

WHAT STATE LEADERS SHOULD KNOW ABOUT: Universal Newborn Screening & Support Systems



Building a coordinated system and new standard of care for how families with newborns are welcomed and supported in Illinois

Regardless of ZIP code or family income, when welcoming a new baby, all parents and families could benefit from additional encouragement and support.

The first three years of a child's life are the most rapid, critical, and vulnerable period of development in the entire human lifespan, making the early weeks among the most important for building secure relationships with parents and caregivers and ensuring that families have what they need to support healthy development. At the same time, the early postpartum period represents a vitally sensitive window for screening for critical health risks and supporting the physical and mental health of birthing parents.



Yet despite the importance of supporting families with a new baby, unlike many high-income nations, we lack a comprehensive, universal approach to reach all families to identify health risks for both the newborn and parents and provide connections to vital community resources

IL BIRTH CHARACTERISTICS DATA SNAPSHOT (2020)₁

133,304 births statewide

35,430 or 27% of births to parents who lack adequate prenatal care

12,434 or 9% of births to parents 20 years + without a high school degree

13,733 or 10% of births were preterm

IL FAMILY STABILITY, HEALTH & EARLY CARE AND EDUCATION SNAPSHOT (2019)₂

170,754 or 19% of children age 5 and under lived below the 100% federal poverty level

58,526 or 7% of children age 5 and under had no parent in labor force

19 indicated reports of maltreatment per 1,000 children age 5 and under

10,925 or 5% of tested children age 6 and under with elevated blood lead levels (2018)

Universal Newborn Screening & Support Systems (UNSS): offer and provide voluntary, short-term screening and referral services to every family with a newborn to help connect them to the supportive services and resources they may need and want, at no cost to the family

Broadly, UNSS approaches consist of a nurse home visitor, community health worker, or other trained professional meeting with a family in the home to assess health and overall well-being in the immediate postpartum period. Referrals may be made to services to address health and mental health needs, intimate partner violence, substance use, infant and maternal health, child development, socio-economic needs, safe sleep, managing crying, help with infant care, and a myriad of other needs.

There are already a number of communities in Illinois with operational UNSS systems. Family Connects, a nurse-driven UNSS model that emerged out of Duke University, has been implemented as [Family Connects Illinois](#) in Peoria and Stephenson Counties. Efforts are underway through public-private partnership to scale [Family Connects Chicago](#) to all birthing hospitals in the City of Chicago. Evidence from these and other UNSS models demonstrate robust family-level benefits, including improvements in maternal and infant mental health, reductions in emergency medical care in the first years of life and positive parenting behaviors.

Community-level impacts of UNSS include strengthened networks of community resources and referrals supporting families, improved data collection on the needs of families, which supports a public health response and identification of gaps in services or barriers to accessing available services, and a potential reduction in stigma associated with family-support services that have historically targeted toward "at-risk" populations.

UNSS approaches are not duplicative of any of the existing services that families benefit from and choose to participate in, including primary health care, case management, Early Intervention or home visiting services. Instead, these systems operate as a coordinated intake and referral system to increase the alignment of local family-support services and improve uptake of these services by families with young children. By collecting data on family needs and outcomes, as well as the availability of other local services (infant and maternal health, mental health, early learning, economic supports, etc.), UNSS approaches help streamline coordination across family-facing services and supports and ensure these are accessible within the local community.

Universal Newborn Support Services Snapshot, January - June 2022

| Community | Births in Participating Community Areas | Number of Families Receiving a UNSS Visit | Caregiver Insurance Status |
|-------------------|---|---|--|
| Peoria County | 834 births | 257 completed visits (population reach = 43%) | <ul style="list-style-type: none"> 50% of caregivers were insured by Medicaid/Public Insurance 49% were insured by Private/Employer Provided plans |
| Stephenson County | 146 births | 87 completed visits (population reach = 60%) | <ul style="list-style-type: none"> 75% of caregivers were insured by Medicaid/Public Insurance 24% were insured by Private/Employer Provided plans |
| City of Chicago | 2,233 births | 998 completed visits (population reach = 45%) | <ul style="list-style-type: none"> 73% of caregivers were insured by Medicaid/Public Insurance 26% were insured by Private/Employer Provided plans |

Illinois is making significant progress on community implementation of UNSS and alignment of prenatal-to-three systems and services, including through the Early Childhood Comprehensive Systems federal planning grant (ECCS) and efforts to establish Medicaid reimbursement for components of UNSS. However, bringing UNSS to scale will require government commitment and leadership, a mindset shift encompassing cross-silo, multi-disciplinary involvement to facilitate alignment across state agencies and systems, as well as local communities, and a robust and diversified funding base to launch and sustain UNSS services.

No UNSS program has succeeded without integrating multiple funding streams. To finance UNSS, Illinois will require a mixed-payer system with intentional braiding of both public and private sources of funding, including Medicaid and private/employer provided insurance, state funds, philanthropic support and local dollars. Consolidated oversight and leadership under a single state agency can support integration of program administration and financing, even where UNSS expansion may draw on various state and federal funding streams.

Ultimately, state funding can be used more effectively when services are coordinated and accessible to families, and UNSS approaches are central to building a more efficient, coordinated prenatal-to-three system of support in Illinois.

"It's just getting that medical support and knowledge and information, but in a comfortable environment. It sounds weird to invite a stranger into your home, but it's just so helpful and encouraging to be able to do it in a comfortable environment where it can be slow paced, where you don't have to worry about leaving your home [...] It's good to know that [universal newborn supports] are there for any mom, no matter where you're at or what your needs are or what your family, financial or family support situation is. But for me, it was just the encouragement of having a nurse come in and say, 'Hey, how are you doing?'"

**SAMANTHA PRICE,
MOM OF FOUR IN PEORIA COUNTY, ILLINOIS WHO PARTICIPATED IN
FAMILY CONNECTS UNIVERSAL NEWBORN HOME VISITING AFTER
ALL FOUR OF HER BIRTHS**

[1] 2020 Birth Characteristics Data, Illinois Department of Public Health, Birth Statistics

[2] Risk and Reach 2019 Data: State of Illinois, Erikson Institute

