# 2023 NATIONAL PUBLIC POLICY PRIORITIES

RIGOROUSLY TESTED PROGRAMS WITH MEASURABLE RESULTS

THE **NATIONAL SERVICE OFFICE** FOR

Nurse-Family Partnership
Helping First-Time Parents Succeed ®

child first

The National Service Office (NSO) for Nurse-Family Partnership and Child First is committed to serving more families and children with a holistic approach focusing on the highest need communities by providing evidence-based services that improve physical and mental health, reduce child welfare involvement, increase educational success and family self-sufficiency. This shared multi-generational focus has demonstrated a clear and measurable return on investment by effectively using community resources and maximizing the impact of public and private funds. The NSO is focused on advancing bipartisan, evidence-based policy solutions that improve the health and well-being of families and promoting economic mobility for communities.

Child First & Nurse-Family Partnership
Nurse-Family Partnership
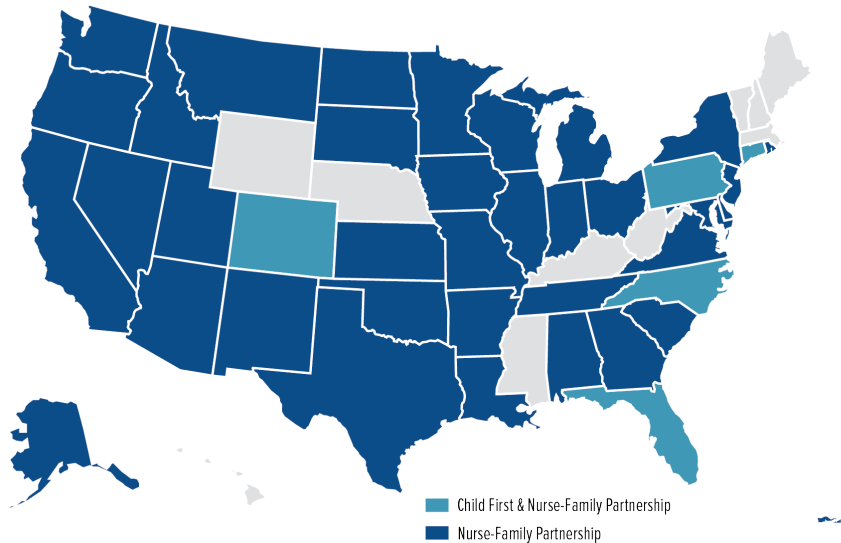
1) PROGRAM FUNDING

• Maximize the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program and state home visiting funds to support the sustainability, growth, and impact of Nurse-Family Partnership and Child First.

• Improve and streamline Medicaid coverage for both Nurse-Family Partnership and Child First, including supporting Medicaid benefits that cover evidence-based home visiting for expectant parents and children.

• Support the sustainability and growth of Nurse-Family Partnership and Child First programs through securing and expanding eligible funding sources including (but not limited to) the Family First Prevention Services Act (FFPSA), Temporary Assistance for Needy Families (TANF), the Child Abuse Prevention and Treatment Act (CAPTA), the Community Mental Health Services Block Grant (MHBG) and state initiatives that support prevention and intervention programs.

2) SYSTEMS & INNOVATIONS

• Strengthen coordination and support innovations across systems, programs, and primary care providers to impact care and build positive outcomes for target populations while also reducing per capita costs.

• Prioritize public funding to support upstream, multi-generational prevention and intervention programs that encourage implementation with accountability.

• Increase federal and state support for performance-based strategies that produce return-on-investment and delivery of intended outcomes.

3) CLINICAL WORKFORCE

• Ensure public funding prioritizes clinical workforce needs such as equitable pay and the recruitment and retention of nurses and mental health professionals.

• Support innovations that build a diverse clinical workforce pipeline, including loan repayment, public health service incentives, compact licensure and health clinician education pathways.

• Ensure Medicaid billing and other public funding strategies for Nurse-Family Partnership and Child First support and align with the full scope of the licensed clinician's practice in the models.

4) ECONOMIC MOBILITY

• Support family self-sufficiency through safety net resources to families facing the greatest disparities, including nutrition assistance, safe and affordable housing, mental and behavioral health supports, food stamps and nutrition services, workforce development, and education.

• Strengthen families' workforce participation and self-sufficiency by identifying and supporting policies such as paid leave and child care.
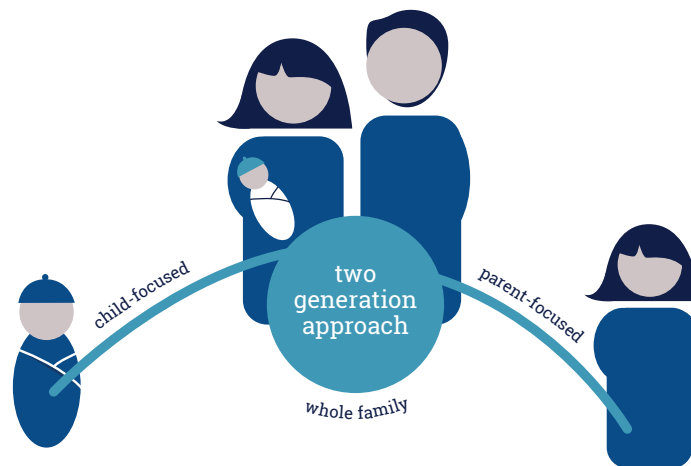
PROGRAMMATIC OVERVIEW

Nurse-Family Partnership® is an evidence-based, community health program that helps transform the lives of babies born to first-time parents facing a range of challenges to breaking the cycle of intergenerational poverty. Families enrolled in Nurse-Family Partnership face significant challenges to leading healthy lives and overcoming adversity. Nurse-Family Partnership addresses these challenges by partnering expectant parents with a registered nurse at a pivotal moment—beginning early in pregnancy with a first childt—and providing ongoing nurse home visits that continue through the child's second birthday. Nurse-Family Partnership is among the most proven and widely replicated programs during this critical period that has dramatic and lasting impacts on the health and well-being of vulnerable families. Independent research proves that communities also benefit from this relationship—every dollar invested in Nurse-Family Partnership programs for the families with the greatest social and economic needs can yield more than five dollars in return.

Child First® is an evidence-based, early childhood, mental health program that supports very young children and families who face major adversity. The intervention builds resilience and promotes healing to prevent the damaging effects of poverty, trauma, abuse and neglect, and chronic stress. Research shows that Child First improves child and parent mental health, promotes school readiness, and decreases child abuse and neglect. This can dramatically improve both the immediate and long-term health and wellbeing of families.

**For questions or more information, please contact our
Policy & Government Affairs Team at pga@nursefamilypartnership.org**