

2006 Annual Report



*“Our lives are
changed forever”*

Letter from the CEO

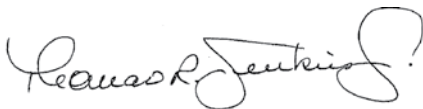
Dear Friends,

Welcome to the 2006 Nurse-Family Partnership National Service Office inaugural Annual Report. This report provides valuable insight into our daily operations and the services we provide to our implementing agencies across the country. Our goal is to provide the highest degree of program implementation support, education, evaluation, reporting, quality improvement, and advocacy, in addition to increasing national public awareness. We strive to empower our nurse home visitors and nurse supervisors who are working in the field to deliver an intervention that is scientifically proven to improve the life-course development of low-income, first-time parents and their children, while also benefiting society economically and reducing long-term social service expenditures.

In my many years of working in social service environments, I have witnessed how well-intentioned programs so often fail to help those in need, either because the intervention is too late or it is flawed in its implementation. Nurse-Family Partnership is unique in a multitude of ways, but the evidence-based foundation on which this program was developed and the subsequent outcomes that can be witnessed across multiple generations is proof positive that this program works! In fact, we continue to monitor program implementation in existing sites, and provide a catalyst for continued research by Dr. David Olds that is the basis for future program replication. This constant vigilance to maintaining fidelity to the program model produces consistent outcomes for today's participants that include improved prenatal health, fewer childhood injuries, fewer subsequent pregnancies, increased intervals between births, reductions in child abuse and neglect, reduced involvement with crime, increased maternal employment and improved school readiness.

With this strong foundation of compelling evidence and demonstrated ability to replicate the program successfully, as well as increasing support from the Federal government, we are poised to systematically and aggressively expand the availability of the Nurse-Family Partnership program throughout the United States. Our ultimate goal is to serve every eligible, first-time mother in this country, and while that may seem ambitious, we firmly believe we are ready to accept the challenge. Our strategy in reaching this goal involves a primary focus on four objectives: program development, government relations, marketing and communications, and infrastructure development. You will be reading more about these objectives in subsequent sections of this report.

The Nurse-Family Partnership National Service Office is a 501(c)(3) nonprofit organization; it is through the generous support of donors like you that we are able to support this national initiative. We thank our donors – individuals as well as private and public institutions who are recognizing the program's efficacy and long-term results. Together, we can help low-income, first-time parents succeed. The return on your investment will be realized in that we as a nation will have healthier children, less child abuse and neglect, and a reduced demand for social services as children mature; and as young mothers, who often are still children themselves, move forward with new and ambitious education and career objectives. Help us open a new window of opportunity for the next generation.



Thomas R. Jenkins, Jr.
President and CEO





David Olds, Ph.D.

- *Founder, Nurse-Family Partnership*
- *Professor of Pediatrics, Psychiatry, Preventive Medicine, and Nursing*
- *Director, Prevention Research Center for Family and Child Health, University of Colorado at Denver and Health Sciences Center*



Opportunity to Transform

A young girl from an economically depressed neighborhood, most likely a teenager, becomes pregnant for the first time. She is not prepared for motherhood, does not receive adequate prenatal care, drops out of school, and has no viable way to support herself and her baby.

Now, imagine that a highly educated, nurse home visitor forges a relationship with the girl during the early months of her pregnancy and inspires the mother-to-be to create the best life she can for her baby. By meticulously implementing the Nurse-Family Partnership program, this dedicated nurse helps her client transform her own life so she can offer her baby a better future, despite the obstacles posed by multi-generational poverty.

This success is currently being replicated, thousands of times every year by the evidence-based, Nurse-Family Partnership program. The remarkable viability of the program is substantiated in rigorous clinical studies and in the lives of 69,000 young mothers in 22 states.

But this is only a small fraction of the population who could benefit from these services. According to Medicaid records, 650,000 babies are born each year to low-income, first-time mothers. Focusing on prevention as the key to transforming lives born into poverty, the National Service Office is striving to replicate this life-changing program in more communities across the nation.

David Olds, Ph.D., who created this home visiting model, recognized that the best *window of opportunity* to change the ubiquitous patterns of poverty, violence, school failure and crime occurs very early in life. Nurse-Family Partnership is the result of three decades of extensive research, conducted through three randomized, controlled trials that boast scientifically demonstrated outcomes that dramatically alter the life trajectory of high-risk families. In short, lifestyles begin in the womb because a baby's development depends, to a great extent, on the lifestyle of the expectant mother.

The Nurse-Family Partnership National Service Office works behind the scenes to educate the nurse home visitors who are the heart and soul of the program's success. In addition, the National Service Office provides support in program management, evaluation, reporting, quality improvement, marketing, federal policy and program finance that keep the program running smoothly and effectively throughout its ever-expanding network of implementing agencies, while preserving fidelity to the Nurse-Family Partnership model.

“...[Nurse-Family Partnership] stands as a testament to what health care can accomplish by focusing on families. It can change whole life trajectories, that’s a goal to aspire to.”

**– Dr. Jeffrey Kaczorowski of the University of Rochester.
Newsweek, April 25th, 2005**



“My nurse helped me set goals and made me see that I could do so many other things, most importantly she helped me see that I could provide a secure life for my baby”

– Nurse-Family Partnership client



“This is a renaissance in public health nursing.”

**– Nurse-Family Partnership
Nurse Home Visitor**

Opportunity to Educate

Becoming a mother for the first time can be a daunting experience for anyone, but imagine if you are young, unmarried, have limited resources, and are living in an impoverished and oftentimes harmful environment. Nurse-Family Partnership strives to alleviate, if not eliminate the long-term impact these environmental effects can have. Nurse-Family Partnership shows clients how to succeed despite their circumstances – to make better choices that will improve their pregnancy outcome, their child's health and wellbeing, and their future.

It takes a paradigm shift for young women to change their lifestyle, especially those who seem trapped by their circumstances – where education, safety and good health care may seem out of reach. For the client, their Nurse-Family Partnership Nurse Home Visitor is a positive, supportive role model. The Nurse-Family Partnership National Service Office provides nurses with intensive education to facilitate change in the lives of at-risk, low-income, first-time moms and their babies.


Research shows that Nurse-Family Partnership is successful because it is delivered by registered nurses who have the judgment, education and compassion to implement the intervention. The National Service Office educates nurses to deliver the intervention with fidelity to the model elements developed from the three randomized, controlled trials. Face-to-face education sessions with skill building and coaching from experienced staff members greatly enhance the nurse's readiness to face the challenges associated with this high-risk client base. As a result, the nurse home visitor is prepared for her role of educator and life coach to help young women redirect their lives to achieve their hearts' desire.

Nurse-Family Partnership Nurse Home Visitors work one-on-one with each client and her family

introducing health and parenting information and life course development skills. Step-by-step, clients learn how to care for the health needs of themselves and their babies, access community services, form their own support system, plan for the future and become more self reliant. In the midst of multi-generational poverty, these skills form the basis for *hope and a way out of poverty.*



Thanks to the diligence and passion of our nurses, thousands of at-risk mothers are successful, nurturing parents. They are also obtaining higher education, are gainfully employed and are leading more productive lives.



“As a result of the investigators’ [Olds and colleagues] ongoing commitment to rigorous designs with careful and comprehensive follow-up and their perseverance in exploring the limits of their intervention, the field of child maltreatment – and child health in general – now has critical information about an effective approach to preventing child abuse and neglect.”

*– Harriet MacMillan &
Nadine Wathen (2005).
The Journal of the
American Medical
Association (JAMA)*



Opportunity to Measure Results

Our Mission: The Nurse-Family Partnership National Service Office provides service to communities in implementing a cost-effective, evidence-based nurse home visiting program to:

- *Improve pregnancy outcomes;*
- *Improve child health and development; and*
- *Improve self-sufficiency for eligible, first-time parents – benefiting multiple generations.*

Credible, verifiable, scientific research lies at the heart of Nurse-Family Partnership. This is why Nurse-Family Partnership is called an “evidence-based” program. To adhere to this, the National Service Office collects data about the program’s implementation, service provision and outcomes for clients from participating implementing agencies nationwide. Ongoing monitoring of program implementation is integral to program quality and subsequent success of the intervention with clients.


To ensure the utility of the information collected the National Service Office helps agencies and nurse home visitors understand how to obtain quality data as well as how to use and interpret that data. Data collected serves many purposes – documenting services received by clients enrolled in the program, tracking the client’s progress in attaining program goals, providing feedback to individual nurse home visitors on strengths and areas for improvement in implementing the program model, and planning quality improvement initiatives to enhance program implementation and outcomes at the local level.

Measurements include such factors as whether mothers stop smoking or using other substances in pregnancy, the number of low birth weight babies born, how many mothers are breastfeeding, the

developmental progress of the child, and whether the mother is continuing with her education or returning to work. Information on client characteristics is also gathered to understand the population served.

By analyzing the data and reporting back to participating agencies, the National Service Office helps to preserve the efficacy of the program so it can be replicated faithfully and successfully in diverse communities nationwide. Through intensive evaluation and monitoring, the National Service Office ensures quality program implementation and creates lasting change in the lives of families most at risk in our society.





“Nurse-Family Partnership is one of the few proven methods of preventing our children from tumbling into the juvenile justice system.”

—President’s New Freedom Commission on Mental Health, 2002



“This is the gold standard for early intervention programs.”

—Jennifer Atler, Invest in Kids, Colorado

Opportunity to Improve Services

Nurse-Family Partnership is in the business of changing lives, with a specific methodology, delivered in a particular way through one-on-one, nurse home visiting with a high-risk population. The quality of these interventions makes a life-transforming difference for low-income, first-time mothers and fathers; their babies; and multi-generational family groups.

Nurse-Family Partnership is a partnership not only between nurses and clients, but also with the ever increasing network of implementing agencies, comprised of a diverse array of state, county, and community health departments, as well as private independent entities. The program's success is directly linked to how well it is implemented by approximately 800 nurse home visitors and nurse supervisors in 22 states.

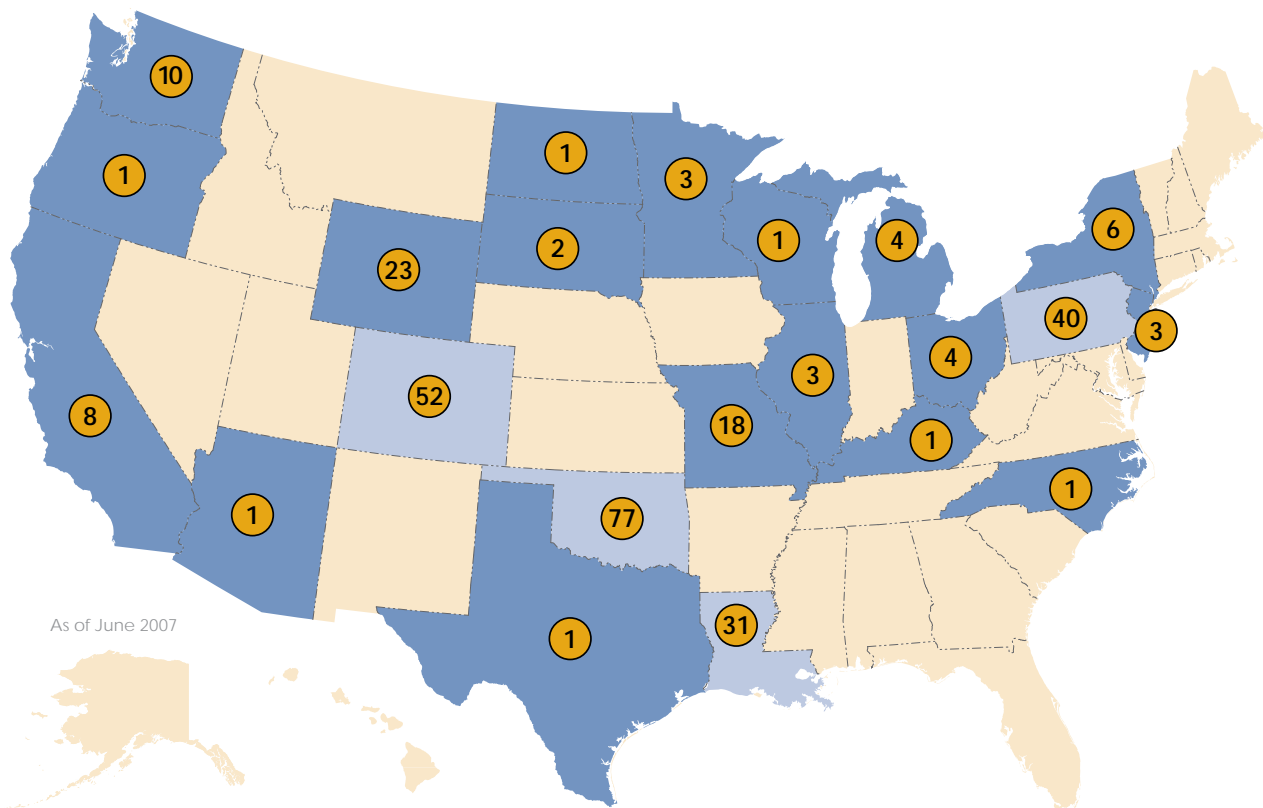
During the past year, the National Service Office has embarked on a *Program Implementation Evaluation* project, to examine the successes and challenges of each of its implementing agencies. The National Service Office conducted phone interviews with supervisors and administrators from across the country. The information gathered is helping the National Service Office to improve its services so that the elements of this landmark program can be more effectively administered and monitored with fidelity to the Nurse-Family Partnership model.

The National Service Office is continually fine-tuning its services to meet client needs. Current areas of improvement include: helping nurses and supervisors use clinical reporting methods to inform their practice; developing age appropriate education materials for teenage or preteen clients; and working with agencies to adjust visitation schedules so nurses can see clients later, when many young mothers return home after their work day.



These are just a few examples of how vital the quality improvement process is to the National Service Office, and the ongoing support provided to implementing agencies as they strive to deliver the intervention with fidelity. This support helps nurse home visitors provide their clients with the best chance to succeed in life – stimulating positive behavioral change that spans generations.

- States where Nurse-Family Partnership is currently being implemented.
- Numbers indicate how many counties in which Nurse-Family Partnership is serving clients.
- States where Nurse-Family Partnership is a state initiative.



As of June 2007

Opportunity to Replicate

Dreams and aspirations are rare commodities when people are struggling, hour-by-hour, simply to survive. When replicated faithfully, Nurse-Family Partnership offers a more promising future allowing clients to not only vision a better life but to turn that dream into a reality for themselves and their children.

Transformation begins with building trust, and identifying the heart's desire of each and every client. Embracing this concept, Nurse-Family Partnership is being established successfully where poverty has defined and limited lives for generations. Supportive, empowering home visits help young mothers create their own solutions and transcend generations of compromised health and poverty.

Nurse-Family Partnership's effectiveness is rare among early childhood prevention programs. The research results are phenomenal, showing for example a 48 percent reduction in child abuse among participants from the Elmira randomized, controlled trial. ¹

In diverse communities nationwide Nurse-Family Partnership has been adopted by an array of state, county, and community health departments, as well as private independent entities. Support and guidance from the National Service Office provides clarity about what communities need to create a successful program and make it last. These elements for success include: proper integration alongside existing programs and services, sustainable financing, commitment to a competent staff, connection to the community and at least 100 families to serve.

Communities benefit from cost savings due to fewer premature births, improved child health and development, and increased self-sufficiency among clients. In 2006, a study found that Oklahoma's Children First/Nurse-Family Partnership participants experienced half the infant mortality compared to other first-time births in the state. ²

Through an extensive and ongoing program development and consultation process, Nurse-Family Partnership is building stronger communities while helping clients realize what may have seemed unimaginable: *their dreams*.



“When Nurse-Family Partnership empowers young women with critical skills and knowledge, fragile families learn how to become healthy families. This is a valuable investment in prevention.”

*—Estelle Richman,
Secretary of Public Welfare, Pennsylvania*

¹This particular outcome reflects a reanalysis of data from the Elmira trials using an updated analytic method conducted in 2006. Olds, D.L., et al. (1997). Long-term effects of home visitation on maternal life course and child abuse and neglect. Fifteen-year follow-up of a randomized controlled trial. JAMA, 278 (8), 637-643.

²According to an internal study by the Oklahoma State Department of Health, 2006.

Opportunity to Build Support

A nurse home visitor works small miracles on every visit with her clients. By faithfully implementing the Nurse-Family Partnership program, this highly educated nurse helps low-income, first-time moms grow stronger – mentally, physically, emotionally and economically. As a result, babies are born healthier. Childhood injuries decrease. Maternal employment increases. Many go back to school and even graduate from college. Lives are transformed in seemingly impossible ways.

Such remarkable, life-changing interventions likely would go unnoticed except by those directly affected without the intensive efforts of the marketing and communications department of the National Service Office.



The primary focus is to increase public awareness, generate visibility and position Nurse-Family Partnership in the minds of current and potential constituents as *the* prevention program of choice in communities across the country. This is achieved by strategically and accurately communicating the evidence-based nature of the program, client success stories, and advances on the legislative front that will ultimately make the program available to an increasing number of families.

The challenge lies in widening the breadth and depth of our message points among a larger contingent of both government and private sector constituents. To spread the word about the program, the National Service Office taps a rich array of tools available through print, electronic, broadcast and presentation media. For example, everyone can learn about Nurse-Family Partnership from its beautifully

designed, in-depth website including its electronic media center aptly named, *News Center*, which you can view at www.nursefamilypartnership.org.

Recently, the department designed a *Cost Brief* demonstrating how the program, when implemented with fidelity, more than pays for itself. This brief gives specific examples of economic benefits accruing to society from Nurse-Family Partnership through increased tax revenues due to greater maternal employment, as well as cost-savings realized through decreased utilization of government programs.

By publicizing the viability and cost-effectiveness of Nurse-Family Partnership, the National Service Office is creating awareness and demand for a prevention program that is urgently needed, is clinically proven to work, and significantly reduces the societal costs of poverty and hopelessness.

“Policymakers need some clear guidelines for choosing prevention programs, including which programs will produce a positive return on their investment. The Nurse-Family Partnership program is one that has a favorable economic return and is therefore a wise choice.”

*– Lynn A. Karoly, senior economist,
RAND Corporation*

Opportunity to Influence Policy

Societal change starts with an idea such as the nurse home visiting intervention that was envisioned and proven to be effective by Dr. David Olds and his colleagues. To date, Nurse-Family Partnership has helped more than 69,000 women and children in 22 states lead healthier, more self-sufficient lives. However, for every first-time, low-income, expectant mother who is enrolled in Nurse-Family Partnership today, there are tens of thousands of women around the country, often teenagers, who would benefit from this effective, affordable, one-on-one counseling program.

Policy makers in federal, state and local governments hold the key to bringing the program to eligible mothers-to-be nationwide. Through its federal policy and program finance department, the National Service Office works with government officials to increase the availability of sustainable, public funding for local implementing agencies.

The department worked closely with United States Senators Ken Salazar of Colorado and Arlen Specter of Pennsylvania, who in March 2007 introduced bipartisan legislation to make Nurse-Family Partnership a permanent part of our nation's child health care system. If adopted, the Healthy Children and Families Act of 2007 (S.1052), would give states the option to incorporate evidence-based, nurse home visiting programs like Nurse-Family Partnership into their Medicaid plans and State Child Health Insurance Programs (SCHIP). This is a very significant development, and one that may dramatically increase the availability of services to thousands of families across the country.



Colorado Senator Ken Salazar, Dr. David Olds, program founder and Robert Hill, Chairman of the Board at an April 2007 Congressional briefing.

In collaboration with a Washington D.C. based advocacy group and the Nurse-Family Partnership Board's Public Policy Committee, the federal policy and program finance department recently achieved another major milestone on the path to broadening program support. For the first time, Nurse-Family Partnership was recognized in the federal budget. Specifically, \$10.3 million was included in the President's fiscal year 2008 budget request to congress to support grants to states and local entities for NFP services through the federal Administration for Children and Families (ACF).

In addition to creating strategic, bi-partisan support for the two federal legislative priorities detailed above, the federal policy and program finance department works with states to increase the availability of state-level public funding streams for Nurse-Family Partnership. The department's efforts are essential to bringing the program to more families, thereby reducing the costs of poverty to society as a whole.

“Children are our most cost-effective investment. A program like the Nurse-Family Partnership, that cuts health care costs, shrinks poverty and reduces crime among children and parents, is a win-win for taxpayers and families.”

—U.S. Senator Ken Salazar

Opportunity to Reach Our Goals

Thank you for taking the time to learn more about Nurse-Family Partnership. As we look to the immediate future, we are embarking on a \$50 million capital campaign that will allow us to advance on an ambitious 10-year growth strategy designed to enroll 100,000 families, and bring the National Service Office to a point of operating self-sustainability. This investment will leverage more than \$1.9 billion in government funding, yielding a social return on investment of more than \$5.4 billion.

This annual report provides a general overview of the program development and management, education, evaluation, reporting, quality improvement, advocacy, and marketing that we will undertake to accomplish these goals.

This is our opportunity to reshape a significant part of the national dialogue and policy on child and maternal health and development. We have been bestowed with a national treasure. With the

dedication and support of the staff at the National Service Office, Dr. David Olds and his research staff, our foundation partners, program development partners, our national board of directors and our implementing agency staff members we intend to provide access to a window of opportunity for low-income, first-time parents and their children – the opportunity to live an independent, self-sufficient and productive life while reducing the societal costs attributed to generations of poverty.

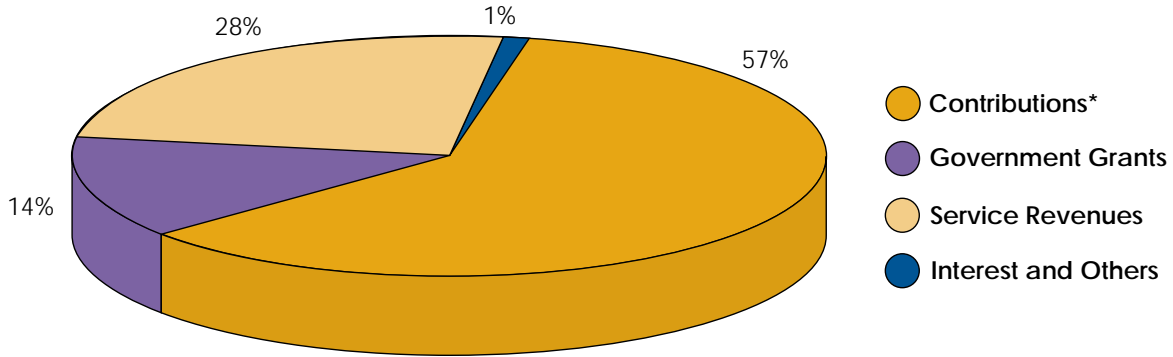
Our Mission

The Nurse-Family Partnership National Service Office provides service to communities in implementing a cost-effective, evidence-based nurse home visitation program to improve pregnancy outcomes, child health and development, and self sufficiency for eligible, first-time parents – benefiting multiple generations.

Our Vision

Setting the service standard for excellence, Nurse-Family Partnership transforms lives through the power of relationships, serving every eligible family, in every community.

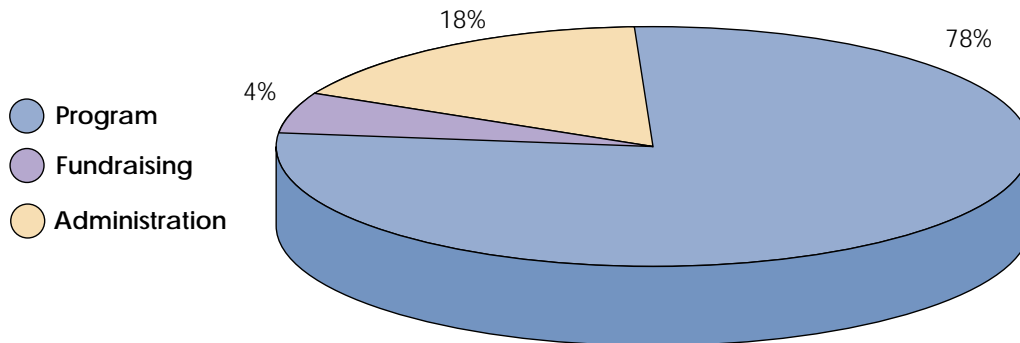
Revenues



Revenues		
Contributions*	\$2,752	57%
Government Grants	647	14%
Service Revenues	1,320	28%
Interest and Other	64	1%
	\$4,783	

*includes \$2.5 million prior year restricted funds released in FY 2006

Expenses



Expenses		
Program	\$4,383	78%
Fundraising	231	4%
Administration	980	18%
	\$5,594	

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The following organizations are instrumental in our effort to bring Nurse-Family Partnership, with its proven outcomes to all low-income, first-time parents and their children in communities across the country.

Research & Evaluation Partners

National Center for Children, Families & Communities,
University of Colorado at Denver and Health Sciences
Prevention Research Center for Family & Child Health,
University of Colorado at Denver and Health Sciences

Program Development & Program Management Partners

Invest in Kids, based in Colorado
Public/Private Ventures, based in Pennsylvania

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