

BEST START INITIATIVE

Integrating home visiting with prenatal health care

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Introduction

United Way of Mid Coast Maine has embarked on an innovative initiative to improve the lives of children and families in one region of the state, where families with diverse socio-economic characteristics are exclusively served by Mid Coast Medical Group and Hospital.

The Initiative has four goals:

1. To make system changes at the OB/GYN medical group and hospital and with home visiting partners to increase the number of families connected to and receiving home visits;
2. To increase capacity of community services to reach more families;
3. To strengthen collaboration across home visiting models (avoiding duplication and improving relations); and
4. To develop long-term support and sustainability for the Initiative.

The first step of this project funded a Best Start Specialist to serve as a liaison responsible for connecting families to home visiting as a routine and expected part of prenatal care.

Methods

The goal of the process evaluation is to ensure the program is working to support the desired outcomes, and to identify needed improvements as partners implement the program. Another goal is to collect information that helps explain the results of the outcomes evaluation. The outcomes evaluation examines potential for change in key outcomes as a result of early engagement with home visiting programs in the region, compared to accessing services as usual in other areas of Maine. An example of the outcomes being compared include: frequency and intensity of home visits, rates of breastfeeding initiation, and utilization of other community-based resources and supports.

The evaluation employs both qualitative and quantitative data collection efforts: annual interviews, focus groups, electronic records entered by the Specialist; and extracts from case management records from home visiting programs.

Goals

The results of this study will inform the field on how to effectively blend resources and change the ways that families' access supports, from primary care to social service and early education providers. Results will also reveal the perceptions and perspectives of hospital staff in referring families to home visiting, and the degree to which these services (promoted and initiated at the hospital) contribute to positive health outcomes of children and families served.

Accomplishments to Date

Mid Coast Hospital serves about 465 families per year. The goal is to connect with 70% by year 3.

Data have been routinely collected during the pilot phase between October 2014 and March 2015.

The Specialist now documents all visits with families in the patients' electronic medical record.

Connections Made	Number
Total Referred to Best Start	183
Women seen @16-24 weeks	101
Eligible women @20 weeks*	312
Est. percent of eligible seen ~20 weeks**	32%

*Based on hospital records
**Number of patients seen between 16-24 weeks, divided by all patients at the 20th week at any time during the period.

Preliminary data from two *Parents As Teachers* programs show an increase in referrals received from the hospital:

Before the specialist was in place: 55%

After the specialist was in place: 75%

CHARACTERISTICS OF PROGRAM PARTICIPANTS

Average age is 27-28, ranging from 16 to 42.

Two-thirds have private insurance.

Although half are first-time parents, the majority have at least one other child living in their home.

65% of referrals are married; 90% reportedly live with father of baby.



Lessons Learned

- Issues related to patient confidentiality and hospital record-keeping are complex and require involvement of leadership and data systems coordinators.
- Ideally, the home visiting liaison has their own space and easy access to patient records.
- The nature of the hospital setting demands quick and efficient documentation and sharing of info electronically.
- Hospital staff initially thought home visiting was only for "high-risk" patients, reducing referrals.
- Hospital staff, especially nurses are important partners in ensuring that connections are made prenatally.
- (New) parents receive a great deal of information during prenatal appointments; making connections with home visiting can be more overwhelming than helpful.
- Experienced parents (those who did not have the benefit of a home visitor with their first children) perceive home visiting to be unnecessary.