



# Oregon

Theodore R. Kulongoski, Governor

Department of Human Services

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September 18, 2008

The Honorable Peter Courtney, Co-Chair  
The Honorable Jeff Merkley, Co-Chair  
State Emergency Board  
900 Court Street NE  
H-178 State Capitol  
Salem, OR 97301-4048



Re: Retroactive Request - Supporting Evidence-Based Home Visitation Programs  
to Prevent Child Maltreatment Cooperative Agreement

Dear Co-Chairpersons:

## NATURE OF THE REQUEST

The Oregon Department of Human Services (DHS) Public Health Division is requesting retroactive approval to apply for the Supporting Evidenced-Based Home Visitation Programs to Prevent Child Maltreatment Cooperative Agreement for federal funds up to \$2,500,000 over five years, beginning September 30, 2008, and ending September 29, 2013. The Emergency Board was alerted on July 8, 2008, of the department's intent to seek approval for this cooperative agreement.

The funding is available through the U.S. Department of Health and Human Services, Administration on Children, Youth and Families (ACYF), Children's Bureau. The request for applications was received May 23, 2008, and the grant application was due July 21, 2008. This grant requires ten percent matching funds in the form of cash or in-kind contributions. There is an existing nurse consultant position in the Babies First! Program funded with general fund that functions as part of the home visiting nurse consultation team to local health departments. The position duties include review, coordination and support to local health departments on home visiting programs. A portion of this position will be used to satisfy the match requirement without creating a reduction to existing budgeted services if the legislative approval is granted.



## AGENCY ACTION

Currently, many states, including Oregon, are providing various types of home visitation programs using a variety of federal, state, local and private funding. However, some of these efforts do not follow proven and effective models. This cooperative agreement provides funds to plan, pilot and evaluate a state-level structure which will provide flexibility in current requirements and existing funding streams, to allow for local delivery of an evidence-based home visitation program.

A requirement of the cooperative agreement is that grantees must select an evidenced-based home visitation program that has undergone rigorous research and been proven effective in different settings and among different populations. The national Nurse Family Partnership (NFP) program is one of the few home visitation program models approved by the ACYF guidance. Currently, Multnomah County is the only county in Oregon that implements this program in coordination with other home visiting programs. Funds from this cooperative agreement would provide the opportunity to develop a structure and system to extend the NFP program to other counties who have expressed interest in this model.

The cooperative agreement will be awarded in two phases. Phase 1 – Plan Development: state and community agencies will collaborate to conduct a comprehensive inventory of existing home visitation programs, identify existing and potential funding streams from federal, state, local and private sources, and select pilot sites for Phase 2 participation. The Public Health Division Office of Family Health (OFH) will partner with the DHS Office of Multicultural Health, the Commission for Children and Families and DHS divisions – Children, Adults and Families (CAF), Addictions and Mental Health (AMH), and Division of Medical Assistance Programs (DMAP) – to explore ways to create flexibility in current local programming, services and funding that would help communities implement the NFP model. As indicated, Phase 1 planning will include selection of pilot sites ready to implement the model in their communities. Initial discussion with local partners indicates that three to six counties are interested in participating. The culmination of this process will be a plan to develop state and local infrastructure for widespread adoption, implementation and sustainability of the NFP evidence-based home visitation program. The Phase 1 budget includes grants to participating sites ranging between \$25,000 and \$50,000 to support local planning for this model.

Phase 2 – Implementation of pilot sites and evaluation: upon successful submission of the Phase 1 State Plan, ACYF will grant annual awards for years two through five to initiate implementation of the NFP model in the selected community pilot sites. During Phase 2, a rigorous evaluation of the implementation cycle will be conducted. This will aid in development of strategies for future statewide implementation in counties where this model is proven effective. The activities funded by this cooperative agreement will increase the capacity of participating local communities to expand or enhance their current home visitation programs and other services for pregnant women and children within existing funding streams and resources.

Proposed staffing for the five year period includes additional position authority for a project manager to liaison with the national NFP office, assures successful oversight for the project and assures compliance with federal reporting requirements; a .50 FTE public health nurse to provide technical nursing expertise and consultation to the program and to local sites; a 1.0 FTE research analyst to conduct program evaluation and health status analysis; and a .50 FTE administrative assistant for project support. During the grant application development process, it was learned that the projected staffing requirements would be needed for the five year grant period and not phased in as first anticipated.

At the end of the five year grant period, these project activities are anticipated to be sustainable through a state-level structure or a system that has been developed using existing resources and built through collaboration and agency partnerships. This grant does not create a financial obligation to the state at the end of the award period.

This cooperative agreement furthers the DHS mission to assist Oregonians to become independent, healthy and safe through improved access to health care, parenting education and life skills for first-time pregnant women and young children.

### **ACTION REQUESTED**

The DHS Public Health Division requests retroactive approval to apply for the cooperative agreement, Supporting Evidence-Based Home Visitation Programs to Prevent Child Maltreatment, offered by the U.S. Department of Health and Human Services, ACYF, Children's Bureau. If funds are awarded, DHS will return to a future Emergency Board for any necessary position and expenditure limitation adjustments.

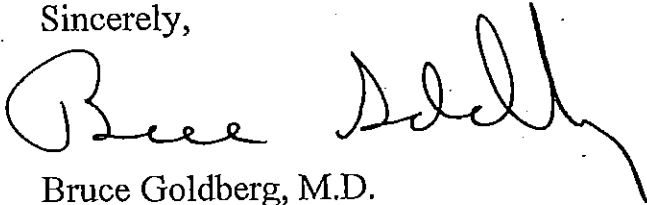
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**LEGISLATION AFFECTED**

None.

If you have any questions, please call Mike Skeels at 973-673-1222.

Sincerely,

A handwritten signature in black ink, appearing to read "Bruce Goldberg". The signature is fluid and cursive, with the first name "Bruce" written in a larger, more prominent script than the last name "Goldberg".

Bruce Goldberg, M.D.  
Director

CC: John Britton, Legislative Fiscal Office  
Sheila Baker, Legislative Fiscal Office  
Blake Johnson, Department of Administrative Services  
Michael Skeels, Department of Human Services