

FS Family Home Visiting Program Highlights

Outreach & Community Partners

- System-Level Outreach with CentraCare
 - Healthcare systems are required to incorporate Social Determinant of Health (SDOH) screener questions into health visits by 2024 to receive Medicare and Medicaid reimbursement (was an optional add-on in 2023). SDOH are conditions in the places where people live, learn, work, and play. All of which affect someone's overall health.
 - CentraCare began launching SDOH screener questions within clinic visits earlier this year and is in the process of launching them in the inpatient setting this fall. When a SDOH need is identified, providers can intervene by placing a referral to CentraCare's internal Community Health Improvement Team. This team provides resource information and places referrals out to community organizations, including us.
 - Unfortunately, CentraCare hasn't been able to provide specific data on the outcomes of the screener questions yet, nor have we seen a large influx of referrals through this process. But it has given us helpful insight about ways to reduce workflow barriers and ongoing conversations about improving this system process—not only for CentraCare, but in approaching similar conversations with other local healthcare systems.
 - This has also led me to being exploring conversation with other HV programs in our region regarding their capacity, wait lists, sharing of referrals, and reducing barriers in collaborating.
- Outreach Events
 - Family Celebration 8/24/23-Sherburne's second year planning this event. Its intent is to gather our family home visiting families in a child friendly environment and provide opportunities for families to learn about local resources, meet other families with young children, and have some fun! There were 17 community partner stations this year and the event was attended by 64 Sherburne past or currently enrolled families.
 - Hispanic Heritage Month Event 9/15/23-three Stearns County nurses staffed this event and were among 20 community partners with stations. Nearly 80 families stopped by the booth for the interactive game for children to play while parents talked with nurses. One family requested to enroll in FHV during the event and a referral was placed. Staff also brought a breastfeeding tent to be utilized by nursing mothers and pumping staff during the event—one attendee said it was "lovely" to have that available.
- Hispanic & Latino/a Communities in Central MN
 - In early summer, Lyda Avila, one of CentraCare's Community Health Worker resigned and moved out of state. Lyda is well-known in the Hispanic & Latino/a community and has been a key referral source for us (nearly 100 referrals in the past two years), all of which Spanish speaking. Lyda continues to send referrals of central MN families despite moving to NYC.
 - Families referred by her have a very high acceptance rate of enrollment. This speaks to the strength of warm handoffs from a trusted pillar of support that Lyda is in the Hispanic/Latino community to our team.
 - Approximately half of Stearns caseload is Spanish speaking; largely in thanks to Lyda.

- Our October Community of Practice event featured four Hispanic & Latino Resources from Central MN who shared about their services.

Centralized Intake Referrals

- We have had nearly 2,800 referrals through our centralized intake process. Reaching a very steady 200+ referrals a quarter this year.
- Since launching our online referral form almost a year ago, we have had 286 of the referrals come through that platform and received positive feedback from our Community Partners that it has made it more convenient for their process.

FHV Caseloads

- Continuing to see growth across our teams family home visiting caseloads, month to month, quarter to quarter:
 - Currently serving 340 families regionally and 20 families are served by home visiting nurses across county lines.
- With the continued growth and approaching capacity, our monthly meetings with our 4-county Supervisor leadership team routinely focuses on current caseloads capacity and support needed or available to offer each other.

Community of Practice & DEIB

- The goal of our CoPs is to bring FHV nurses and supervisors together to increase knowledge of local resources and facilitate shared learning. Not only do we all learn from the presenters, but presenters are also grateful to learn from each other and more about our programming as well.
- In December, we will host our second in-person CoP where we will begin with a mindfulness activity then provide an overview of 2023 collaborative updates and accomplishments. This will be our second year doing Cheers for Peers, where staff are able to submit words of recognition and praise to their peers prior to the event, all of which are compiled and shared with the staff member.

Continuous Quality Improvement (CQI)

- This quarter we finalized one of our Continuous Quality Improvement projects focused on re-engaging families after a missed home visit and/or loss of contact. Minnesota Department of Health highlighted our project during their site visit program review from the MESCH overseers/technical team from Sydney, Australia.
- This month we also launched our annual Family Feedback Survey – in which we connect with our clients to gather their thoughts on home visits, materials utilized, services & resources, what has helped, areas to improve, and the impact it is having on them/their family. The feedback we receive from our families is invaluable for gathering both constructive criticism and critical thought on improvement, coupled with amazing personal highlights of how home visitors are walking alongside families in their parenting journeys.

First Steps Strong Foundation Grant Budget Review

- We submitted our MDH Strong Foundations yearly budget proposals for the upcoming year this past quarter. This will be for year two of the five-year grant cycle. Each county received their award letter and will be a continuation of this years funding.

- Our 3rd quarter budget summary shows we have regionally expended 71% of the Strong Foundations grant, which is where we would expect to be at this time in the year.
 - Additional individual county budget notes:
 - Wright County budget is unexpectedly underspent in the “Contractual Services” line item, due to being unable to provide the planned maternal mental health training for home visitors as intended following an 8-month delay from the training developer and MDH contractual constraint. While this leaves this budget line underspent, the training should be offered next year through MDH.
 - Stearns County received a one-time special funding allotment (as a historically MIECHV/federally funded FHV agency) for the purchase of grocery cards for families served by this grant that can be seen included in the Quarter 3 expenditures.