Nurse Home Visit Program for Infants at Risk for Developmental Delays: The Special Infant Project

Presentation Created by:
Michelle Anzlovar, R.N., B.S.N
Star Fennell, R.N., M.S.N
Presented 10/25/12 by:
Kathy Bolejack, R.N., B.S.N., C.B.I.S.

Background

Premature rate in Tri-County Health Dept. (TCHD) region: 8.7%
• Adams, Arapahoe & Douglas Counties
Premature rate in Colorado: 8.9%
Higher risk for medical and developmental complications
May not be eligible for early intervention

Mission

Public health nursing interventions for:
• Families with infants at risk of developmental delay
• Prematurity, medical conditions, high risk psychosocial factors

Training

Nursing Child Assessment Satellite Training (NCAST)
Healthy Steps
Evidence Based Research
Developmental Screening
• Denver II
• Ages and Stages Questionnaire (ASQ)
Motivational Interviewing
Health Care Program for Children with Special Needs (HCP)

Client Identification and Contact

• Referrals from area Neonatal Intensive Care Units
• Contact by phone or letter
• Home Visits
  • First within two weeks
  • 1, 2, 4, 6, 12 month visits
• More frequent visits based on need

Interventions

• Education on growth and development
• Ensure access to medical care
• Resource referral
• Education on positive parent-child interaction
Outcomes
- Adequate Resources
- Improved Child Health
- Improved Family Health
- Positive Parent Child Relations

Adequate Resources
- Access to health and community resources (Ecogram)
- Understanding child’s health condition (Calculated Age)
- Emergency healthcare action plan

Improved Child Health
- Appropriate Growth
  - Growth Chart
- Appropriate development
  - Developmental screening
- Up to date with immunizations
- Access to routine well-child care

Improved Family Health
- Access to family health care services
  - Family planning
  - Postnatal care
- Family health promotion
  - Safety
  - Second-hand smoke
  - Healthy eating

Positive Parent-Child Interactions
- Developmentally appropriate cognitive growth opportunities
- Individual characteristics of their infant
- Sensitivity to infant cues
- Respond to infants distress

Evaluation
- 2011 SIP Program Data
- Patient satisfaction survey
2011 SIP Program Data

Of the 80 families referred:
- 39 Clients received Care Coordination
- Each Client Averaged 5.9 home visits
- 2.1 Referrals per Client
- Average months followed-7 months

Patient Satisfaction Survey

- Increased confidence
- Increased knowledge

Future Plans

- Continue to refine program
- Track outcomes
- Provide updates and insights to state HCP team

Thank You

Any Questions?

Contact Information:
Kathy Bolejack, RN, BSN
kbolejac@tchd.org
Michelle Anzlovar, RN, BSN
manzlova@tchd.org