Testimony House Finance Sub-Committee Health and Human Services

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Ten years ago, almost to the day, another Director of Nursing stood before this same committee requesting to spare proposed budget cuts to Nursing Newborn Home Visiting which was a part of the Help Me Grow program through the Ohio Department of Health. Ten years later I stand before you, Director of Nursing at Carroll County General Health District and Chair of the Public Health Nursing Section of the Ohio Public Health Association (OPHA), pleading for funding to support public health nursing and our role in providing in home care to moms and babies. Nurse provided home care consists of prenatal care and pregnancy education and newborn and mother assessments by public health nurses in homes of expectant and new mothers across Ohio.

Did public health nurses effect the infant mortality rate? We don't know what we can't measure, what we do know is the rate of infants dying before they turn one has not decreased in nine (9) years, and those most vulnerable babies are dying at rates 3 times higher than other babies. I can tell you eroding funding that did exist for nurses providing care in homes, and not providing a mechanism for public health nurses to be funded to provide these services has had effects in every Ohio community.

Let me explain why, Ohio's subsidy to local health departments is 49th out of 50 states; nationally public health spending for infants is \$107/infant, Ohio is \$53/infant. Similarly, Ohio's infant mortality rate is ranked 43rd out 50 states. When there is not adequate funding to support essential public health services, like assessing every mom and baby, local health departments are forced to choose which services they can afford to provide, mandated services in the Ohio Revised Code must come first- community based in home care for moms and babies is not one those services.

Why nurses are an essential part of the solution and need to be funded to make a difference in all Ohio community;

- 1. Nurses remain the #1 most trusted profession nationally for the last 17 years
- 2. This allows nurses to gain access into the homes of Ohio's most vulnerable families, much easier than any other provider of home visiting
- 3. When a public health nurse is in a home, we are educated to assess the whole individual, both mom and baby, the family and the environment. These skills allow us to develop a plan of care for the family- one that is prescribed specifically for their needs.
- 4. Prematurity remains the number one reason babies die before turning one; one of Ohio's initiatives is to prevent prematurity and a strategy is to increase the use of progesterone treatment for women at risk of preterm birth. What if public health nurses were funded to provide this weekly injection in the homes of pregnant women at risk?

5. Public health nurses can't fix infant mortality alone- we must be part of the team- where we work together with unlicensed personnel to jointly carry out the family plan of care.

I would like to share with you one example of how the current home visiting system is working. Lorain County Ohio population 307,924. In 2018 the Help Me Grow program in Lorain County had 432 referrals for home visiting, but only 59 home visits were completed. 70% were because of unsuccessful attempts to contact and 21.7% refused the home visit. In contrast, Lorain County public health nurses provided 320 home visits for prenatal care and newborn assessments. This is a 7 times higher rate of completion than Help Me Grow referrals. As a public health nurse, we feel this initial entry into the home may often be the most important to critically link families with needed care and resources.

What has the data shown regarding Lorain County's infant mortality rates? Lorain County supports their own outreach program called Lorain County Connect Mom, geared toward the African American population. From 2010 to 2016, the overall infant mortality rate for Lorain County had decreased by about 45% (8.3 deaths per 1,000 live births to 4.5 deaths per 1,000 live births). The decline in infant mortality during this time in Lorain County can be mostly attributed to the sharp decline in rates among African Americans, a decrease by nearly 50% (25.6 in 2010 and 11.3 in 2016). African American infant mortality rate was at a 6-year low in 2015 at 6.6. The largest observed decrease in determined causes of death from 2010-2016 was prematurity; 11 deaths to 3 deaths. Followed by "other medical causes"; 10 deaths (2010) to 1 death (2016).

Something is working in Lorain County. We would like to attribute at least some of this to contribute this to the work of public health nurses. We would like the opportunity to replicate their public health nurse prenatal and newborn home visit programming across Ohio. Other communities should have the opportunity to make the same services available to their moms and babies, regardless of local funding. Lorain County Public Health continued funding this service for 10 years after the funds were cut, completely on their local tax payer dollar, through their local levy. Every mom and baby in Ohio should have this same opportunity for survival.

Public Health Nursing in Ohio needs your support to be funded, to sustain nursing services in every community. We need a mechanism to bill Medicaid for community-based services. Ohio babies can NOT afford your support for funding for public health nursing.

Infant Mortality rankings by state

https://www.cdc.gov/nchs/pressroom/sosmap/infant mortality rates/infant mortality.htm

Ohio Report on Infant Mortality 2017 https://odh.ohio.gov/wps/wcm/connect/gov/5b43b42b-0733-42cd-8a01-063f831ec53f/2017+Ohio+Infant+Mortality+Report.pd

Lorain County Infant Mortality Review 2010-2016

Lorain County Prenatal Newborn Report 2017-2018