Basics about the Bastrop Family Connects Program

Description: An evidenced-based nurse home visiting program that originated in North Carolina.

Aim:

- Support/Connect with the mother/caregiver to enhance maternal skills & self-efficacy
- Assess the physical health/healing of the mother & her baby
- Assess each family’s unique strengths & needs
- Connect the family with community resources to address identified needs

Program Design Basics:

- ALL Bastrop County newborns & their moms/caregivers are eligible for the program
- 1-3 FREE visit(s) by a friendly, knowledgeable and supportive RN to the home with the initial visit ideally around 3-4 weeks post-partum

Outcomes (from North Carolina evaluation findings):

- Higher Quality Parenting Behaviors
- Better Maternal Mental Health
- Reduced hospital/emergency visits for up to 24 months post-visit
- Utilization of Higher Quality Child Care
- Higher Quality Home Environments
- Greater Community Connections
- Etc.

THREE WEEKS
Visits are scheduled around 3 weeks after your baby's birth

FOR ALL
Helping all families, regardless of income or background

NO COST TO RECIPIENTS
As an eligible recipient, you will not be charged

REGISTERED NURSE
All visits are made by highly-trained nurses

For more info, contact the Bastrop Family Connects team at: BastropFamilyConnects@lsctx.org
Family Connects Universal Newborn Nurse Home Visiting Program
Impact Evaluation Highlights

Program Overview:

Family Connects (FC) is an innovative newborn nurse home visiting program designed to address existing limitations to targeted home visiting programs. The program is brief (1-3 nurse home visits) and is implemented universally to maximize population reach and community acceptance. Its goals, however, are consistent with existing, evidence-based nurse home visiting programs: 1) to connect with the mother in order to enhance maternal skills and self-efficacy; 2) to assess each family's unique strengths and needs; and 3) to connect the family with needed community services such as health care, child care, and financial and social support in order to promote family functioning and child well-being.

Impact Evaluation Highlights:

The following are findings from evaluation of Durham Connects in Durham, North Carolina, from which the Family Connects model was developed.

6 Months Post-visit
Results from interviews with a random, representative subsample of families:

- **Greater Community Connections**: FC-eligible families reported 15% more connections to community resources within the past three months.

- **Utilization of Higher Quality Child Care**: When using center-based care, FC-eligible families utilizing higher quality care, as rated by the North Carolina 5-Star Child Care Rating System (4.61 vs. 3.98).

- **Higher Quality Parenting Behaviors**: FC-eligible mothers reported significantly more positive parenting behaviors with their infant (e.g., hugging, reading); Blinded research assistants independently rated FC-eligible mothers as providing higher quality parenting (sensitivity to, and acceptance of, the infant).

- **Higher Quality Home Environments**: Blinded research assistants independently rated FC-eligible families as having higher quality home environments (e.g., safety, books, toys, and learning materials).

- **Better Mother Mental Health**: FC-eligible mothers were 28% less likely to report possible clinical anxiety.

- **Reduced Emergency Medical Care for Infants**: FC-eligible mothers reported 82% fewer infant hospital overnights, and 34% less total infant emergency medical care (hospital overnights + emergency department and emergency doctor visits).
  - Based on implementation costs and average cost of child emergency care, we estimate $3.02 in emergency health care savings for each $1.00 spent on Family Connect.

12 Months Post-visit
Results from administrative hospital record reviews:

- 85% fewer hospital overnights
- 50% less total infant emergency medical care

24 Month Post-visit
Results from administrative hospital record reviews:

- 37% less infant emergency medical care
  - Significant decrease in emergency medical care from 0-12 months; decrease sustained through 24-months