



President and Chief
Executive Officer
2022

The National Service Office

ORGANIZATION OVERVIEW

Overview

The **National Service Office (NSO)** is the central operational engine for two evidence-based programs: **Nurse-Family Partnership** and **Child First**. The NSO provides expertise, infrastructure, integrated services, technical assistance, access to new resources, public education, advocacy, and thought leadership to ensure that both programs have the capacity to expand and scale locally, statewide, and nationally. Headquartered in Denver, Colorado, the NSO works to build public and private support for the two models and ensure that healthcare, early childhood development, and the mental health of the entire family are served in proven ways to achieve long-term positive outcomes.

Evidence-Based Programs of the NSO:

- **Nurse Family Partnership (NFP)** is an evidence-based community health program that empowers first-time moms to transform their lives and create better futures for themselves and their babies. Over more than four decades, research has consistently proven that Nurse-Family Partnership succeeds at its most important goals: keeping children healthy and safe and improving the lives of moms and babies. Nurse-Family Partnership works by having specially educated nurses regularly visit young, first-time moms-to-be, starting early in the pregnancy and continuing through the child's second birthday.
- **Child First** is an evidence-based program that helps struggling families build strong, nurturing relationships that heal and protect young children from the devastating impact of trauma and chronic stress. Child First uses a two-generation approach, providing psychotherapy to parents and children together in their homes, and connecting them with the services they need to make healthy child development possible. Research shows that Child First stabilizes families and improves the health and wellbeing of both parents and children. This proven intervention currently has affiliates throughout Connecticut, Florida, and North Carolina.

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The National Service Office (continued)

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Evidence-Based Programs

Both Nurse-Family Partnership and Child First have been extensively studied and researched utilizing randomized controlled trials - the most rigorous research method for measuring the effectiveness of an intervention.

- **Nurse-Family Partnership:** Randomized controlled trials were conducted with three diverse populations beginning in Elmira, New York, in 1977; in Memphis, Tennessee, in 1987; and in Denver, Colorado, in 1994. All three trials targeted first-time, low-income mothers. Follow-up research continues today, studying the long-term outcomes for mothers and children in these three trials.
- **Child First:** In 2001, Child First received a Starting Early Starting Smart federal grant from the U.S. Department of Health and Human Services to support a randomized controlled trial of the model. The study found clinically and statistically significant impact on child and family outcomes with regard to children's mental health, language delays, maternal mental health, involvement in child protective services, access to services, and parent satisfaction.

Financials

The NSO is funded by philanthropy and fees from network partners and in turn advocates for public funding on behalf of its models and network partners. Nurse-Family Partnership and Child First have been reviewed and rated on leading charitable websites, including GuideStar, Charity Navigator, Giving Library, the Center for High Impact Philanthropy, and others. Additionally, the National Service Office is committed to fiscal transparency and compliance.

For more financial information, see:
[FY2020 Audited Financial Statement](#)
[FY2020 Form 990](#)

Leadership

[Board of Directors & Executive Leadership Team](#)



Nurse-Family Partnership: Overview

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- Mission Nurse-Family Partnership (NFP) positively transforms the lives of vulnerable babies, mothers, and families.
- Vision A future where all children are healthy, families thrive, communities prosper, and the cycle of poverty is broken.
- Values With an intentional and intense sense of urgency to change lives, NFP will:
- Be tenacious caregivers by bringing passion and excellence to their nursing practice and professional services
 - Actively listen to and persistently serve their families and their implementation network
 - Provide leadership in the field of evidence-based and home visitation programs
 - Seek and find solutions
 - Innovate and stay relevant
 - Translate and enhance the science of pregnancy, brain, and early childhood development to serve vulnerable babies and families
 - Promote health equity and eliminate disparities to improve outcomes for the moms and babies they serve now and beyond
 - Respect and honor differences in race, ethnicity, religion, sex, national origin, disability, age, sexual orientation, gender identity, and veteran status
 - Be respectful, collaborative, and tenacious in all of their interactions with each other and on behalf of their families and implementation network

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Nurse-Family Partnership: Partners

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Nurse-Family Partnership: Impact

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NFP Goals

1. Improve pregnancy outcomes by partnering with moms to engage in good preventive health practices, including thorough prenatal care from their healthcare providers, improving their diets, and reducing any use of habit-forming substances
2. Improve child health and development by assisting families in providing responsible and competent care
3. Improve the economic self-sufficiency of the family by supporting parents to develop a vision for their own future, plan additional pregnancies, continue their education, and find work

Impact

The Nurse-Family Partnership program has been independently reviewed and evaluated, and is ranked as the Gold Standard of home visiting programs.

State and federal government cost savings average \$26,898 per family served or \$2.90 per dollar invested, and total benefits to society equal \$60,428 per family served, or \$6.40 per dollar invested in NFP.

Proven Results

48% less likely to suffer child abuse and neglect

67% less likely to experience behavioral and intellectual problems at age 6

56% reduction in ER visits for accidents and poisonings

35% fewer hypertensive disorders of pregnancy

72% fewer convictions of mothers (measured when the child is 15)

82% increase in months employed

Nurse-Family Partnership: Impact (continued)

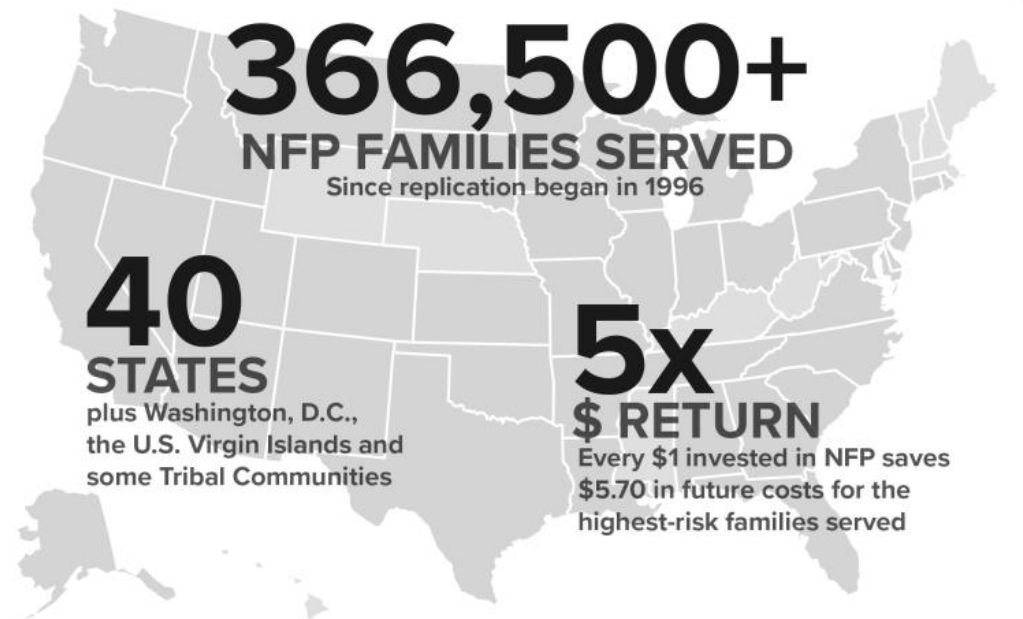
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Impact (continued)



Proven Results (continued)

18% fewer preterm births

79% reduction in preterm delivery among women who smoke cigarettes

31% reduction in very closely spaced (<6 months) subsequent pregnancies

39% fewer health care encounters for injuries or ingestions in the first 2 years of life among children born to mothers with low psychological resources

Child First: Overview

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The Programs [Child First](#) is an evidence-based program that helps struggling families build strong, nurturing relationships that heal and protect young children from the devastating impact of trauma and chronic stress. Child First uses a two-generation approach, providing psychotherapy to parents and children together in their homes, and connecting them with the services they need to make healthy child development possible. Research shows that Child First stabilizes families and improves the health and wellbeing of both parents and children. This proven intervention currently has affiliates throughout Connecticut, Florida, and North Carolina.

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The Child First model's **Theory of Change** is based on scientific research which indicates that early trauma and adversity lead to biological changes in the young child that damage the developing brain and metabolic systems, leading to long-term problems in mental health, learning, and physical health. Child First works from two directions: preventing or ameliorating this damage and, at the same time, enhancing the child's development. There are two major strategies that Child First employs to prevent or ameliorate damage due to toxic stress:

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- Directly decrease the stress experienced by the family by connecting them to needed services through intensive care coordination
- Provide parent-child psychotherapy to repair the impact of trauma on the child and strengthen the caregiving relationship, which prevents the biological changes that lead to long-term damage to the child's developing brain and metabolic systems

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Child First: Overview (continued)

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Mission Child First helps to heal and protect children and families from the effects of chronic stress and trauma by fostering strong, nurturing, caregiver-child relationships, promoting adult capacity, and connecting families with needed services and supports.

Vision All young children and their families will have the nurturing, support, and services that they need to promote optimal social-emotional, cognitive, and physical health and development.

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- Fundamental Principles**
- Stable and nurturing parent-child relationships are the cornerstone of emotional well-being and the foundation for language and cognitive development
 - Child First uses an ecological approach to understand the child; they focus on the child's health and development, his/her important relationships, and the challenges experienced by his/her parents and caregivers that prevent them from nurturing and supporting the child's development
 - All behavior has meaning; this is the way young children communicate; it is Child First's goal to help parents and caregivers reflect on and understand the feelings and motivations underlying their child's behavior
 - The goal of intervention is to enhance the parent's and caregiver's capacity to provide sensitive, age-appropriate care and protection, with mutual pleasure in the parent-child relationship
 - Treatment of behaviors alone limits the effectiveness, durability, and generalizability of interventions
 - To help a child, Child First must help the family; all parents/caregivers want to give their children the best possible opportunity to succeed; when caregivers face multiple stressors and their basic needs are not met, it is difficult for them to focus on the emotional and developmental needs of their children
 - Lasting change within the family comes from a collaborative, "family-driven" approach
 - Helping relationships follow the principle of "parallel process"
 - Every interaction with a child or family is an opportunity for a positive intervention

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Child First: Partners

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Robert Wood Johnson Foundation



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Child First: Impact

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Impact Rigorous research shows that Child First families become stronger and healthier. Results of a randomized, controlled trial demonstrated that at 12 month follow-up, Child First intervention families had strong positive outcomes, as compared to Usual Care control families. To learn more about Child First's impact and research, see [here](#).

Today, Child First has 15 affiliate program sites in Connecticut, with 14 implementing agencies. Child First has now successfully expanded its model to other states, including urban and rural areas. In 2015, Child First began national replication in Palm Beach County and, in 2016, the model was replicated in eastern North Carolina.

Proven Results

Child First children were **68%** less likely to have language problems and **42%** less likely to have aggressive and defiant behaviors

Child First mothers had **64%** lower levels of depression and/or mental health problems

Child First families were **39%** less likely to be involved with child protective services, which was sustained at **33%** at 3 year follow-up

Child First families had a **98%** increase in access to community services supports

Child First: Impact (continued)

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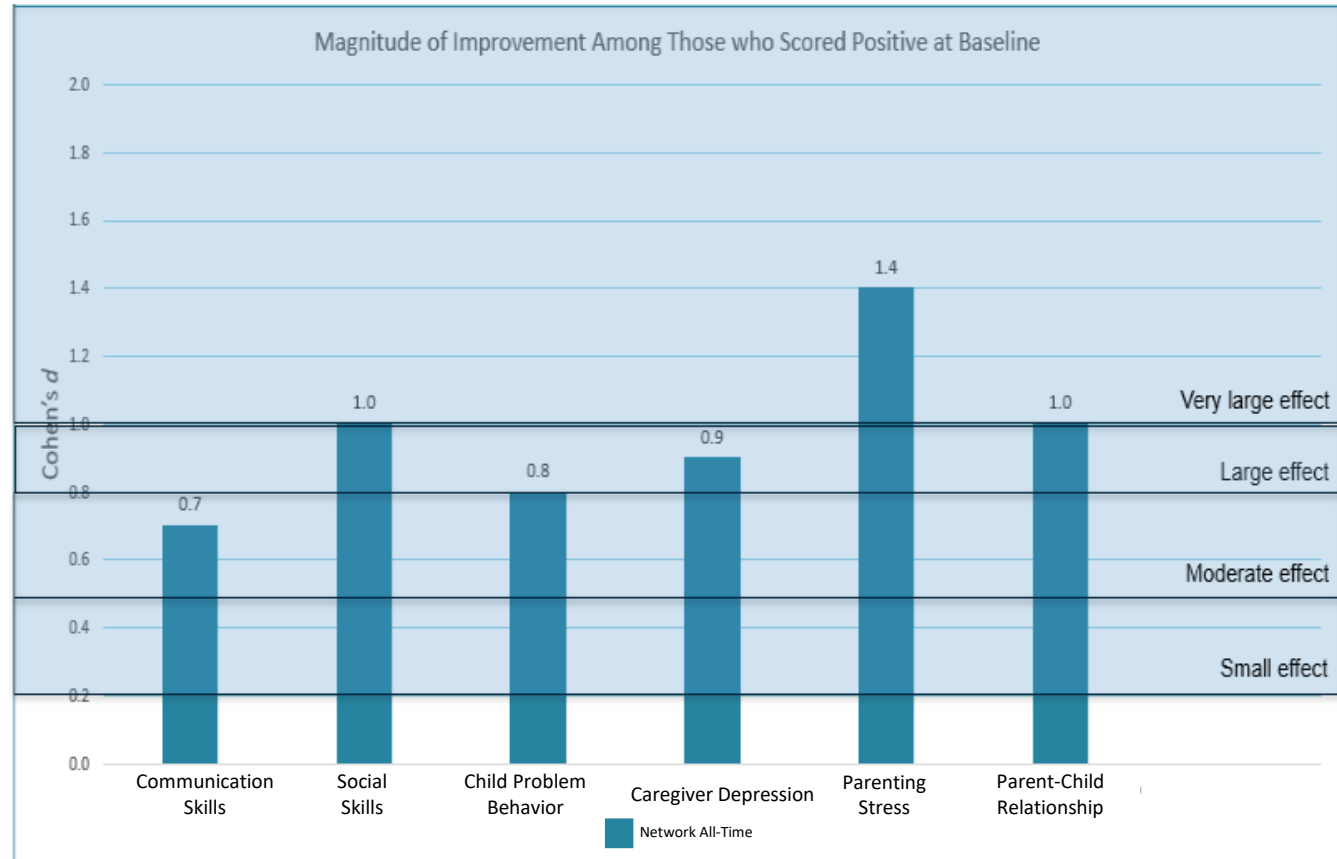
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Impact (continued)

The data below shows impressive results among children and families who had documented problems at baseline.



A Cohen's d or "effect size" reflects the magnitude or importance of the effect that they have had on the outcome (0.2 is small, 0.5 is moderate, 0.8 is large, and 1.0 is very large). In most analyses, their effect size is large to very large.

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Position President and Chief Executive Officer

Reports To [Board of Directors](#), NSO

Compensation Range Salary is determined based on experience and skill set. Anticipated range: \$295,000 – \$340,000

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Direct Reports Chief Human Resources and Equity Officer; Chief Operating Officer; Chief Nursing Officer; Chief Philanthropy Officer, Chief Child First and Mental Health Officer; Chief Legal Officer; Chief Financial Officer; Chief Policy and Government Affairs Officer; Director of Marketing and Communications; Director of Public Relations; and Executive Assistant

Summary This is a key moment in time for the NSO: following the 2020 merger of Nurse-Family Partnership and Child First, and supported by significant external investments in recent years, the organization is poised for growth. The CEO will build upon the organization's rich history as an established, highly regarded, 'gold standard' leader in its field and lead the NSO's evolution going forward.

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Looking ahead, the CEO will lead this advancement from the organization's core foundation of evidence-based success and impact through transformational growth and expansion. This person is a strategist, a mission-driven leader, an operational manager, and a public figure, who will grow, scale, and diversify the organization; they will harness the momentum of the recent merger to lead the NSO in reaching its next level.

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The CEO will be an externally-facing leader; they will serve as the primary spokesperson and ambassador for the organization, have comfort with healthcare, and manage a variety of stakeholders, including corporations, foundations, donors, policy makers (at the local, state, and federal levels), and other philanthropic partners. Fundraising is a key element of the role as well as advocating for public funding for its network partners.

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Summary (continued)

This leader will manage the continued integration of the two organizations, establishing operational efficiency and shaping culture. The CEO must have the ability to draw insights from relevant markets, anticipate opportunities to position the organization for success, and build the right team to grow and expand the services delivered to families. Additionally, they must have the ability and willingness to increase operating revenue and develop significant philanthropic support for the organization and its mission and programs.

The CEO will partner with the board of directors to provide clarity of vision and act strategically to put the right priorities and initiatives in place to lead the organization to the next level. They will have overall fiduciary and managerial responsibility for the organization's activities, overseeing a \$37 million operating budget and a team of 160 diverse, talented, and committed employees.

While the NSO itself is headquartered in Denver, Colorado, this leader can be located anywhere in the United States, as long as s/he commits to travel to the NSO and other sites as needed.



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Primary Roles &
Responsibilities

Strategy and Implementation

- Advance the NSO's mission to serve more children and families and achieve long-term positive outcomes across healthcare, early childhood development, and the mental health of the entire family
- Identify opportunities for innovation and improved operating efficiencies, effectiveness, and competitiveness, while maintaining the quality of and fidelity to the proven models; maintains and enhances a measurement, data-driven culture, focused on the long-term impact of the programs
- Engage current NSO leaders and staff, as well as the Board, in open and honest dialogue around creating the NSO of the future, driving toward self-sufficiency and scale
- Assure that the NSO and its mission, programs, and services are consistently presented in a strong, positive image to all stakeholders
- Guide the Board to enhance and augment its composition to include business, operating, and fundraising experience and expertise; leverage Board expertise and connectivity to further the NSO's impact

External Engagement, Policy, and Fundraising

- Optimize existing philanthropic and foundation development efforts, expand individual fundraising, and explore business and corporate support and fundraising strategies
- Serve as an effective advocate for babies, mothers, and families; drive change and enhance the advocacy and policy agenda
- Advance positive relationships with industry, government, key healthcare provider partners, and the general public, as appropriate
- Develop a clear and sustainable branding strategy for the NSO that facilitates recognition with a wide range of constituents, stakeholders, and consumers

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Primary Roles & Responsibilities

Leadership, Operations, and Financial Management

- Build, mentor, and develop teams; provide leadership while attracting, retaining, and developing top diverse talent for the organization
- Advance diversity, equity, and inclusion within the NSO: establish team, department, and organizational strategies, policies, practices, and processes which foster an inclusive environment, build cultural awareness, and maximize the benefits of a diverse workforce
- Work with the CFO and finance committee to ensure the fiscal integrity of the NSO, seek opportunities for improved financial performance, and strive for transparency of financial performance with the Board
- Motivate and inspire the NSO and agency leadership teams by providing them with the information and tools they need to meet stakeholder expectations and to do their jobs well
- Identify, cultivate, and develop leadership talent for succession management and facilitate the promotion and movement of management across the organization
- Strive to increase individual, team, department, and organizational capacity to work with and serve a variety of people and groups
- Create a culture of open communication, accountability, inclusion, and timely decision-making

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Pivotal Experiences
& Expertise

We will evaluate candidates against the following:

Business and Commercial Acumen: High level of business acumen (even in a non-profit environment), including successful operational leadership and organizational management in an organization of relevant size, complexity, and stature. Experience with public policy or distributed 'franchise' businesses is preferred.

Healthcare Experience: Experience in a relevant sector, such as health care, managed care, nursing, or tangential spaces is strongly preferred.

External Presence and Communication: Articulate, inspirational communicator and ambassador with a strong external presence and a positive reputation. Ability to serve as the spokesperson and public face of an organization, with superior written and oral communication skills. Comfort with a variety of stakeholders, ranging from the public to the private sector, including corporations, foundations, individuals, policy makers, and other philanthropic partners. Unquestionable integrity, ethics, and superior judgment.

Leadership and Operational Management: Proven ability to lead an organization and its core mission and values, with strategic and thoughtful vision and an eye toward compliance and risk management. Exceptional capacity for managing, leading, and developing people, including direct management at an executive level. Embodies a commitment to, and advances, diversity, equity, and inclusion.

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Culture Impact

Mission and Community Orientation: Inspired by the mission of the NSO and passionate about the health of babies, children, mothers, and families; sets the culture, tone, and tenor of the organization. A mission-driven and personally motivated self-starter with energy and enthusiasm.

Change Manager: Experience providing creative solutions to support and help individuals, teams, and an organization to grow, scale, and diversify. Embraces metrics and data-driven processes to drive change.

Culture Shaper and Carrier: Demonstrated success building and driving a positive, inclusive, and supportive culture across a dispersed workforce. Holds themselves and team members accountable across the network. Has proven experience as a champion for all types of diversity, equity, and inclusion, actively advocates for and welcomes a diversity of backgrounds, and creates a sense of belonging among team members.

Forward Thinking and Innovative: Track record of leveraging diverse thinking for ideation, innovation, and learning; approaches problem solving and strategic planning with this mindset.

Engagement Team

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The NSO is an equal employment opportunity employers and does not discriminate against any person because of race, color, religion, sex, national origin, disability, age, marital status, sexual orientation, or any other status protected by law. This non-discrimination policy extends to all terms, conditions, and privileges of employment as well as the use of all company facilities, participation in all company-sponsored activities, and all employment actions such as promotions, compensation, benefits, and termination of employment.

The NSO shall take affirmative action to ensure applicants and employees are treated without regard to race, religion, color, age, marital status, disability, sex, or national origin in all employment actions including, but not limited to, recruiting and selection; promotions, demotions, and transfers; rates of pay and other forms of compensation; selection for company sponsored training; and layoffs or other terminations of employment.