

Healthy Families Indiana

Annual Report 2006

"Indiana views children and families as the highest priority."



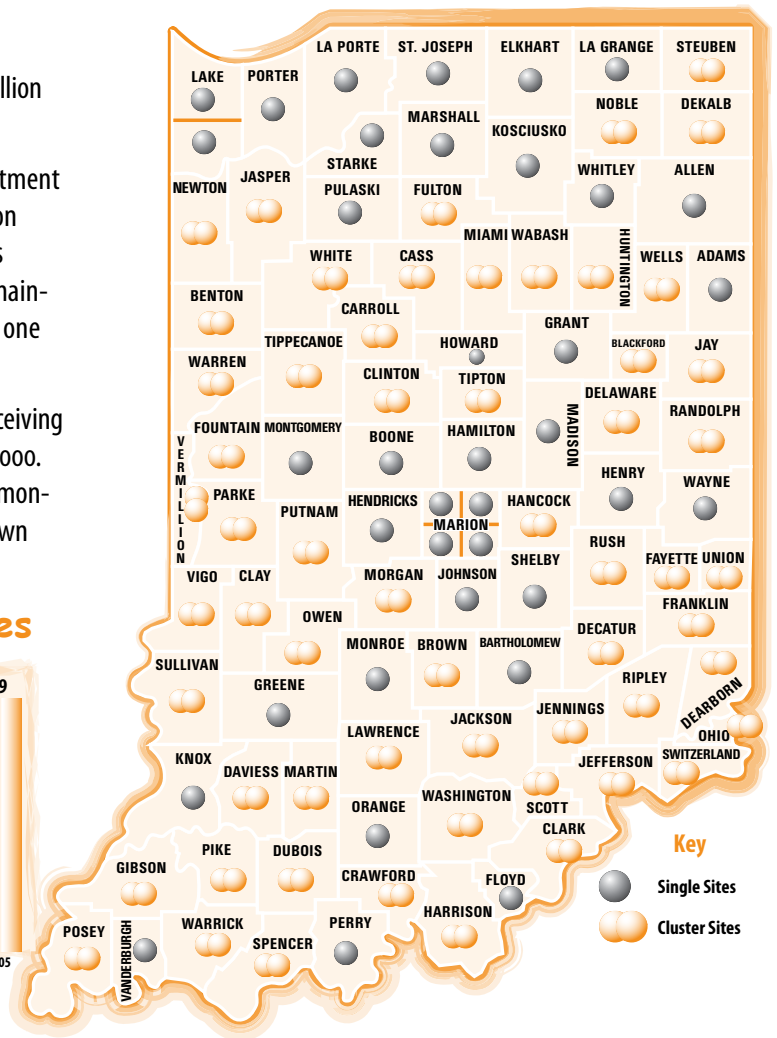
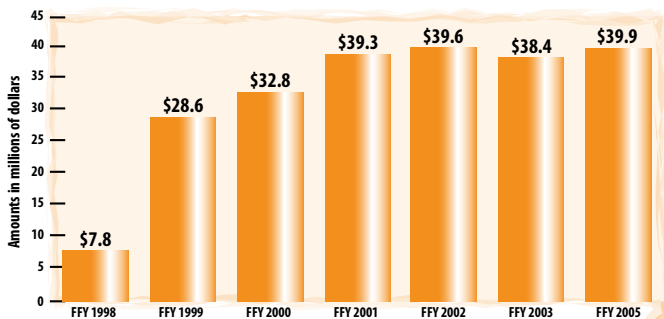
Home Visitors Program

Indiana has 92 counties with a population of more than six million residents.

Healthy Families Indiana (HFI) grant awards from the Department of Child Services (DCS) reflect the urban, rural and population characteristics of each county. Currently, 37 Healthy Families Indiana sites are funded as single county providers. The remaining counties are funded as "cluster sites" serving more than one county (See map at right).

Typically, budgets for HFI sites range from a small program receiving \$160,000 to the largest program in the state receiving \$4,000,000. The Expansion of Healthy Families (See chart below) clearly demonstrates how support and the mission of the program have grown since its inception in 1994.

Expansion of Healthy Families



How are the Numbers Gathered?

All local Healthy Families Indiana sites use an electronic data collection system developed specifically for Indiana by Datatude, Inc. This system collects and reports an extensive array of client data and staff activity at each local site while maintaining strict confidentiality for each family. Information is then sent to a secure central location, where statewide reports are generated. Integrated into the HFI billing system is the

newly implemented monthly electronic transfer of client-specific claims to the DCS Claims Management System. The data collection system has provided cost savings, as well as, time, paper and error reduction. Increased efficiency and additional cost savings resulted as the program moved to approved web-based technology. This technology provided online real-time access for both the local sites and state stakeholders.

A Letter from the DCS Director

As Healthy Families continues to help stop the cycle of child abuse and neglect, I wanted to take a moment and thank all those involved for your tireless work and support of children and families. I congratulate all you – providers and staff, parents, and community partners - who help make this program a success.

Research over the last two decades has consistently confirmed that providing education and support services to parents around the time of a baby's birth, and continuing for months or years afterwards, significantly reduces the risk of child maltreatment and contributes to positive, healthy child rearing practices.

On April 24 2006, I attended the Healthy Families Training and was

extraordinarily impressed by the trainers, but most of all, by the passion and commitment of all of you doing such wonderful work for children and families.

With this in mind, I commend the work of Healthy Families Indiana. Your coordination with other initiatives, most recently the joint research venture with Building Strong Families, makes Indiana a model for other states.

I look forward to future successes of Healthy Families and the continued dedication of Hoosiers like you.

Sincerely,
James W. Payne, Director

Reaching Families: Screening

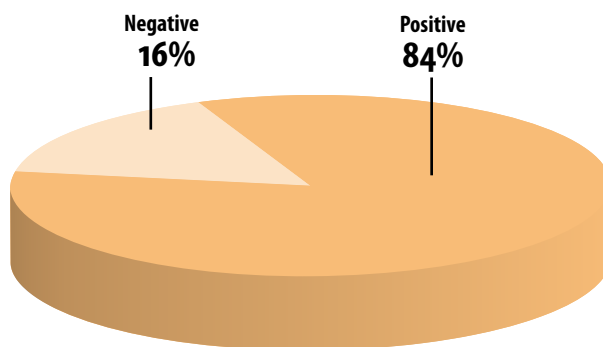
Healthy Families Indiana strives to offer supportive services to at-risk families.

A partnership with the Indiana Hospital Association resulted in hospitals across the state agreeing to help HFI reach more families. In 2005, over 84,000 Hoosier babies were born. Utilizing a 3-item screen (referral tool) to analyze birth certificate data we estimate that 56% of those birth families would screen positive and could benefit from HFI services. When a family screens positive, with permission, HFI contacts them to assess strengths and needs and link the family to appropriate resources.

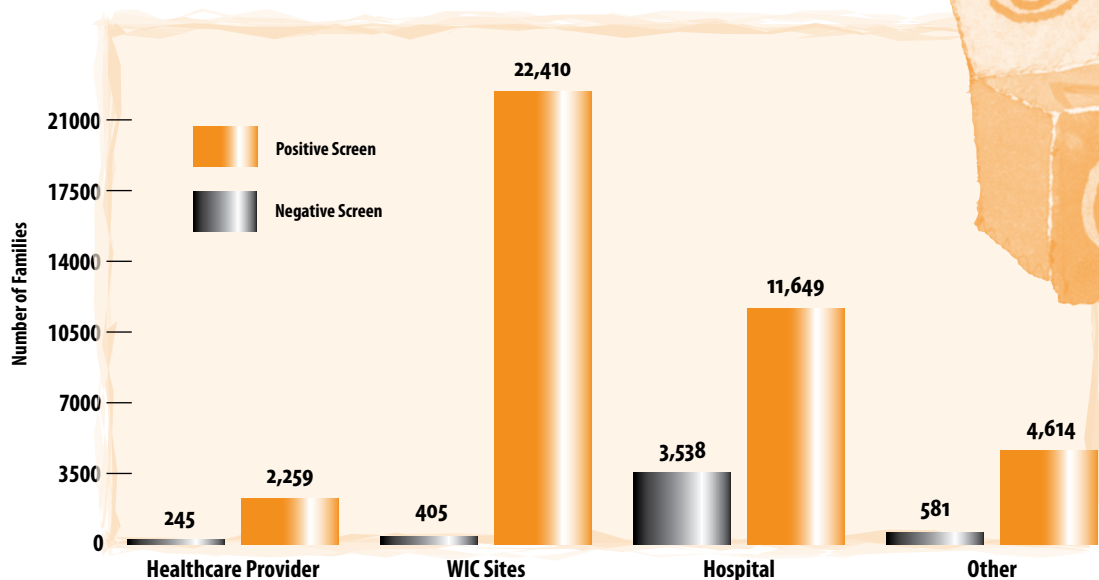
Healthy Families Indiana received 48,530 screens or 58% of all Hoosier births. Of those received, 84% or 40,932 families screened positive, indicating that the family could benefit from HFI services.

Screens received by HFI come primarily from WIC, hospitals and health care providers, with additional screens coming from sources such as schools, social agencies and self-referrals. (see graph below).

Screens Received in FY2005



Referrals



Reaching Families: Assessment

In FY2005, 56 Healthy Families sites assessed 17,160 families throughout all 92 counties in Indiana.

Assessment is a service. Families are assessed using a standardized tool to guide a conversational interview. Depending on the results, families are linked to appropriate supportive services in the community.

Families who are overburdened and challenged by parenting are offered HFI home visitation, when it is available. If HFI home visiting is not available or acceptable, the family is linked with other resources, such as parenting groups.

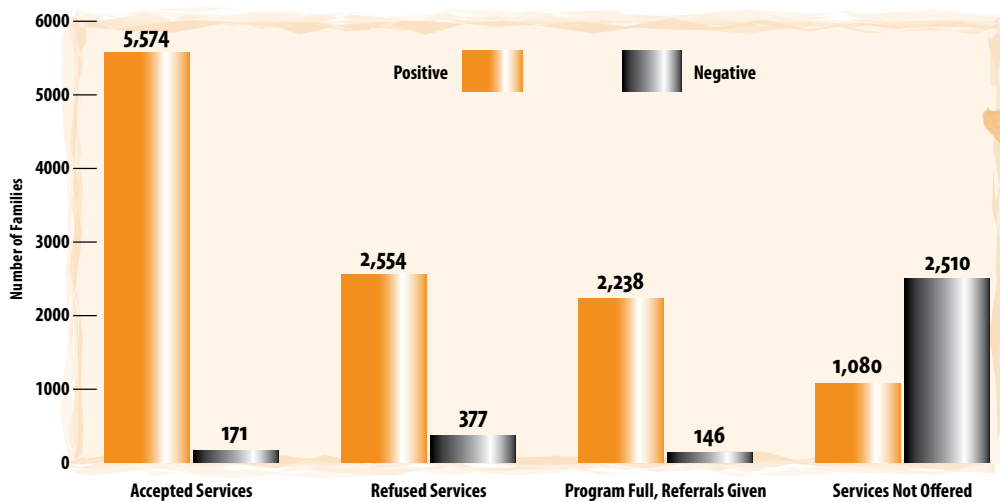
About 79% of all assessments indicate a need for services and about half of all assessments are done prenatally.

Of mothers who assessed positive, 31% had less than a high school education; 19% were less than 20 years of age and 77% were not married.

When mothers assessed positive, 41% accepted home visiting services and 19% declined the offer.

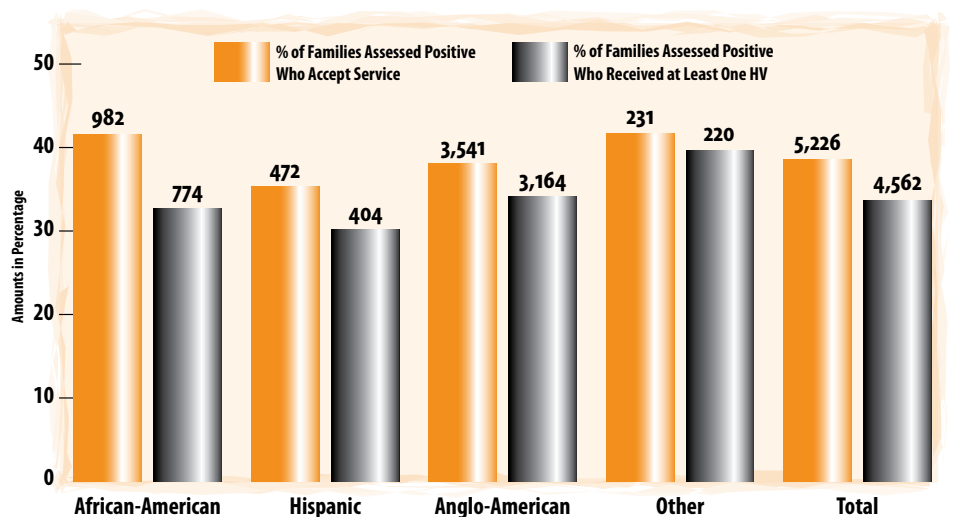
16% could not be offered services because the program was full and 8% were not offered Home Visiting (HV) services for other reasons. When mothers assess negative, home visiting usually is not offered, unless there is an overriding clinical reason or the father of the baby assesses positive.

Outcome of Assessment




Our data has shown that across all ethnic groups nearly the same percentage, 39-42%, of families who assessed positive and initially accepted services choose to continue receiving services. Because HFI is strictly voluntary every effort is made to encourage families to participate but some families choose not to continue to receive services. Of all families offered home visiting services, 39% accepted the offer and 33% had at least one home visit. There were only slight differences among ethnic groups in the percentage of families who accepted HFI services and continued receiving those services.


Intake by Ethnicity




Family Progress

Several scales are implemented to help assess and track family progress.

 **The Community Life Skill Scale (CLSS)** measures the family's ability to use community resources. The CLSS was administered to 3,841 families at enrollment and 92% scored above 18, indicating most families are able to access resources.

 **The Difficult Life Circumstances Scale (DLC)** measures the level of stressors and chronic family problems. 3,359 families completed the DLC and 15% scored 6 or above which is considered high risk for poor family, parenting, and childhood outcomes.

 **The Home Scale (HS)** has six sub-scales specifying areas of parent/child relationships and the quality of the home environment. 3,090 families were assessed initially with the Home Scale and 27% scored in the lowest fourth overall. HFI evaluation shows that scores improve when families participate in HFI home visiting (*See the Home Front on the Fact Sheet*).

(The table below gives the breakdown of Home scores by area).

Sub-Scale Area	Lowest Fourth	Middle Half	Upper Fourth
Responsiveness	16.07%	42.04%	41.90%
Acceptance	9.00%	48.96%	51.04%
Organization	21.18%	46.87%	31.95%
Learning Materials	42.41%	38.44%	19.15%
Involvement	25.54%	31.99%	31.99%
Variety	19.57%	51.35%	29.08%

The HFI Program

The HFI Program serves children from birth to 5 years of age. On occasion, the family will have additional children who will also be followed with regards to development. Of the 15,011 children served in the families in the program, the age dispersion may be seen in the first chart below.

Progress on obtaining immunizations, maintaining medical services and keeping well child visits are tracked for children within program families. The second chart below gives the average progress on these benchmarks for all families served in FY2005.

Age of Child	Percent of Total Children Served
Prenatal	13%
0 to 6 months	24%
from 6 to 12 months	16%
from 12 to 18 months	11%
from 18 to 24 months	7%
from 24 to 30 months	6%
from 30 to 36 months	5%
from 36 to 42 months	5%
42 to 48 months	3%

Benchmark	% Meeting
Children with up-to-date in immunizations	92%
Children with available medical care	97%
Children keeping well child visits	93%

HFI Pilots: A Research Project

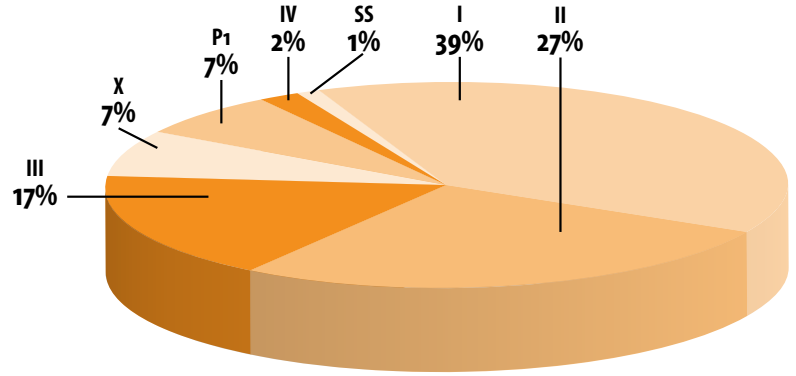
In the spring of 2005, Healthy Families Indiana was selected to incorporate the Building Strong Families model, a research based relationship support component, into its core Healthy Families services. Building Strong Families is part of a broad policy initiative to support healthy marriages being undertaken by the U.S. Department of Health and Human Services (HHS), Administration for Children and Families (ACF). The Building Strong Families project, managed by Mathematica Policy Research, Inc., is designed to help interested unmarried parents improve their relationships and contribute to the long-term development and well-being of their children. In Indiana, the intervention provides for a greater focus on couple relationships, by providing additional resources to educate couples on relationship skills and linking families to services that remove barriers to achieving a healthy relationship. During the pilot, seven Building Strong Families/Healthy Families sites participated by enrolling eligible couples who voluntarily agreed to weekly group sessions that are combined with regularly scheduled Health Families home visitation.

With approval from DCS, FSSA, the I.U.P.U.I. and Clarian Institutional Review Board, and ACF, Building Strong Families/Healthy Families moved into the full evaluation stage in January 2006. A sample of 720 couples from seven sites will be enrolled over a two year period. These couples, randomly assigned into program and control groups, will be followed for at least three years. Six other states across the nation were selected by ACF to participate in the Building Strong Families research project.

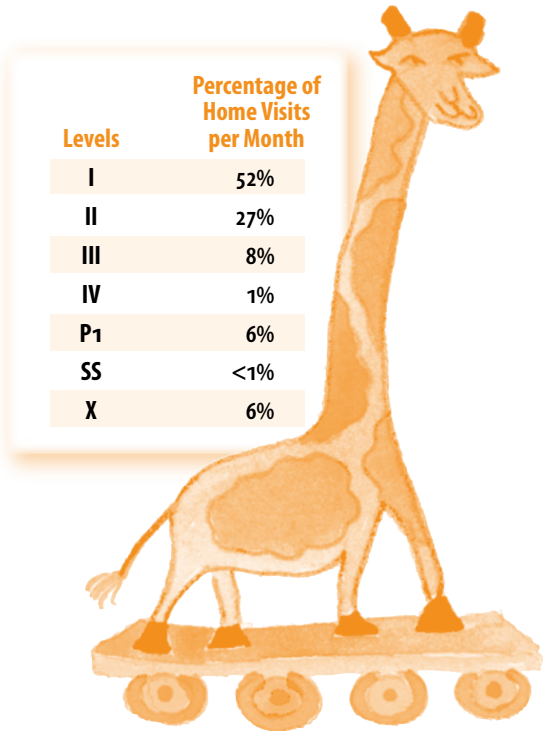


Families Served

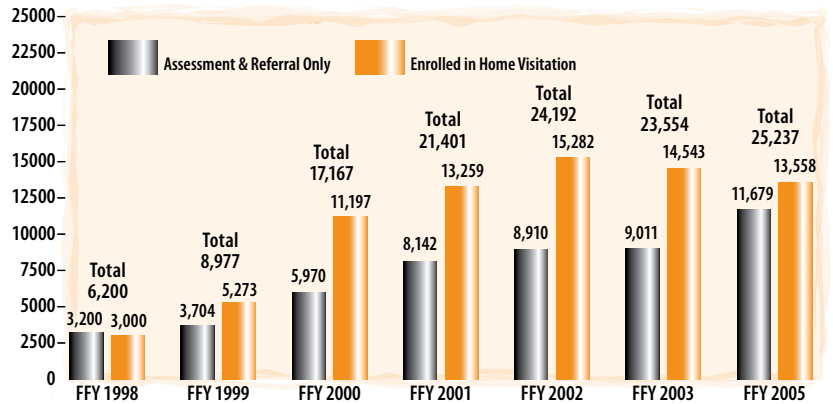
In FY2005 there were a total of 186,159 home visits completed by 867 Family Support Workers (FSWs). These home visits were conducted with 7,563 different families. HFI utilizes a system of service levels that correlate to the intensity of service through the frequency of home visiting. The chart shown on the right gives the percent of families at each service level in an average month.



Each service level requires a specific number of visits per month. The chart below details the percent of visits delivered per month to families at each service level. Families at service level I require more frequent home visitation, therefore the 36% of families at level I require 52% of the home visitation per month.



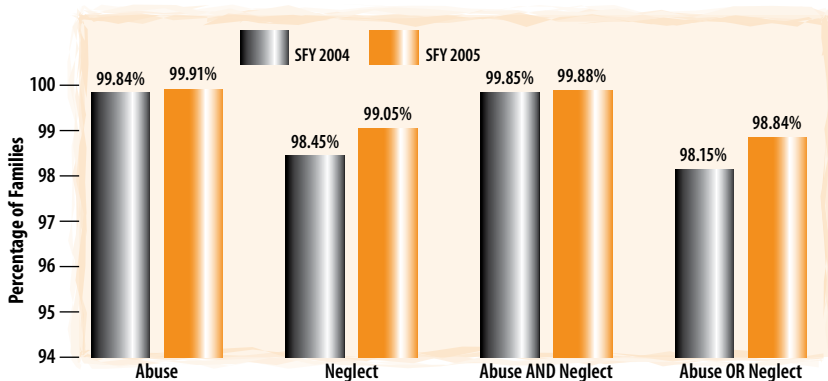
Number of Families Served by Healthy Families



The FSSA Data Warehouse, WRA, working with Healthy Families co-ordinators created a report to measure the success of the HFI program in meeting the biennium goal of 95% of participating families being free of substantiated abuse and neglect.

Healthy Families co-ordinators identified that a family must reach the milestone of 12 visits to be fully engaged with the program and evaluated within the criteria of the report.*

Families Served by Healthy Families and Free of Abuse and Neglect



Starting from July 2003 each fully engaged child of focus within the HFI program is evaluated to determine if the child is a victim of substantiated abuse or neglect in a CPS report; no other children in the HFI family are tracked.

Matches will be reported in the first month the abuse/neglect is substantiated. Once abuse/neglect is found no further matching occurs for that child, avoiding duplication. Unmatched children no longer receiving visits will continue to be matched until age 5.

*Data cannot be traced directly back to specific children, maintaining client confidentiality for both HFI and CPS.

Healthy Families Indiana Training & Technical Assistance Project

Under a contract with Indiana University School of Nursing, HFI Training and Technical Assistance Project (HFI T & TAP) provides statewide training, technical assistance/quality assurance, evaluation, in addition to the data monitoring designed and managed by Datatude. This system supports all the HFI sites and is included as part of Indiana's multi-site credential through Prevent Child Abuse America/Healthy Families America.

In 2005/2006, HFI T & TAP developed a 12-course e-learning curriculum: "Building Blocks for Healthier Families." The curriculum is designed for home visitors who work with pregnant and parenting families and each course meets Healthy Families America (HFA) credentialing standards. The curriculum is available on CD and includes post-testing. Because the courses are not instructor-led, each course can be taken at any time. Courses can be taken by newly hired or experienced staff; used as a refresher; and repeated as often as desired. Courses are engaging, interactive and easy to navigate. In addition to providing information, the courses include checks for knowledge; activities to develop skills in working with families and opportunities to demonstrate newly acquired knowledge and skills.

In FY 2005, 1,091 HFI staff attended 30 HFI T & TAP training events. 273 attended initial training and 818 attended advanced training (including 610 at the Institutes).

All training is designed to meet the needs of staff with various levels of education and experience.

Sixty-percent of HFI staff were 26-44 years old and 56% had some prior experience in home visiting. All supervisors have a college degree and 96% of home visitors (Family Support and Assessment Workers) attended college or had a college degree.



Characteristics of HFI Staff

Position	Age				Education			Ethnicity			Home Visit Experience	
	<26	26-34	35-44	>44	High School	Some College	College Graduate	White	Black	Hispanic	YES	NO
FSW*	25%	33%	24%	18%	3%	41%	55%	80%	11%	7%	56%	44%
FAW**	15%	39%	38%	8%	15%	31%	54%	85%	8%	8%	46%	54%
Supervisor	11%	22%	45%	22%	0	0	100%	89%	0	11%	67%	33%
Total	23%	33%	27%	16%	4%	36%	60%	79%	10%	8%	56%	44%

*Family Support Worker
**Family Assessment Worker

Not all percentages may equal 100% due to rounding.

Institutes for Strengthening Families

The first training "Institute for Strengthening Families" was launched in September, 2004 in collaboration with HFI T&TAP, a team of committed state agency leaders, educators from universities, Head Start, Early Head Start, Child Care, First Steps, and Child Welfare. The purpose of the Institute was to expand capacity, improve the quality of training, demonstrate best practice, and offer intermediate and advanced training to a broad community of providers working with parents of young infants and children in Indiana, as well as other states in the region.

From the response of over 550 participants in 2004, two Institutes were planned for the Spring and Fall of 2005. A major need for training was identified in the areas of domestic violence, mental health, infant mental health, substance abuse and early childhood development. Presenters and trainers recognized as experts in the field presented 44 three-hour seminars over a three-day period. The sessions offered met many of the educational and certification needs of 500-600 participants at the three Institutes.

**The Mission of
Healthy Families Indiana**

The mission of Healthy Families Indiana is to promote supportive environments that optimize child growth and development and encourage resilient, healthy families.



State of Indiana

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