP Initiative broadens the scope to include improved health and well-being and economic self-sufficiency for first-time low-income parents and their children.

After nine months of work, funding for the NFP model in Horry County is virtually assured. Implementation is scheduled for January 2009.

Introduction / Background

When reviewing key indicators in South Carolina of Maternal and Child Health data the following statistics are revealed:

- South Carolina child poverty rate is one of the highest in the nation @ 22.7%
- South Carolina's low birth weight rate for infants is 10.2%
- South Carolina ranks 48th nationally in infant mortality with 9.3 deaths per 1000 live births
- 26.4% of pregnant women receive less than adequate prenatal care

<http://www.sckidscount.org/kc07.php?COUNTYID=47>

When looking at data specific to Horry County, the following statistics illustrate the overall status:

- Horry County's child poverty rate is 23%
- Horry County's low birth weight for infants is 10.6%
- Horry County's infant mortality is 9.4 deaths per 1000 live births
- 38.4% of pregnant women in Horry County receive less than adequate prenatal care

<http://www.sckidscount.org/kc07.php?COUNTYID=26>

Good health in the formative years helps children reach their maximum potential in life. Early and continuous prenatal care makes a difference in assuring the birth of healthy babies. Infant mortality is strongly associated with low birth weight. All of these variables, when coupled with low socio-economic factors, can dramatically influence the readiness of a child to learn when entering school. Intervention in these early years has been proven to have a positive impact on future unintended pregnancies, prenatal health, childhood injuries, and maternal employment (<http://www.nursefamilypartnership.org/index.cfm?fuseaction=home>).

Project Description & Objectives

The overall project goal was to apply for grant funding to implement the NFP model of service delivery in Horry County. The initial phase consisted of identifying local community partners interested in a collaborative relationship focused on improving pregnancy outcomes and child health and developmental readiness issues while fostering economic self-sufficiency within the target population of first time low-income moms. Our time line was as follows:

- 2/5/2008 Presentation to Horry County First Steps Board for approval to pursue grant.
- 2 – 3/2008 Identify local potential partners i.e.; federally qualified health care centers (FQHCs), local hospitals, obstetric providers, schools, and local agencies, currently working with moms and babies. Invite potential stakeholders to meetings to discuss the NFP initiative and community benefits.
- 3/2008 Attend the South Carolina NFP Bidder's Conference to obtain application requirements.
- 4 – 6/2008 Collaborate with Horry County First Steps to write proposal and submit application for NFP funding. Evaluate resources and plan implementation strategies if awarded funding.
- 8/2008 Funding announcement anticipated.
- 9/2008 Advised by NFP national office to submit funding to Blue Cross Blue Shield (BCBS) Board
- 11/2008 Anticipation of announcement of BCBS funding
- 1/2009 Planned Implementation of NFP Initiative

SC DHEC has a longstanding history and partnership with the Horry County First Steps Agency in serving the target population of first time, low-income moms and babies. This shared interest in the well-being of mothers and young children laid the groundwork for writing this grant, and the collaborative process will serve to maximize dollars available for operating the program on a local level. Objectives for the NFP grant application process included:

- Conduction of a needs assessment
- Identification of implementing agency
- Conduction of community forums
- Solicitation of letters of support from community stakeholders
- Identification of potential partners
- Identification of potential board members for the NFP project if funded
- Identification of funding sources for ongoing project sustainability
- Implementation of NFP model in Horry County

Results

As stated previously, funding for the NFP Initiative in Horry County is now virtually assured, though it will not come from the Duke Endowment as anticipated. Of the seven sites in South Carolina submitting applications, only two were awarded funding through the Duke Endowment. After careful review of the applications by the National NFP office, two additional sources of financial support were identified, enabling four more sites to be funded. In the end, six sites were selected for funding and implementation of the NFP initiative. Horry County will receive its funding through the BCBS Foundation. Implementation of this model is scheduled to begin in January 2009. SC DHEC Region 6 will be the implementing agency and Horry County First Steps will be the fiduciary agency. Total funding of \$1,379,651 for a three year start up

period will support one MSN or BSN prepared registered nursing supervisor, four front line BSN prepared registered nurses, and one administrative support person. The budget includes funds for salaries, travel, education, and office supplies. Once the three year BCBS funding ends, the Duke Endowment will consider funding an additional four years, as stated in the original NFP grant application process.

Dr. Covia Stanley, the Region 6 Health Director and SEPHLI scholar mentor, was instrumental in working with community agencies to garner support for the NFP project. His direction and guidance paved the way for promotion of the NFP model, budget development, and allocation of office space. As competition increases for public health dollars, the grant offers a means to expand services to the target population. Part of the grant application included a comprehensive needs assessment of Horry County. Dr. Stanley was instrumental in bringing key stakeholders to the table, and this offered many opportunities for growth in leadership and communication for the SEPHLI scholar. His timely feedback throughout the process was invaluable.

Leadership Development Opportunities

From a leadership perspective, this project offered a unique opportunity for self-assessment and personal leadership development. It presented daily opportunities to develop leadership and communication skills in critical thinking, building collaborative partnerships, and networking in social and political areas in Horry County.

Public health is constantly seeking platforms to enhance public knowledge of strategies to improve the general health of designated populations. Promoting the NFP project was an ideal opportunity for the SCDHEC Regional Nursing Director (RND) to interface with key leaders on the national, state, and county levels interested in improving maternal child health outcomes.

Working with private physicians, local hospitals, FQHCs, schools, and local agencies was fertile ground for further leadership growth in public/private partnership development.

Effective leadership skills were essential in eliciting support of the NFP model. If funded and implemented, growth of the project would require referrals from a variety of agencies within the county. Referrals would directly correlate with the perceived effectiveness of the NFP model. Acceptance by potential partners depended on the effective promotion of the NFP by the RND. Many local agencies could view this as yet another “flavor of the month” project, which would fade away once funding ceased. Convincing data based on evidence-based research and benefits to the community was shared with community partners on a regular basis. This need for nurturing presented an opportunity for the RND to grow in the area of effective communication.

Leadership skills were honed through garnering following and support for one’s ideas and initiatives. The pursuit of the NFP grant offered opportunities for self and group improvement, which added value, both individually and to the grant team as a whole. The underlying theme of awareness of choice by an individual or group was essential in promoting the NFP. The project must reflect the community’s desires and needs and support innovation and action by the collaborative partnership through implementation of the NFP model. Opportunities to problem solve when conflicts arose fostered growth in leadership skills for the RND as the team progressed through the various stages of the process.

Going into the project, the major goal was to improve communication skills while working internally and externally to establish a public / private partnership designed to impact the health and well being of moms and babies in Horry County. In retrospect, the SEPHLI Individual Leadership Project created opportunities for growth in all areas identified by the plan. Numerous scenarios created by the process allowed improvement in communication skills in the area of employee empowerment. The books, articles, reading assignments, and individual

personality assessments yielded insight into enhanced communication techniques. Experience gleaned through the process taught that moving at a slower pace in meetings when presenting a new idea or project affords team members needed time for dialogue and buy in. Weekly team meetings with leadership staff allowed ongoing practice of techniques designed to improve communication skills.

Identified staff members were given opportunities for continued growth during the project through participation in work groups, community forums, and follow-up activities such as chairing meetings and agenda preparation. Key individuals participated in interviewing and hiring processes, further enhancing supervisory and managerial skills.

The NFP project increased understanding of team member roles in a multidisciplinary setting. Each team member had a unique role and each role was valued, which was essential to the successful completion of the project. Because many members of the NFP grant team were not under the SEPHLI scholar's chain of command, a variety of techniques were needed to create a common vision among the team. Buy in was essential for all involved, and was accomplished through framing the NFP benefits so that each member could see the benefits from his or her unique perspective. In other words, the administrator could see an increase in the budget, the nursing director could see the opportunity to have a greater impact on the needs of the maternal and child health population, and community partners anticipated the development of a seamless continuum of care for the target population.

The NFP process had highs and lows. Some team members required more time to process the recognized need for change and its benefits, while others bought in at the first meeting. Maintaining a focused interest in the project required ongoing dialogue.

During the project, the SEPHLI scholar had to function as a role model and demonstrate effective communication and leadership techniques while working with a diverse group of

people with a vested interest in the project. Remaining calm and not over reacting were and continue to be areas to work on in the future for the scholar.

The SEPHLI scholar is definitely a stronger leader having completed this process, and SC DHEC Region 6 has an opportunity to provide increased services to first time low-income mothers and babies in Horry County.

Conclusion

Successful implementation of the NFP model of care will yield benefits to first time low-income mothers and children for years to come in Horry County. The NFP model is an evidence-based model that has been replicated in numerous states throughout the country. It has proven outcomes that demonstrate a positive impact on the target population. SC DHEC Region 6 and Horry County First Steps are excited about the opportunity to work together to improve pregnancy outcomes, improve child health and development, and improve the economic self-sufficiency of the family in Horry County (<http://www.nursefamilypartnership.org/content/index.cfm?fuseaction=showContent&contentID=4&navID=4>).

References

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