



# Healthy Start Evaluation 2011-12 Key Outcome and Service Findings

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*Informing policy,  
Improving programs*

# Presentation Overview

- Key Outcome Findings
- Service Delivery Findings
- Areas for Improvement
- Looking Ahead

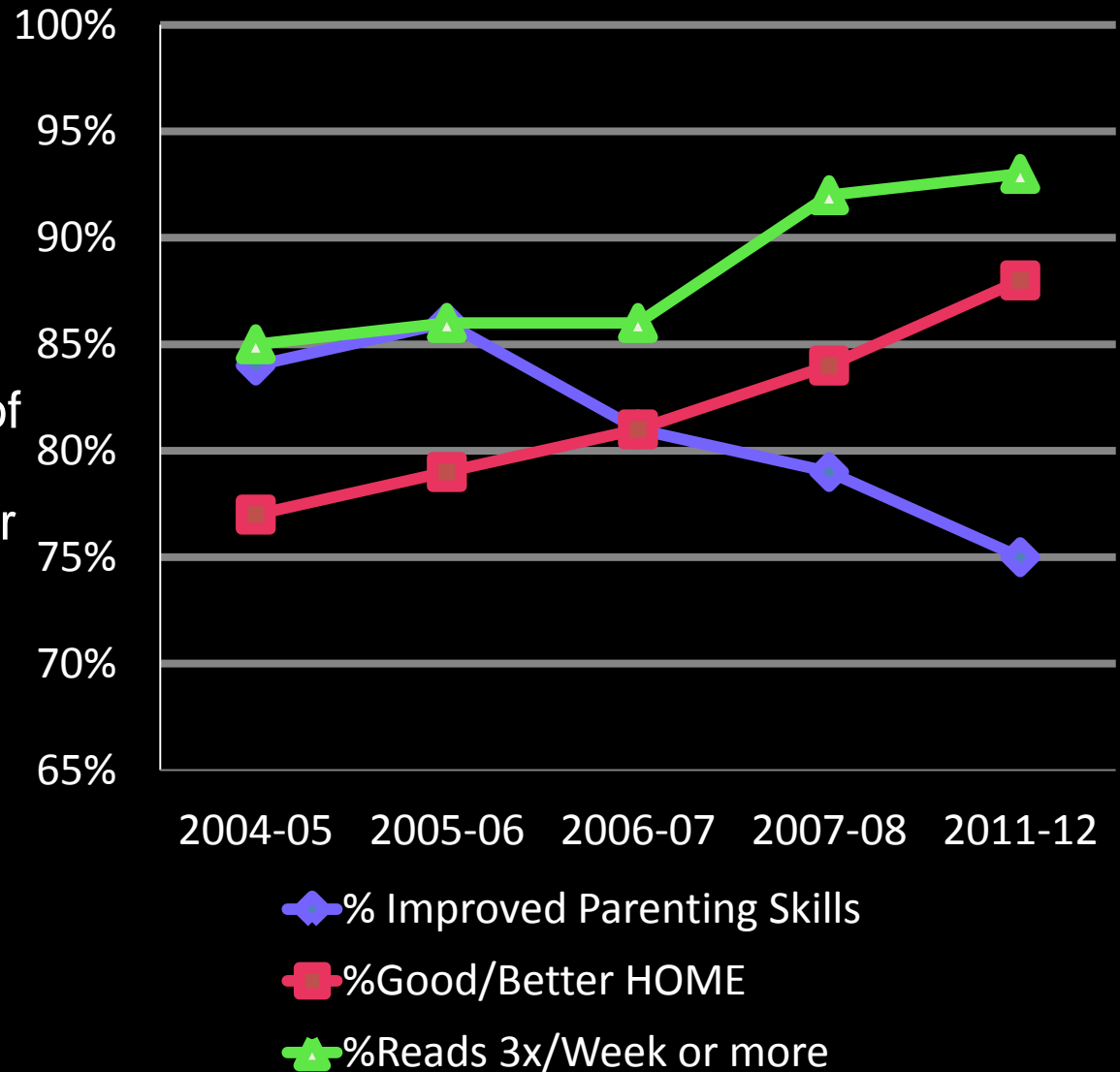


# Program Outcomes



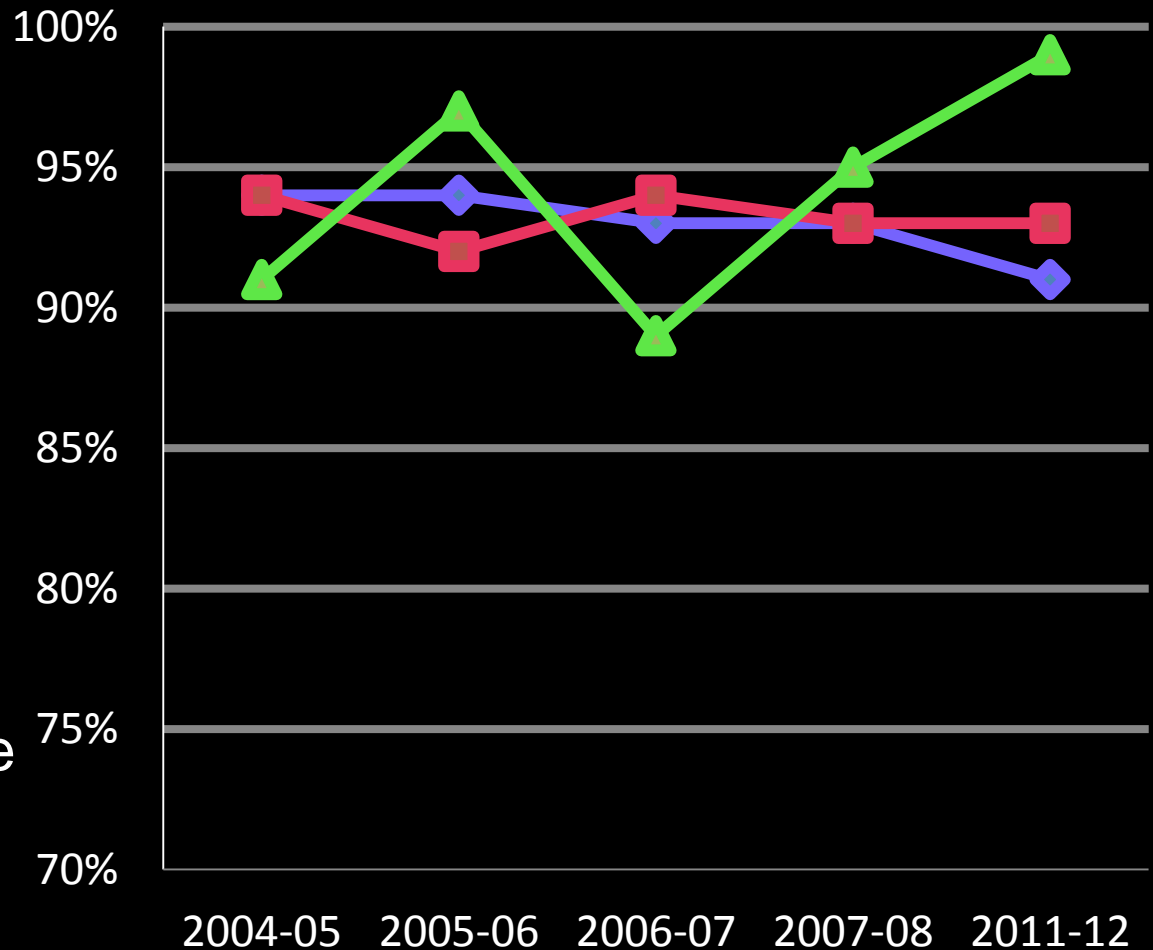
# Parenting Outcomes

- HOME scores improving generally
- Parent improvement in parenting skills declined slightly.
- Reading to children improved - only 83% of parents nationally read to their young child 3 or more times per week (67% for low income families)
- 61% of families reported decreased parenting stress



# Health Outcomes

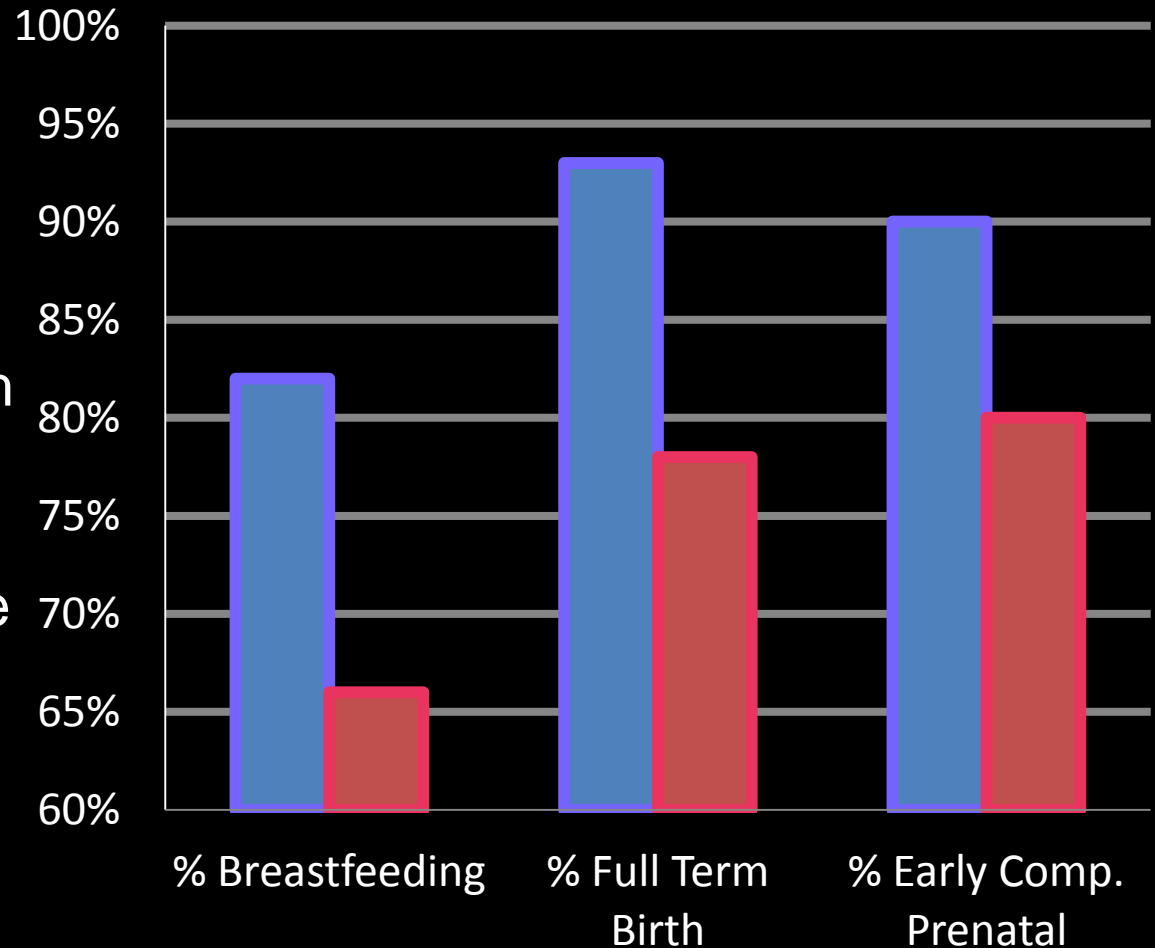
- Overall health outcomes very strong, exceed HFA standards
- Only 76% of Oregon 2-year olds fully immunized
- Insurance coverage continues to increase



◆ % Immunized by age 2    ■ % Regular Well-Child  
▲ % Children w/Insurance

# Birth & Neonatal Outcomes

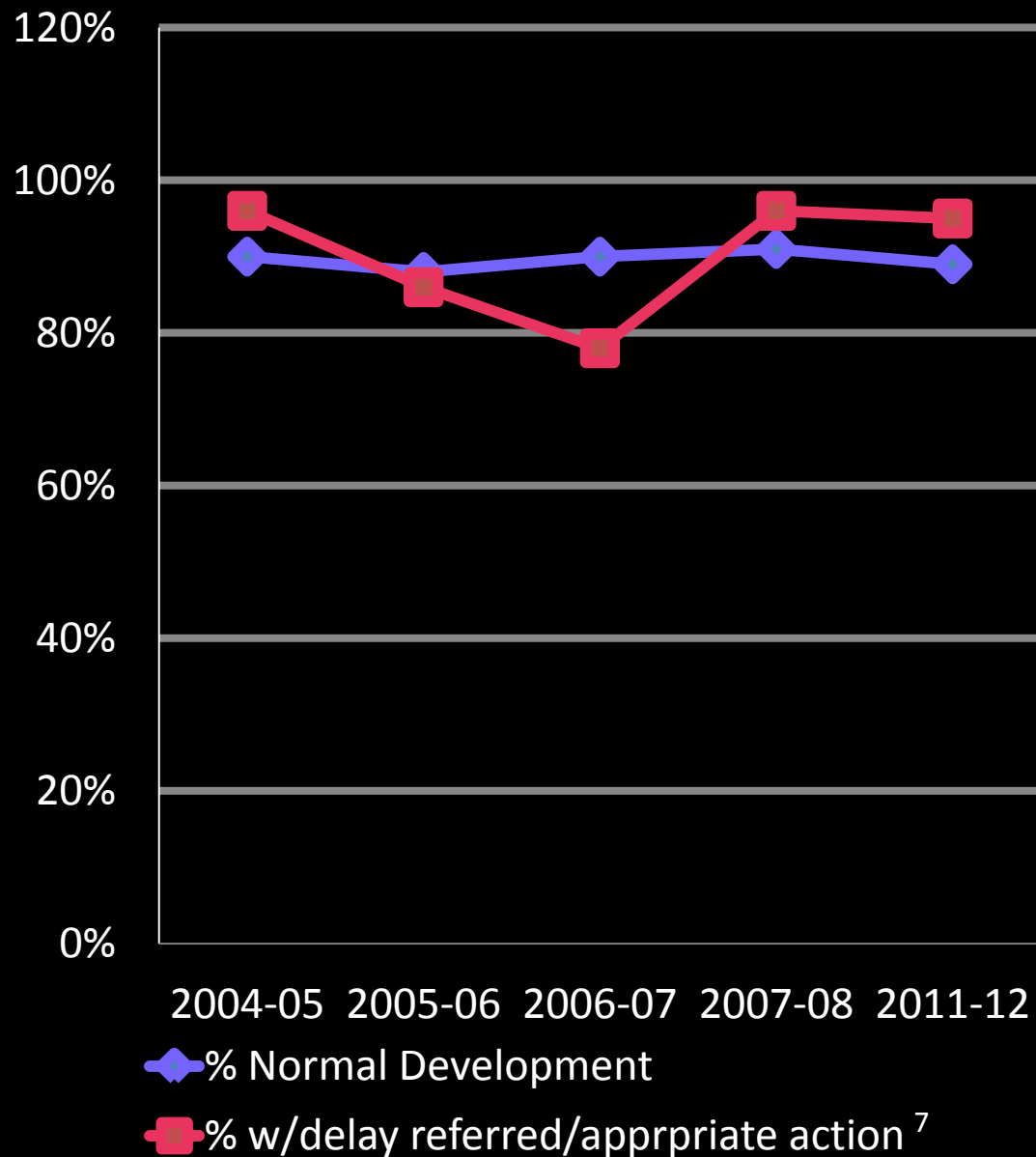
- 89% of Oregon mothers ever breastfeed
- 68% of HS~HFO mothers ever breastfeed, but much higher if served prenatally
- Early comprehensive prenatal care was higher for HS~HFO moms with a second pregnancy (91% vs. 86%)



■ Served Prenatally (n=429)  
■ Served Postnatally (n=2171)

# Child Development

- Most children are developing normally
- Staff take appropriate action when delay indicated
- Percentage of children receiving an assessment slightly lower:
  - 88% 2011-12
  - 93% 2007-08
  - 79% 2006-07
  - 73% 2005-06



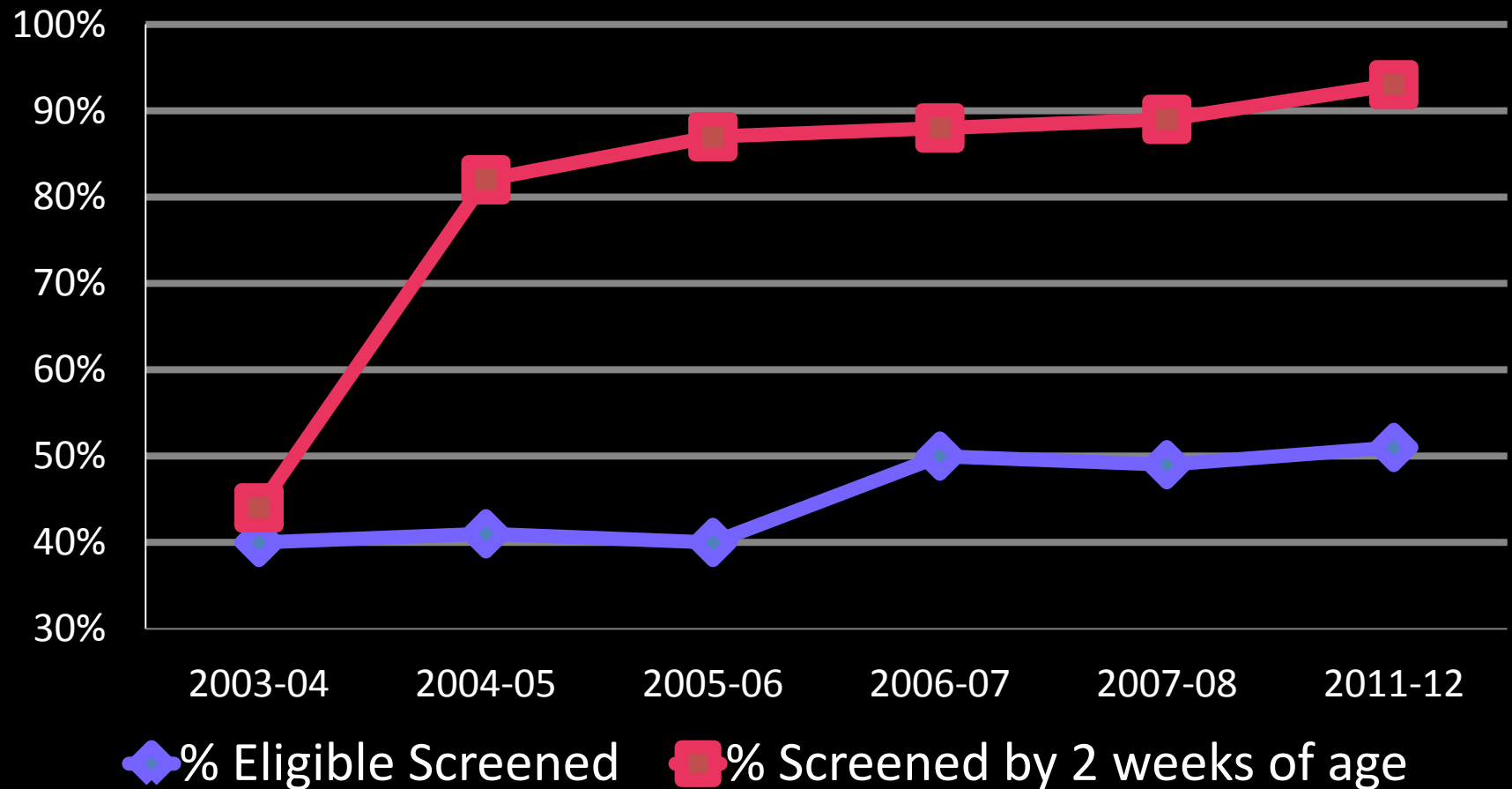


# Service Delivery Outcomes



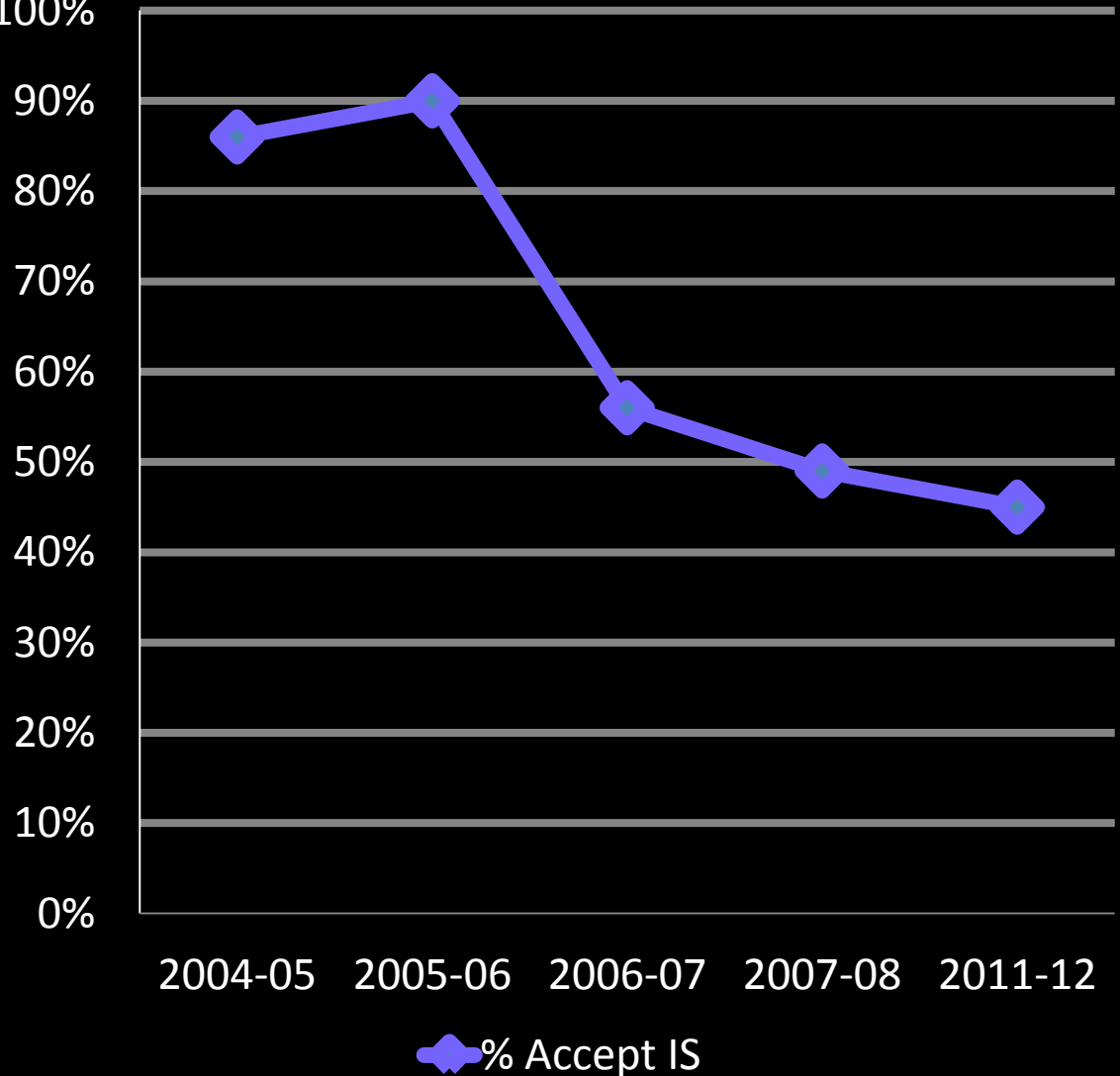


# 2011-12 Screening Rate

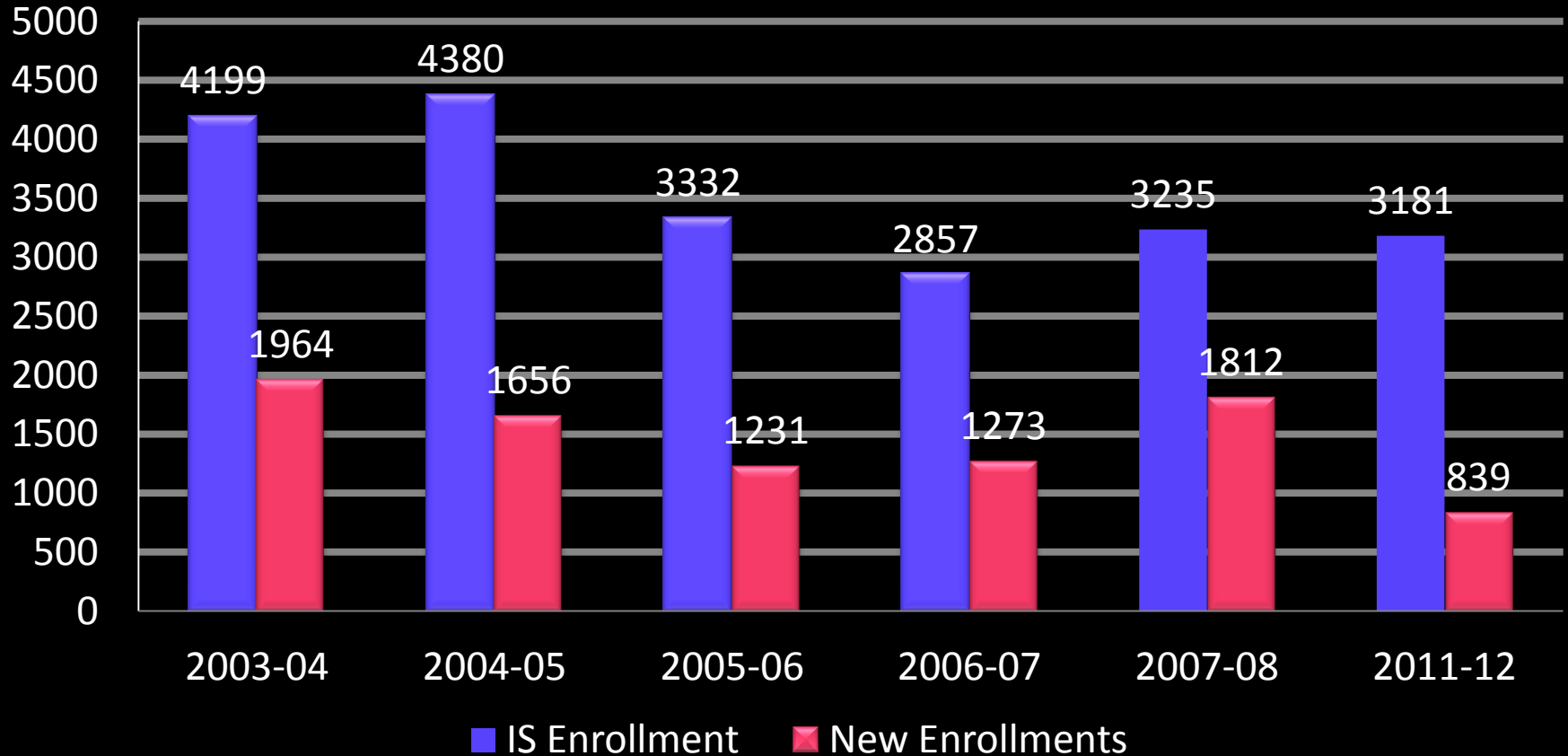


# Program Acceptance Rates

- Initial acceptance = 100%  
66% of those offered
- Final acceptance rates decreased slightly
- Families decline because they don't feel services are needed
- Families who decline are lower risk than families who accept



# Enrollment in Home Visiting



# Screening & Enrollment: Client Flow in HS~HFO 2011-12

- 9,052 families screened
- 4,414 (52%) eligible
- 4,085 (93% of eligible) offered home visiting
- 2,689 (66%) initially accepted/interested
- Reasons for declining at screening/initial offer:
  - 975 (70%) service not needed
  - 72 (5%) “too busy”
  - 349 (25%) “other”



## Screening & Enrollment: Client Flow in HS~HFO 2011-12

- Of 2689 initially offered & accepted, 1887 (70%) were offered services at follow up
- Reasons for not offering services:
  - Unable to contact (411, 51%)
  - Didn't meet local eligibility (most RCT families; 228, 28%)
  - Family no longer interested (163, 20%)
- Of 1887 interested and offered at follow-up, 839 (45%) “accepted” – received a first home visit.



# Other Key Performance Indicators

- Home Visit Completion: 81%
- Caseload points: 22 per home visitor
- Cash match: 86% cash match reported on average statewide
- 25% total match: 103% total match reported statewide
  - Match varies dramatically across programs, from 23% total match to 595% (only one program did not meet 25%)
  - Cash match also varies (5 to 595%); all programs reporting met the standard



# Demographics of IS Families



Families are very high risk compared to general population

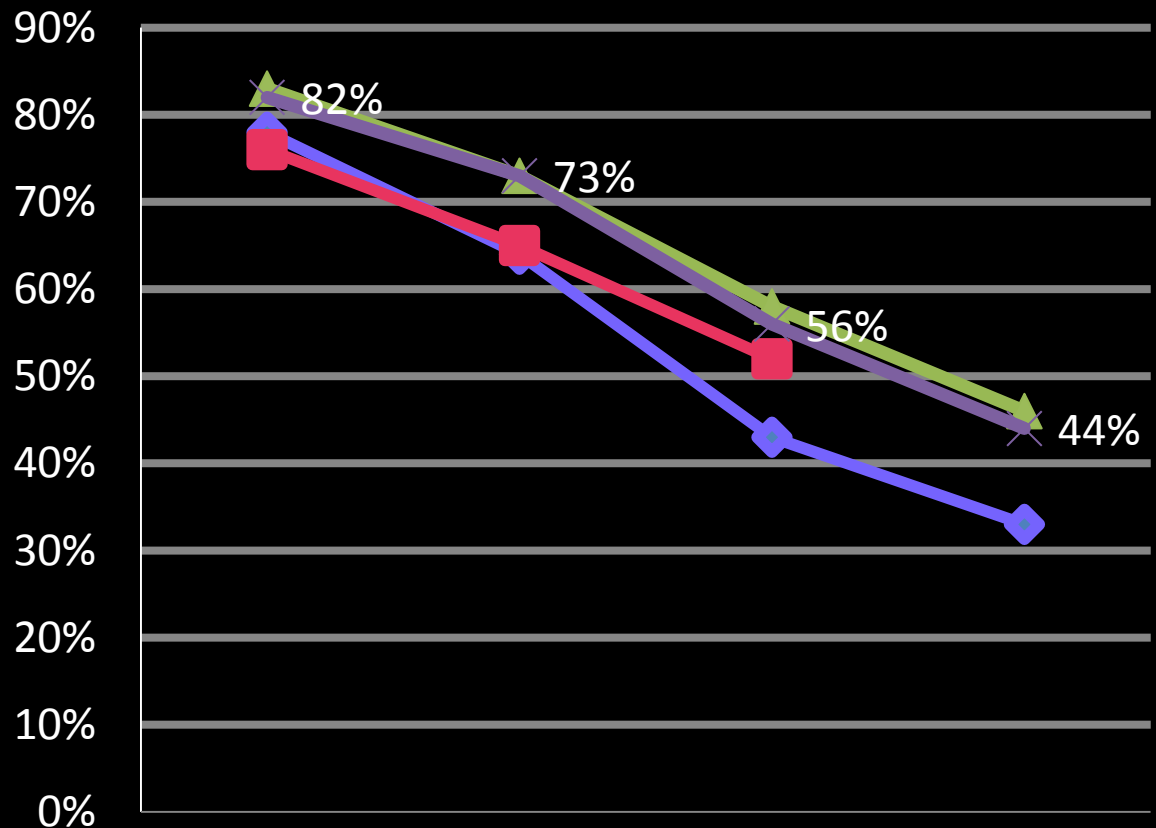
- 88% below Fed Poverty Level
- 15% teen moms
- 77% single moms
- 52% Hispanic moms
- 23% moms at risk for depression
- About 3 risk factors per family





# Program Retention Rates

- About 18% drop out within first 90 days
- 44% more than 18 months
- Retention has improved since 2006-07; similar to 2008-09



% retained 3 months    % retained 6 months    % retained 12 months    % retained 18 months

◆ Enrolled 2005-06    ■ Enrolled 2006-07  
 ▲ Enrolled 2008-09    ✕ Enrolled 2009-10



# Do Services & Outcomes Differ for Subgroups of HS~HFO Families?

- Looked for differences in services & outcomes for subgroups of HS~HFO families:
  - Hispanic (vs. white), teens, mom < high school, both parents unemployed , single, depressed, and higher risk



# Service Delivery Differences

- Acceptance:
  - Hispanic/Latino families more likely to accept home visiting (55% vs. 38%)
  - High risk families also more likely to accept home visiting
- Retention:
  - Hispanic families more likely to be retained at 12 months, compared to White families (59% vs. 51%; especially if Spanish speaking (62%))
  - Lower risk families are retained longer, especially married, employed, non-teen



# Outcome Differences

- In contrast to 2007-08, Hispanic families had ***less positive*** parenting outcomes (reading, HOME, improved skills) than White families
  - Except for parenting stress (reversed)
  - Overall outcome status for Hispanic families still positive
- HOME scores lower for families at higher risk
- Children with more risk factors (esp. teen mothers) were less likely to have well-child

visits



# Program Strengths



- **Outcomes:**
  - Parents reading to children
  - Improving parenting skills
  - Decreased parenting stress
  - Child preventive care
  - Family home environments
- **Service Delivery**
  - Screening rates & timing
  - Home visit completion
  - Retention improvements
  - Match



# Areas for Future Work



- Increase acceptance rates for IS services
- Consider more prenatal screening
- Improve retention rates both short and long term
- Ensure developmental screening

# Randomized Study Updates

- Total sample: 2,665 families: 1,405 families (52%) program group & 1,259 families (47%) control group.
- 803 parent interviews with program and control families completed
  - Done at baby's one year birthday
  - Preliminary results spring 2013
- Data from a variety of state sources being tracked:
  - Child welfare, DMAP, Criminal Justice, Other DHS (TANF, child care, etc), Mental health and substance abuse treatment
- Preliminary state data report in Fall 2013 (one year post random assignment)



Final report in Winter 2015



# Version 10 Evaluation Forms

- As a reminder, programs should only submit evaluation forms to NPC that are **Version 10**.
  - NPC scans: Family Intake, Family Update, Parent Surveys and HOME forms only.
  - All other data are entered by programs into Family Manager.
- Procedure change on **Family Intake**:
  - This form should only be completed by the worker once the baby is born (not prenatally).



# 2012 Special Recognition

- During 2012, NPC identified programs that required minimal follow-up with their submitted forms.
- We would like to bring special recognition to Multnomah County's IMPACT NW Team for consistently submitting forms with minimal error.



# Coming Up for 2013

- Maltreatment report late spring (we hope!)
- Randomized study preliminary outcomes (late spring 2013)
- Revised Performance Indicators
- No form revisions

