

Family Bridge

Women & Children's Committee of MAPOC July 8, 2024



## Family Bridge Goal

#### • Strengthen the state's public health infrastructure. By supporting a *Health Benefit* to all families with newborns.





## Multi-Agency Collaboration





## Family Bridge Development





### Intent



#### **Population-level solutions**

It is critical to **build population-level health impacts** and offer services to all families early in babies' lives. Broad, upstream interventions can prevent the health disparities that persist throughout life and were laid bare at a community-level by COVID-19.

#### **Reduced stigma for services**



**Universal nurse home visiting reduces the stigma** associated with targeted eligibility requirements, which creates enrollment challenges for existing services statewide.

Enhanced referral system



**Community health workers serve as an entry point** into Connecticut's existing service array and **connect high-need families to resources.** 





### Impact

Nationally, MATERNAL MENTAL HEALTH challenges cost \$14 billion per year<sup>2, 3</sup>



Family Connects (Universal Nurse Home Visiting) generates cost savings of \$3 for every \$1 in program costs<sup>5</sup>

1. Davenport et al. (2020). 2. Brown et al. (2021). 3. Moore et al. (2021). 4. Family Connects International website. 5. Goodman et al. (2019).



## Family Bridge Model





#### Free and Universal Program

 Two qualifiers (birth hospital and town of residence)

#### Program is offered to patients:

- In- Hospital
- Phone
- Provider or Nurse Referral
- Self Referral

#### First Visit Scheduled with Nurse

- 1-3 weeks after birth
- Mother and Baby assessment
- Compiles resource list for patient
- 2<sup>nd</sup> or 3<sup>rd</sup> visits scheduled as needed



#### Follow Up Contact w/ CHW

- Caregiver is linked to resources by CHW
- Families contacted to ensure successful linkage to resources
- Satisfaction call/survey completed



## Bridgeport





## Bridgeport Family Bridge Data

# Medicaid Private Insurance Self-Pay Other 16% 9% 55% 20%

**PRIMARY PAYER** 







#### Windham Voluntown Lebanon Sprague Franklin Griswold (Lisbon) Colchester Norwich Bozrah Preston Salem Montville





## Norwich Planning



#### Planning Timeline



Identify administrative home Hire initial design staff (4) Submit readiness assessment	Attend Planning Academy Hire IT consultant Design focus groups & survey Start focus groups & survey	Finish focus groups & survey Write Stakeholder Input Report Map referral & clinical workflow Map data flow Sign MOUs & BAAs Draft marketing & outreach plan Scaling & Staffing Plan	Finish drafting implementation plan Feedback on draft implementation plan
Mar.–May	June-Aug.	SepOct.	NovDec.



#### Next Steps





#### **Evaluation**

#### Sustainability



#### Evaluation

#### **Outcome Measures**

- Parental anxiety and depression
- Emergency Department Use
- Maternal & Infant Mortality

#### **Process Measures**

Population Reach

Evaluation plan

- Connection to referrals
- Patient Satisfaction



## Sustainability







## **From birth to home**