

Evidence-based Home Visiting

Evidence-based home visiting (HV) programs can help educate and engage high-risk families to address medical and psychosocial risk factors that positively impact health outcomes. Delaware HV programs include Nurse Family Partnership, Healthy Families America and Parents as Teachers, with each having their own eligibility criteria and service model. Together, they are an important part of the system of care to support pregnant women and families with young children.

Data from multiple years of fatality reviews confirms low rates of referrals to HV programs as documented in the medical records and even lower rates of high-risk families enrolling in services. Table 1 summarizes findings from three years for CDR/SDY, FIMR and MMR cases. While there is some improvement in the 2018 referral and enrollment rates among CDR/SDY infant cases—with all infants with prenatal substance exposure receiving an HV referral in 2018—this issue has persistently been identified over several years as a priority by both the CDRC and CPAC.

Based on the low rates of HV engagement with families affected by child and maternal mortality, the CDRC voted to:

Establish a home visiting (HV) Committee to overcome barriers to establishing a HV service system for at-risk families. The committee shall address referrals, services, funding and outcome measures.

The HV Committee will study examples from other local and state programs that implement universal screening of pregnant women and infants, coordinate intake and referrals, and models of universal or precision home visiting. Actionable recommendations to address the issues and barriers specific to Delaware are the ultimate goal.

Table 1: Proportion of cases with findings from CDR/SDY, FIMR and MMR, 2016-2018

	2018	2017	2016
CDR/SDY – infant cases only			
HV referral made	50%	25%	19%
HV enrollment	19%	0%	10%
FIMR			
HV referral made	7%	11%	8%
Lack of HV referral when mother may have been eligible & benefited	58%	--	--
MMR			
HV referral made	0%	20%	0%
HV enrollment	0%	0%	0%



In addition, the 2018-2019 Joint Action Plan from CPAC and CDRC includes these two HV action items:

1. Create an opt out referral for evidence-based home visiting services in the standard nursing admission orders for every Delaware birthing hospital when the mother comes into labor and delivery and the newborn is at-risk.
2. Advocate to the Department of Health and Social Services (DHSS) and the General Assembly for Medicaid reimbursement for all evidence-based home visiting providers in Delaware.

Both of these action items will be incorporated into the newly formed CDRC HV Committee.

