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Nurse-Family Partnership® (NFP) International Team

NFP International Team Annual Report | 2017.06.26

Our aspiration is to take 'NFP international' to a new level by strengthening the support we offer new and existing countries, and building the foundations for a sustainable, high quality, global program. The information and experiences you share regarding implementing NFP in your countries is invaluable in moving NFP to this new level of excellence. We are in this together!

Introduction

We are very pleased to provide you with our first annual report and are committed to producing this on a consistent basis going forward. The International Team supports the introduction, testing, research, and implementation of the Nurse-Family Partnership with each country implementing or evaluating the program. The International Consultants work with Dr. David Olds as part of the University of Colorado Denver (UCD) and all have long standing and in-depth experience and understanding of the program clinical model and implementation requirements. We are a small but passionate team, and are deeply committed to supporting the delivery of NFP with rigour and excellence. In the next sections of this report we have provided a high-level overview of our key activities/deliverables for 2016.

The NFP International Team is comprised of:

- David Olds – Program founder; Director, Prevention Research Center, UCD
- Ben Jutson - Coordinator, Prevention Research Center, UCD
- Rob Murchison – interim Finance Manager
- Ann Rowe - International Consultant
- Debbie Sheehan - International Consultant
- Elly Yost - Director, Program Innovations, Prevention Research Center, UCD; International Consultant

New Guidance Documents and Program Resources

A number of new international guidance documents and program resources have been developed over the last 18 months as follows:

Guidance Documents:

1) NFP Information System Requirements for New Societies (2016) which provides:

- An overview of NFP information system requirements to help new countries prepare for program implementation.
- Examples of some of the reports that countries are able to produce from the data collected
- Suggestions for building capacity

- 2) **STAR International Implementation (2016)** which provides:
 - A summary of the STAR framework Identifies the benefits of STAR and how it enhances NFP
 - Sets out the expectations for using STAR
 - Recommendations for the introduction of STAR into a country
- 3) **Use of Dyadic Assessments in NFP (2016)** which provides:
 - Expectations regarding the use of dyadic assessments within the NFP program
 - A recommended process for countries to follow in determining which dyadic assessment to use (if not able to use DANCE)
- 4) **Adapting the Visit Schedule to Meet Client Needs (2017)** which provides:
 - Guidance for using the STAR framework and flexible scheduling to improve client engagement and retention, and to assist in the delivery of NFP through client centric and efficient methods
 - Specific recommendations for the pregnancy, infancy and toddler phases of the program
 - Information on additional situations when the visit schedule may be adjusted
- 5) **Branding, Trademarking, and Copyright of Nurse-Family Partnership (2017)** which provides:
 - Requirements for the consistent use of the Nurse-Family Partnership® registered trademark and branding
 - How to support the development of a country's own unique program name and trademarks if desired
 - Details on how to correctly display the copyright notice that must be included on all program materials and derivative works that are owned by the Regents of the University of Colorado
- 6) **Requirements for Implementing NFP (2017)** which provides:
 - Requirements and responsibilities of the license holder
 - Responsibilities of the National Unit (or equivalent) that leads program implementation
 - Responsibilities of the local implementing sites/agencies
 - Support provided by the NFP International Team managed by the PRC
 - Fee structure (License Agreement and Support Services Agreement)
 - Refer to section in this annual report: *Maintenance of Licensing Agreements and Support Services Agreements* for additional information
- 7) **Revised Set of NFP Core Model Elements (2017)** which provides:
 - An overview of the process used to update the Core Model Elements (CMEs)
 - Describes each revised individual CME with: definition, rationale, supporting evidence/literature, practices that support implementation of the CME, variations and challenges across countries, permissible variations, how the CME is measured and analyzed, benchmark(s), and references
 - Clarity regarding what components of the guidance for the individual CMEs countries may change
 - Process for requesting a variance
 - Refer to section in this annual report: *Review of Core Model Elements* for additional information

Program Resources/Updates:

- 1) **Nurse-Family Partnership International Team Update (2016.02.27)** which includes:
 - A summary of the four phases of international implementation
 - A table outlining where each country is at in terms of the “four phases”

- An update on each country's activities and development of NFP
 - An overview of the functions of the NFP international team
- 2) **International NFP Data Collection Manual** which provides:
- An overview of why data collection is an integral part of the NFP program
 - A description of fidelity and client outcomes reports
 - A proposed schedule for completing NFP data collection forms and guidance on time frames for completing the forms
 - A table which identifies the differences in names of data collection forms amongst countries
 - Copies of each form and accompanying guidance (purpose of the form, general guidelines, definitions/directions for completing the form)
 - Note: countries may adapt/augment these forms to reflect their own unique context
 - NFP Supervisors forms used to document their interactions with individual NFP nurses and the NFP team. These forms can be used for quality assurance purposes and to assess individual NFP nurse practice.
 - A number of updates to these forms have also been developed and disseminated during the past 18 months.

3) International Visit-to-Visit (V2V) Guidelines:

The purpose of the NFP V2V Guidelines is to maintain consistency in implementing the NFP model internationally and within countries. Use of these guidelines ensures that comprehensive and essential information is introduced to clients. They also provide the flexibility needed to meet the clients' needs and desires as well as program goals. The V2V Guidelines include:

- A set of facilitators and nurse instructions, menus, choice sheets, guidance for assessment, guidance for using the V2V Guidelines, and content tracking forms, for each of the three program phases: pregnancy, infancy, and toddler
- Individual visit guidelines for pregnancy, infancy, and toddler
- Additional home visiting resources: The NFP Program – How Does it Work?, Home Visit Plan, Home Visit Structure, and How is it Going Between Us?

Review of Core Model Elements

The key features of NFP that need to be reproduced have been identified as Core Model Elements (CMEs) and each country or organization provided with a license for NFP agrees to adhere to these as they implement the program within their own context. Applying the 14 CMEs in practice provides a high level of confidence that the outcomes achieved by families who enrol in the NFP program will be comparable to those achieved by families in the initial three randomized controlled trials and outcomes from ongoing research on the program. Through our international work, we discovered anomalies in the wording and application of the Core Model Elements (CMEs) between countries. This led to the work to update the CMEs to reflect these program refinements, new knowledge, and expert advice from the NFP international community.

A thorough and highly collaborative review of the original 18 CMEs was conducted during 2016-2017. A number of revisions were made to: 1) incorporate new research evidence; 2) seek expert advice from the NFP international community, reflecting on lessons learned over time; 3) address the various contextual issues of the different countries implementing the program; 4) ensure that the expectations for each CME are clear, including benchmarks; 5) and provide clear and consistent

guidance for requesting variances. This has resulted in a revised set of Core Model Elements, which have now been disseminated internationally.

It is expected that each country delivers the NFP program with fidelity to each of the revised 14 CMEs unless a variation has been granted. This will help protect the integrity, quality, and effectiveness of the NFP program while being respectful and sensitive to local context.

➤ Refer to Guidance Document - Changes to Core Model Elements (2017) for more information.

Compiling a data base of all published NFP articles

One of the strengths of NFP, is the strong empirical evidence and the substantive number of published articles in circulation. We regularly receive requests for information about specific aspects of NFP in the published literature. However, we have discovered that searching the established data bases does not consistently yield all publications, nor is there an established mechanism to update countries or NFP researchers on new publications. We have therefore created a database of all published NFP literature to-date, which contains a succinct summary of the article and lists how it can be obtained if published on an open-source journal. There are currently 151 published articles and book chapters in the database; the database will be posted on the new NFP website. Please pass on any new publications to a member of the International Team or let us know of anything we might have missed.

Clinical Advisory Committee

Learning from each other is a priority as we move forward with NFP international implementation. Bringing together the clinical leads for each society provides the opportunity to discuss key issues impacting NFP, successes and challenges of NFP implementation, and fosters a community of practice among clinical leads. The clinical leads join on a conference call every other month and in the past 18 months have discussed topics including the Strengths and Risks (STAR) Framework, mental health, intimate partner violence, use of telehealth, and nursing theory in NFP.

Website Development

The new International website has been in development during 2016/17. The international team created a specification for contents that included both 'open' pages for general viewing, and closed (password protected) pages for the international NFP community to access. We worked with the international community to develop the core text for the public pages and with a web development company on the design aspects of the site. The website is now going through the final stages of testing functionality prior to a launch. We look forward to working with national leads to add to and update the contents to reflect the progress with program implementation and international NFP research. The website will also provide the international community with access to NFP resources and opportunities to more easily share experiences/ program developments.

Consultation to Individual Countries

Each country implementing NFP has access to a named consultant who provides expert support to them, as well as providing access to guidance from David Olds, particularly in relation to research

issues. The nature and extent of the support required depends on the stage of program testing within a country and the broad requirements for the year are discussed and agreed annually. Countries in phases 1 and 2 of NFP implementation generally require support with developing an understanding of the program, guidance for implementation and testing within the country's specific context and the appointment and training of key personnel. At later stages of implementation, support is generally more focused on opportunities for adapting and testing program developments, as well as supporting, and learning from, research efforts. During the last year, we have provided support to all NFP national implementation leaders and countries.

Annual Reviews

Each country prepares an annual report and takes part in an annual review with their international consultant and Dr. David Olds. This is an important aspect of the licensing agreement and provides an opportunity to consider progress with the program over the year. The inclusion of key fidelity data alongside reflections by the countries leaders on issues provides an opportunity for successes to be applauded, challenges to be analyzed and potential solutions to be agreed. Following feedback on the annual report template, and the outcomes of the CME review, we will be revising the annual report templates later in 2017.

Maintenance of Licensing Agreements and Support Services Agreements

Agreeing and signing the agreements relating to program use are an important aspect of NFP program use within a country. The license agreement permits a country/site to use the NFP trademarked/licensed program, outlines the responsibilities of the license holder in using the proprietary materials and delivering the program with fidelity. The support services agreement is for clinical/technical expertise provided by the international consultant(s) and Dr. Olds. New guidance to clarify the rationale, the fee structure and expectations for both aspects has been developed for all societies. Please contact Rob Murchison for all inquiries relating to these agreements.

➤ Refer to Guidance Document - Requirements for Implementing NFP (2017) for more information

Priorities for International Team for the remainder of 2017:

- Work with each country to review assessment of compliance with revised core model elements
- Develop a guidance document on the use of Telehealth
- Revise/streamline the annual report templates
- Update licenses and Support Services Agreements to reflect change in CMEs and expectations outlined in *Guidance Document - Requirements for Implementing NFP (2017)*
- Continue to provide consultation to each country for specific items/issues

As always, it is a pleasure and a privilege to work with our international NFP partners.
Ann, Ben, David, Debbie, Elly, and Rob