

STORY FROM THE FIELD

Washoe County Health District – Reno, NV

Population Served: 410,433

Three years ago, Thomas and his newborn infant, James, were referred to the home visitation program at Washoe County Health Department. James' mother was in jail, and James had a variety of health problems resulting from her drug use during pregnancy. Thomas, himself a recovering drug addict, had no family support, lacked prior experience in infant care and feeding, and needed help. The public health nurses made 17 home visits to Thomas and James over the course of nine months. They provided education for infant care, made referrals for early developmental intervention, monitored James' health and medical follow-up, and set goals for positive family outcomes.

Thomas and James now face a bright future. James is doing well developmentally, and Thomas receives assistance through a variety of safety net services, including Early Head Start and WIC. Thomas is enrolled in the local community college and is trying to increase his financial stability, so that he can better provide for his son.

This exemplary care helps explain why Washoe's home visitation program was selected in 2008 as a top candidate for "Nurse Family Partnership," an evidence-based home visitation program that partners first-time parents with public health nurses.

Then everything began to change.

The team of five nurses underwent initial training and started work with clients when Nurse Family Partnership, which Washoe primarily funded with local dollars, was discontinued just five months later in part due to fiscal concerns.

Total Community and Clinical Health division staff at Washoe fell from 85 to 45 between 2008 and 2011. Serving a population of over 400,000, the health department had 17 public health nurses in the Home Visitation Program 10 years ago; today it has two. Local revenue supporting the home visitation program is now less than half of what it was in 2005.

Candy Hunter, Public Health Nursing Supervisor, now worries that Washoe may lose its home visitation program completely, leaving a huge void in the community. "There really is no health component that can meet [parents] in their home, connect

"Access to prenatal care on the front end literally saves millions. I don't think the community recognizes the cost of one premature baby."
—Candy Hunter, Public Health Nurse Supervisor

them to resources, assess the health of the family, help them find a medical home, or teach them parenting skills."

Describing home visitation nurses as "foot soldiers of the community," Hunter explains that being in the field gives them unique knowledge of the community. It allows them to gauge, for example, the plausibility of a mother making her way into a clinic for services: "They can come in and tell me, 'You know what, no, there's no bus line that comes from [the mother's] home to the clinic. She's going to have to take two different routes with a baby and toddler in tow.' She can then advise leadership and promote actions to improve the services we offer. Public health nurses know the community and losing them would be a huge loss in terms of assessing what happens in the community."

Hunter also explains that Washoe's Maternal and Child Health Program saves money as well as lives. "Access to prenatal care on the front end literally saves millions. I don't think the community recognizes the cost of one premature baby. I think if they factored in the cost of that care, we would have more support."

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