

Improving Birth Outcomes: The City of Milwaukee Health Department's Multi-Program Approach



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October 2, 2014

Objectives

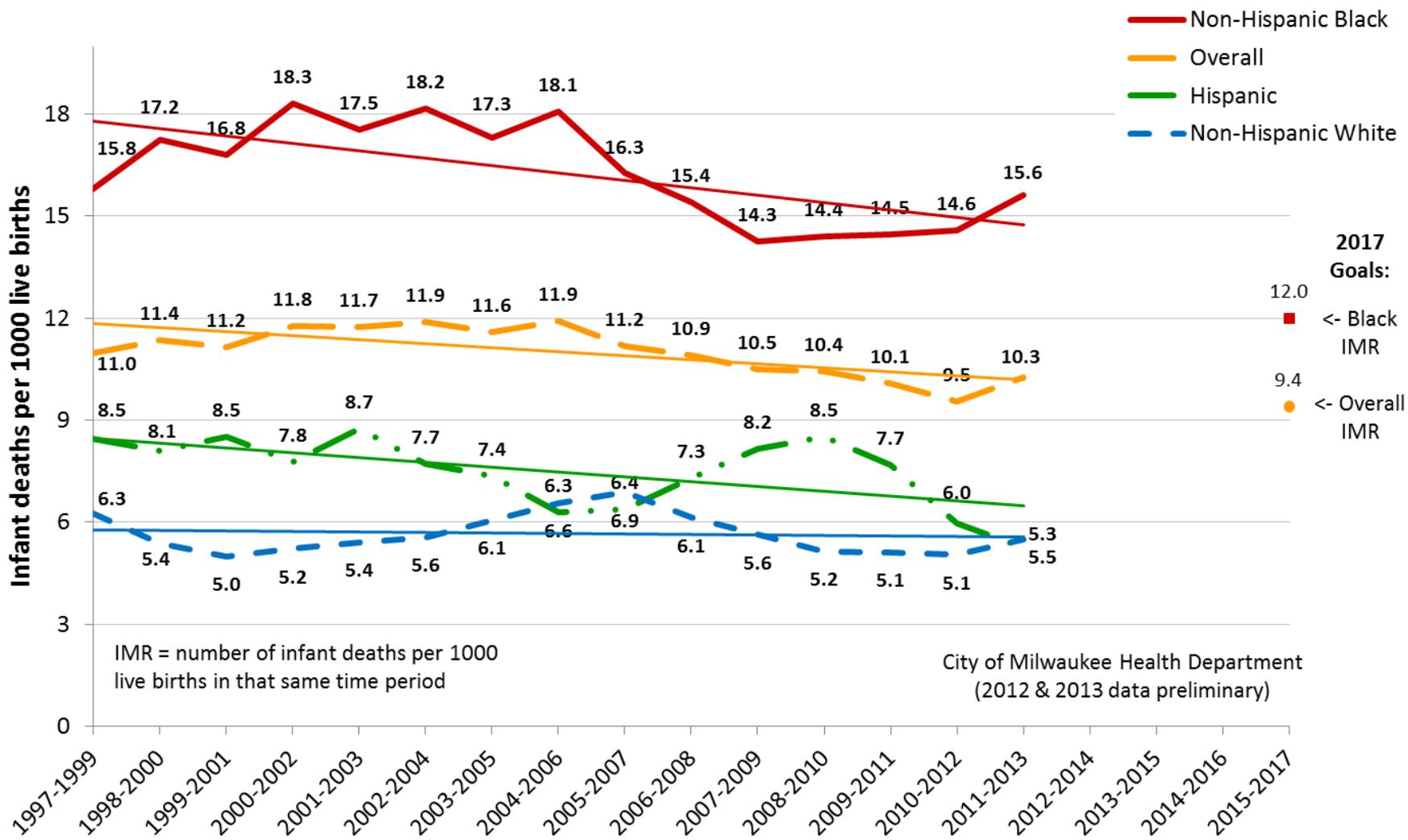
- Provide overview of MHD home visiting programs
- Describe challenges
- Highlight community partnerships
- Call to action



RATE of Infant Deaths - 3 year rolling averages

CITY OF MILWAUKEE INFANT MORTALITY RATE (IMR)

Recent Trends in 3-yr Average IMR by Race & Ethnicity



Fetal Infant Mortality Review (FIMR)

Recommendations

1. Improve individual behaviors, such as early prenatal care, smoking cessation and safe sleep
2. Improve access to quality medical care, especially for women with infections, chronic medical conditions, or prior preterm births
3. Reduce lifecourse stressors (which may be the most important drivers of prematurity) across a wide range of areas, from safe neighborhoods and fatherhood involvement to early childhood education and job preparation programs

City of Milwaukee Health Department Four-Pronged Approach

1. Direct Service
2. Research and Evaluation
3. Public Education
4. Community Partnerships



Direct Service: Home Visiting Programs

- Diversification in approach:
“One size does not fit all”
- Strategically align various private and public funding streams
- Assure a seamless approach with complimentary targeted interventions
- Synthesize evaluation measures

Benefits of Home Visiting

- Evidence-based approach
- Early prenatal interventions
- Builds relationships through intensive contact
- Provides needed social support
- Assures access and provides advocacy for beneficial community resources
- Return on investment
- Community impact



Shared Program Goals

- Improve pregnancy and birth outcomes
- Improve child health, safety, and development
- Enhance family functioning and improve parent's economic self-sufficiency
- Prevent child abuse and neglect



Empowering Families of Milwaukee

- Started 2006
- **Target Population:** Pregnant woman residing in the City of Milwaukee, can remain enrolled until child is 3 years of age
- **Funding:** Maternal, Infant and Early Childhood Home Visiting State Home Visiting Grant; United Way Infant Mortality Reduction Grant; O&M
- **Evidence-based model:** Healthy Families America
- **Curriculum:** Parents as Teachers
- Unique interdisciplinary dyad approach: Public health nurse and public health social worker/community health worker

Nurse-Family Partnership

- Started August 2007
- **Target population:** Low income teens and women pregnant with their first child
- **Funding:** O&M, Title V Maternal Child Health Grant
- Evidence-based national model with visits by bachelors-prepared Registered Nurses
- Rigorously researched for over 30 years with significant positive long-term outcomes

Parents Nurturing and Caring for their Children (PNCC)

- Started February 2009
- **Target Population:** Medicaid benefit, serving families from pregnancy through 2 months of age
- **Funding:** O&M
- Ability to continuously serve new families due to short, effective interventions
- 4 Public Health Nurses serving pregnant women and their families within the City of Milwaukee

Direct Assistance for Dads (DAD) Project

- Started Fall 2013
- **Target population:** Expecting and parenting **fathers** of children ages 0-18 months
- **Funding:** WPP (LIHF); Maternal, Infant, & Early Childhood Home Visiting grant
- **Curriculum:** 24/7 Dad & Parents as Teachers
- Only HV program for fathers



Home Visiting Data

2013

- Received 396 referrals for home visitation services
- Served 512 families through 6,540 face-to-face home visits
- Enrolled 99% of women prenatally
 - 37% in 1st Trimester
 - 42% in 2nd Trimester
 - 21% in 3rd Trimester



2013*	MHD HV
Number of babies born*	177
% Born full term* (≥37 weeks)	91.0%
% Born >2500 grams*	89.3%

Challenges

- Participant retention
- Funding
- Public health nurse retention



Feedback from Families

“They provide every type of service-information on pregnancy, how to be a good mother, breastfeeding, financial assistance, cribs, car seats, diapers. I think it’s a really good program, I really like it.”



“They support me and my baby. Anytime I needed something they are there for me. They help you with your children and encourage you to set goals (i.e. graduating high school and getting a better job etc)”



“I know they’re not gonna give up on me. It’s genuine people helping me out because they want to.”



Community Partnerships

- Aurora Family Services
- Children's Hospital of Wisconsin Community Services
- Children's Outing Association
- Milwaukee Home Visiting Community of Practice
- Safe Sleep Community Partnerships
- St. Vincent de Paul Society
- United Way of Greater Milwaukee and Lifecourse Initiative for Healthy Families (LIHF)



Project of the Wisconsin Partnership Program
University of Wisconsin School of Medicine and Public Health

Milwaukee Home Visiting Community of Practice

- MHD convenes and sponsors group
- **Objective:** Create a coordinated network of home visitation programs and services that increases accessibility for families and encourages the use of best practices and evidence-base standards
- **Topics:** Program Service Delivery, Staff Competencies, Program Management & Leadership, Program Evaluation, Cultural Competency
- 25 home visiting programs participate; 70-80 participants/meeting

Call to Action

- Home visitation is a benefit and is effective in reducing infant mortality
- Strengthen community partnerships for increased referrals
- Support public health funding
- Refer pregnant women and expectant fathers

414-286-8620

<http://city.milwaukee.gov/Nurse-Home-Visits>

Thank you!





Tom Barrett, Mayor
Bevan K. Baker,
Commissioner of Health
www.milwaukee.gov/health

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