



The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months:

No relationships to disclose



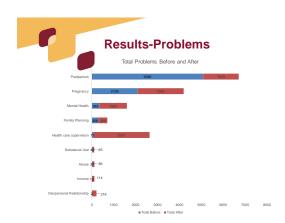
- Evidence-based guidelines for public health family home visiting were encoded using the Omaha System in 2008 and updated in 2013.
- Provide guidance for PHN interventions (N=101) for 10 Problems, including 3 Categories, and 35 Targets
- Care plan available on the Omaha System Guidelines website www.omahasystemguidelines.org
- How PHNs use the guideline in practice is not known



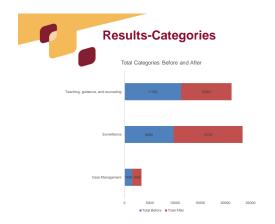
 The purpose of this study was to empirically evaluate use of the family home visiting evidence-based care plan with electronic health record (EHR) data generated by PHNs providing evidence-based family home visiting services.



- · Descriptive, comparative study
- Sample
 - 48,039 PHN family home visiting interventions
 - 22,357 before Care Plan Implementation (47%)
 - 25,682 after Care Plan Implementation (53%)
 - 1046 female clients
 - mean age 29.3 (all > 18 years)
 - 71.2% white
- Standard descriptive and inferential statistics were employed in the analysis using Excel and SPSS



Empirical Evaluation of a Standardized, Evidence-based Care Plan for Public Health Nurse Family Home Visiting





Limitations

 As in any observational study, controls could not be imposed. Therefore, further research is needed to study reasons for variations found in intervention data.



- The evidence-based family home visiting care plan appears to have met the needs of PHNs for documenting home visiting practice
 - PHNs used all but one intervention from the care plan
 - PHNs added interventions as needed, but these were minimal
- PHN documentation appeared to reflect both the care plan change and policy changes.
- PHN documentation appeared to reflect tailoring to meet individual needs – a hallmark of evidencebased home visiting care.



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