

# KEY IMPLEMENTATION AND SERVICE DELIVERY FINDINGS FROM OREGON'S HEALTHY START PROGRAM 2005-2006

Healthy Start is Oregon's largest child abuse prevention program, providing screening and referral services to over 7,500 families and evidence-based intensive home visiting for 3,332 of Oregon's most at-risk families in fiscal year 2005-06. Healthy Start demonstrates positive outcomes for Oregon's highest risk families, including reducing rates of child maltreatment and increasing children's readiness for school.

Below is a summary of key service delivery and program implementation information for Healthy Start for FY 2005-06. To view the full FY 2005-06 reports, please go to [www.oregon.gov/OCCF](http://www.oregon.gov/OCCF).



## SERVICE CAPACITY REMAINS A BARRIER

The need for Healthy Start Intensive Home Visiting Services is great: Using the current (FY 2006-07) eligibility requirements, 3,980 families screened in FY 2005-06 would have been eligible for Intensive Services. Program capacity allowed enrollment of only 1,231 new Intensive Service families, *only about one-third (31%) of potentially eligible higher-risk families*.

## IDENTIFICATION & SCREENING

- Healthy Start offered services to 10,336 families during FY 2005-06. Fifty-six percent (56%) of all potentially eligible families were contacted, and 40% were successfully screened for risk factors using the New Baby Questionnaire (NBQ).
- Most screening (87%) took place prenatally or within 2 weeks of the baby's birth, exceeding national Healthy Families America (HFA) standards for early risk screening.
- Only 14% of eligible families declined to participate in screening services.

## TARGETING HIGH RISK FAMILIES

- With limited resources, programs appear to be targeting screening efforts towards families with greater demographic risk than Oregon's general population (KidsCount, 2004):
  - 52% of those screened were single mothers, compared to only 32% in the general population
  - 9% of those screened were teen mothers, compared to only 3% in the general population
  - 26% of mothers aged 18 or older had less than a high school education, compared to 20% in the general population.

- Families who then go on to receive Intensive Services are even higher risk. Intensive Service families are significantly more likely to be single-parent households, teen parents, unemployed, and have financial difficulties than families who were screened but did not participate in the home-visiting component:
  - 72% of Intensive Service mothers are single parents
  - 17% of Intensive Service mothers are teen parents
  - 45% of Intensive Service mothers had less than a high school education
  - 38% of Intensive Service mothers were at-risk for depression
  - 92% of Healthy Start Intensive Service parents grew up in homes with at least one parent who had mild or serious problems with substance abuse, mental health, and/or criminal involvement.
- Almost all (90%) parents who are offered Intensive Home Visiting accept these services, even very high-risk families. However, as in many home-visiting programs, long-term retention is a challenge. Even so, almost half (41%) of Intensive Service families who had enrolled in FY 2004-05 remained in service for longer than 1 year. This is comparable to other, similar programs.

## PROGRESS TOWARDS HFA CREDENTIALING

Oregon's Healthy Start program is currently going through an intensive quality assurance and credentialing process through the national Healthy Families America organization. Completing this process will indicate that Healthy Start is in compliance with the highest level of research-based standards of practice for home visiting programs. The HFA model has been listed as a "promising practice" on the RAND Best Practices website ([www.promisingpractices.net](http://www.promisingpractices.net)) based on the results of recent research on accredited HFA programs in the state of New York.

As of March 23, 2007, 11 of the 13 Healthy Start sites randomly selected for site visits by the panel of HFA peer reviewers had completed and passed their credentialing review. The remaining sites, plus the state support system, are due to complete this process in spring 2007. Further, evaluation data show Oregon's Healthy Start program to be in compliance with all but one of the HFA standards that are tracked through the statewide evaluation, including<sup>1</sup>:

- Early screening and identification of potential participants
- Monitoring acceptance and retention rates regularly
- Early engagement of families in home visits
- Completing the recommended number of home visits for enrolled families
- Identification and referral of children with suspected or identified developmental delays
- Ensuring children have a medical care provider

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<sup>1</sup> The only HFA standard that was not met was the requirement that the program offer services to at least 75% of eligible parents; budget constraints make this extremely difficult for Healthy Start, which defines all first-birth families as potentially "eligible."

- Ensuring children have on-time immunizations
- Ensuring families are connected with resources
- Providing a regular mechanism for families to provide input and feedback to the program