

Executive Summary

Overview of Organization

Birth & Beyond is a family support home visitation program implemented in nine community-based sites in Sacramento County. The home visitation program is based on the ABC/Cal-SAHF (Answers Benefiting Children/California Safe and Healthy Families) model developed by the Office of Child Abuse Prevention (OCAP) in the California Department of Social Services. OCAP funds support one Birth & Beyond site and a combination of federal, state and local funds support the remaining eight sites. The Family Support Collaborative (FSC) provides oversight and guidance to the program, authorized by the Sacramento County Board of Supervisors. The FSC and its committees enact standards for the program, policies and procedures, ongoing training and curriculum development and quality assurance. One of the innovative features of Birth & Beyond is its emphasis on continuous quality improvement and outcome evaluation. This is the second annual evaluation report on the program, which began serving families in November of 1999.

Five community-based non profit organizations operate the nine Birth & Beyond sites in communities identified for risk factors associated with child abuse and neglect. Sacramento Children's Home operates five sites: Arden Arcade, Meadowview, North Highlands (in partnership with Family Services Agency), North Sacramento and Valley Hi. La Familia Counseling Center operates the Oak Park site, Mutual Assistance Network operates the Del Paso Heights site, River Oak Center for Children operates the Bret Harte site, and Folsom Cordova Unified School District Foundation (in partnership with the Family Services Agency) operates the Rancho Cordova site. The goal of the program is to create a network of Family Resource Centers to house home visiting, multi disciplinary teams and other services.

Services to Families

Birth & Beyond is designed to provide support to families with young children from pregnancy through the child's fifth year of life. Since its inception in November 1999, Birth & Beyond has received 3,812 referrals from a variety of sources including public health nurses, health providers, community agencies and community members via word of mouth. To be eligible, families must be overburdened by poverty, isolation, health problems or other issues. Among families referred to the program 53 percent report they have unreliable or inadequate income, 52 percent are single parents, 23 percent report unstable housing, 18 percent report feeling isolated.

Characteristics of Referred Families

- 53% unreliable or inadequate income
- 52% single parents
- 23% unstable housing
- 18% isolated

The program is entirely voluntary and not all families accept Birth & Beyond services. Also Birth & Beyond does not serve families who are Children's Protective Services cases. Their families may enter Birth & Beyond after their CPS case is resolved. Of the 3,812 referrals, 43 percent become engaged in the program. As of June 30, 2001, there were 890 active cases in the nine B&B sites, with a caseload capacity of 1,350.

Birth & Beyond clients are young minority women with multiple risk potential. Their characteristics are: 99 percent women and 63 percent under 25 years of age. The women are diverse with 34 percent African American, 30 percent Latino and 24 percent white. Half are first time mothers. Among women who already have children, the average number of children in the home is 2.6.

Once in the program, home visitors work with each family to establish a Family Support Plan based on the needs and wishes of the family. The home visitors ask families to assess themselves using standard screening tools. The results from those six screening tools reveal that

- 87 percent have poor parenting skills
- 49 percent suffer symptoms of depression
- 26 percent report moderate to severe risk of domestic violence
- 25 percent lack adequate social support
- 12 percent report alcohol or other drug issues

The target number of total families the program is funded to serve equals 1,350 or 150 families per site with nine sites. In practice, caseloads in the program have been growing slowly but steadily for the past 18 months. By June 30, 2001, there were 890 active cases. The program has 90 home visitors positions (10 per site). In practice the number of home visitors has ranged from 67 to 80. Caseloads for home visitors are 15; in practice across the program as of June 2001, the average caseload is 11 with a range of 8 to 14 per site.

The Birth & Beyond Model

Sacramento County's Birth & Beyond program elements are based on best practices understood to date for strengths-based family support. Major program elements include:

- Vision of serving families
- A plan of staffing and services
- Record keeping and forms
- Multidisciplinary team case management
- Family Resource Center and Local Collaboration
- Focus on Quality Assurance, Standards and Evaluation

Based on evaluation findings to date (both qualitative and quantitative), there appear to be a set of factors that combine to support implementation of the model. Conversely, some factors work to undermine full implementation. Some factors are beyond the control of the Birth & Beyond providers, some are partially within their control and some are under their control. Factors outside the control of program managers include the supply of qualified staff in the region, such as the shortage of nurses. A second factor outside program control is the presence or absence of a wide variety of service providers in a low income community. A factor under partial control of the providers in the program is the wage rate for home visitors and team leaders. AmeriCorps home visitors are paid equally across sites according to a wage scale adopted by the collaborative. Agency home visitor and team leader pay is under the control of the provider. Factors under provider control which support implementation of Birth & Beyond include:

- Multiple service components for youth and adults so that other members of a family will benefit from B&B participation;
- A history of community connection which fosters trust, eases outreach, increases ability to refer to community resources and helps a site build caseload;
- Proximity of site to program headquarters which fosters ready access to top managers to raise and resolve program issues;
- Culture of parallel process with staff, institutionalizing supportive supervision;
- Supportive agency philosophy -- an organizational culture that promotes staff from within the organization, hires staff from the neighborhood and works from community strengths to build community capacity.

The next chart describes the elements of the model, findings from the evaluation on those elements and the evaluation team's assessment of the progress made so far in attaining fidelity to the model. The level of progress ranges from full implementation to not being implemented. "Full" implementation" means present to a great extent across all sites; "substantial" implementation means present in more than half of the sites; "partial" means implementation is present in less than half of the sites; and "not present" means the feature has not yet been implemented.

Elements of the Birth & Beyond Model

Model Element Description	Evaluation Findings	Model Fidelity Progress
Vision of Serving Families		
Families drive services through Family Support Plan	<i>Random sample</i> of 166 case files (summer 2001) show family plan priorities are education, employment, parenting, housing, health, income, child care and legal issues.	Full
Services are focused on building on family strengths		Substantial
Families are engaged in the program	<i>Length of stay:</i> two thirds of all families stay in program for 90 days or more; total caseload target by site (150): <i>Caseload:</i> (June 2001): 3 sites exceeded 125 cases, one had a caseload between 100 and 125, 4 sites were between 75 and 100, and one site had a caseload between 50 and 75 families. <i>Stability rate</i> of home visitors who remain employed in program: 6 months stability rate 77%; one year, 44%; since inception, 27%.	Partial
Parallel process with families replicated with supportive supervision of home visitors by team leaders and team leaders by program managers	Weekly supervision of home visitors reported in 3 sites; inconsistent in 6 sites; Consistent supervision of team leaders present in 3 sites; inconsistent in 6 sites	Partial
Staffing and Services		
Home visitors are paraprofessionals with extensive training	Home visitor staffing level for program is 90; with 69 home visitors, staffing is at 76% of target. Extensive training through Collaborative; Basic Training model developed; Cornell Curriculum partnership with Los Rios Community College District;	Substantial
Home visitor caseload is 15 families	In June 2001, average is 11 families with range from 8 to 14 depending on site..	Partial
One team leader with clinical training and license supervises 5 home visitors	June 2001: four sites had 2 team leaders; five sites had 1 team leader	Partial
Weekly home visits for level 1 families, less frequent for levels 2 and above	Average number of visits per family per month is 2.4, averaging 53 minutes in length; exceeds national average of 2 visits per month in similar programs.	Full
Baby is 0 to 3 months at entry into the program	Families referred prenatally and soon after the delivery.	Full

Model Element Description	Evaluation Findings	Model Fidelity Progress
Targeted families are overburdened for some reason and reside in target zip codes	Profile of families above indicates that they are the intended beneficiaries of the program and reside in the neighborhoods being served.	Full
Record Keeping and Forms		
Consents developed by collaborative used by all program sites	High level of compliance with consents found in Utilization Review process of QA and Evaluation Committee of FSC.	Full
Screens required by ABC/ Cal SAHF are administered within first 45 working days and entered into MIS for automated scoring	Random case file review showed 58% partially completed; 37% completed screens; (June MIS report) 67% have at least one screen complete in database.	Partial
Family Assessment Form is filled out by home visitors within first 45 days and entered into MIS	Random case file review showed 49% files had complete FAF; (June MIS report) 48% FAF completed.	Partial
Multi-disciplinary Team Case Management		
Multi-disciplinary team of professionals with expertise in public health nursing, mental health, alcohol and drug abuse, welfare to work and child welfare	Shortage of qualified professionals in region has been barrier to county filling all MDT positions -- separate evaluation report on Implementation of the MDT in the program	Partial
Regular case conferencing on all cases, special attention to cases with elevated results on screening tools	Random case file review: 55% of cases had some elevated screen; 74% had some MDT service, usually Public health nurse visit; Utilization Review: 94% cases show MDT referral when appropriate.	Substantial
Family Resource Center and Local Collaboration		
Family oriented resource center that is community based, a source of outreach and access to services for home visiting families and other families in the community	FRC in all sites; vary in size and offerings; 739 classes offered 53% parenting classes; 11% Play 'n Grow groups, 10% personal development. To be expanded with Prop 10 funds 2001/2002.	Substantial

Model Element Description	Evaluation Findings	Model Fidelity Progress
Collaborative approach to creating and maintaining the FRC with input from neighborhood agencies, parents and community members	To be implemented with Prop 10 funds 2001/2002.	Not present
Focus on Quality Assurance, Standards and Evaluation		
Collaborative developed operational standards; policies and procedures; standardized case files; competency standards and quality assurance	Utilization review revealed substantial compliance with policies and procedures.	Substantial
Dual focus -- both services and outcomes address child and care giver	Adopted outcomes and logic models linking activities to expected outcomes: prevention of child abuse and neglect; health, parental efficacy and self sufficiency; school readiness and systems change.	Substantial
Data used for supervision, management, and continuous quality improvement by site managers, county planners and collaborative.	Four sites use data for ongoing management; county planners, collaboration and county departments DHA/DHHS Steering committee review data regularly.	Partial

Program Outcomes

In this second annual evaluation report, the evaluation team reports on outcomes for Birth & Beyond. Birth & Beyond is designed to reduce risk factors for child abuse and neglect and increase family strengths and resiliency. The evaluation team developed five logic models in collaboration with the program that identify critical linkages between family needs, service activities, immediate, intermediate and long term outcomes. The logic models identified four major outcome areas that relate to families and systems change. Much of the data for the outcomes come from program staff gathering data from families and other sources and entering the data in the MIS system provided by the state in the ABC/Cal SAHF program and database enhancements for Birth & Beyond created by the local evaluator. Turnover in site data entry staff and other challenges create gaps in the data that impact reporting on some of the desired outcomes. Program staff, the county, the collaborative and the evaluation team have redoubled their efforts to collect critical data for key outcomes in the program.

The table below shows the immediate, intermediate and long term outcomes in this preliminary analysis.

Preliminary Outcomes for Birth & Beyond

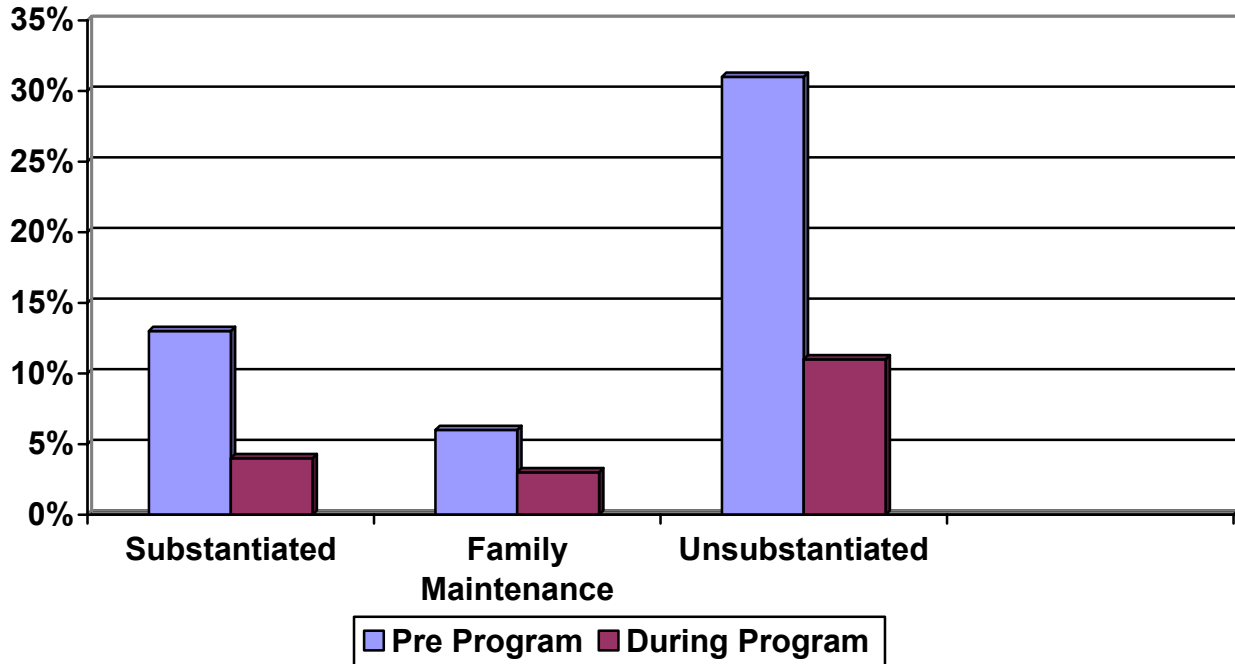
Immediate Outcomes	Findings
Direct services provided	18,347 home visits; 2.43 average number of visits per month per family; 53 minutes average length; monthly MDT services (June 2001) 646 services to 591 families; 400 classes offered at FRC; average attendance: 5 per group.
Indirect services provided -- referrals for outside services	808 referrals for families at intake to Birth & Beyond; 1,221 referrals for families to resources outside Birth & Beyond; total number of families receiving outside services: 2,029
Access to health care	54% of families had baseline health assessment by public health nurse; <ul style="list-style-type: none"> □ 71% had one visit to the doctor in the previous year; 16% reported calling their doctor at least once; 26% used Emergency Room; □ 82% on MediCal; 9% have an HMO; "other" coverage 4%; Healthy Families 1%. Private insurance 1%; no insurance 2%
Immunizations	29% of families with infants 0 to 18 months have records in database; need more information
Child Abuse Treatment Services (CATS)	53 families received individual counseling from CATS specialist; 65 families received group counseling.
Service Utilization follow up on referrals	Selected tracking to begin year 3
Long Term Outcomes	Findings
Length of service	Among 760 closed cases: 24% stayed in program 6 months or more; 29% stayed 3 to 6 months; 46% stayed in program less than 3 months.
Reports to CPS – please see below for details	Substantiated abuse or neglect: 13% of families pre Birth & Beyond; 4% during Birth & Beyond and 9 % post-program. Family Maintenance: 6% pre Birth & Beyond; 3% during B&B 3% post-program. Unsubstantiated: 31% pre Birth & Beyond; 11% during, 20% post-program. All contact with CPS: 35% pre program; 13% during program; 24.7% post- program

The evaluation team selected a random sample of 300 cases from Birth & Beyond who had been in the program at least 90 days. Among the 300 families, 211 of these cases were still open in the program and 89 of these cases had closed. With the cooperation of the Sacramento County Department of Health and Human Services, the evaluation team staff researched the involvement of these 300 families in the Child Welfare System before, during, and after their Birth & Beyond program involvement. The involvement of the families was characterized in three categories from low to high risk: unsubstantiated allegation of abuse or neglect, Family Maintenance either voluntary or involuntary (court-ordered) and substantiated allegation of abuse or neglect.¹ The following charts show the CPS involvement of the families in the random sample.

Thirty-five percent of families in the sample had some contact with CPS for up to five years prior to entering Birth & Beyond. Once they entered into Birth & Beyond, family involvement with all forms of CPS declined. Substantiated allegations had occurred in 13 percent of families prior to entering the program, declined to 4 percent during the program, and 9 percent after program closure.

¹Substantiated allegations means that CPS confirmed abuse or neglect following their investigation and the Family Court intervened. The court may have ordered CPS supervision through involuntary family maintenance or ordered removal of the child from the home until the family meets court ordered conditions through Family Reunification. Family Maintenance can be voluntary (by family choice) following a reported incident or involuntary court ordered, following a substantiated allegation of abuse or neglect. Families in Family Maintenance receive CPS social worker supervision to reduce the risk of abuse or neglect to the child. Unsubstantiated allegations of abuse or neglect are those cases in which a report of suspected abuse or neglect was made to county authorities and one of two things happened. Either the reported incident did not seem serious enough for authorities to investigate further, or upon investigation the allegation was determined not to be true.

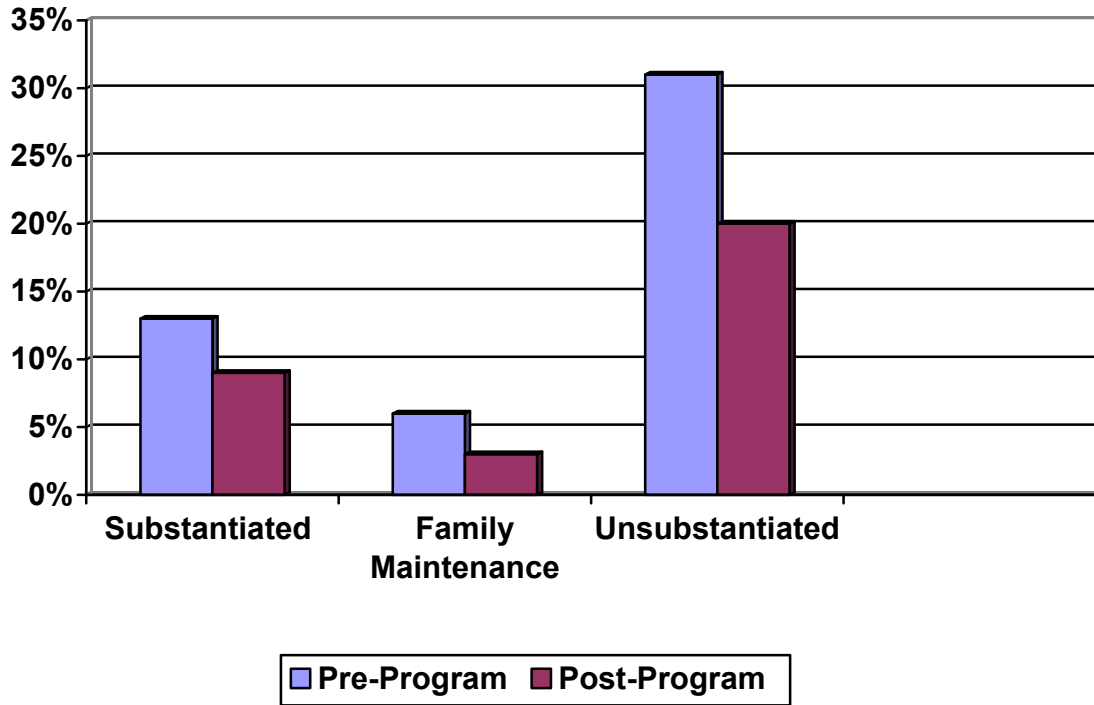
Involvement in CPS



For the 89 closed cases, 9 percent had subsequent allegations that were substantiated. Family Maintenance both voluntary and involuntary dropped by half once families were engaged in Birth & Beyond. Unsubstantiated cases dropped from 31 percent pre-program to 13 percent during the program and 20 percent after the case closed.

The evaluation team noted certain factors associated with higher risk for CPS involvement: teen mothers, first time mothers, and TANF recipients had a somewhat higher rate of CPS records compared to the total pool of Birth & Beyond families. One of the required screens for the program, the Conflict Tactics Scale (CTS), was associated with CPS involvement: 59 percent of families with CPS records had elevated scores for the severe risk for domestic violence. Across all Birth & Beyond families, 12 percent fall into this category on the CTS. Also, between 41 and 45 percent of families with CPS records had elevated scores for maternal depression, lack of social support and poor parenting skills.

Involvement in CPS



CPS Involvement of Birth & Beyond Families

Type of involvement	Pre Program (n=300)	During Program (n=300)	Post Program (n=89)
Substantiated	13%	4%	9%
Family Maintenance	6%	3%	3%
Unsubstantiated	31%	11%	20%
Total ²	35%	13%	25%

The evaluation team examined the records of teen mothers in CPS and found that they had a higher rate of pre-program substantiated abuse and experienced a drop in involvement with the system.

² Families may be counted in more than one type of involvement in CPS.

CPS Involvement of Birth & Beyond Teen Mothers

Type of involvement	Pre Program (n=84)	During Program (n=84)	Post Program (n=33)
Substantiated	21%	2%	9%
Family Maintenance	7%	0	0
Unsubstantiated	44%	12%	20%
Total ³	73%	15%	18%
Number of families	84	84	33

Nearly three-quarters (73%) of the teen mothers in the sample had had some contact with CPS prior to joining Birth & Beyond. However, it is very important to note that of those young women, 81 percent of those reports identified a perpetrator who was involved someone other than the young teen mother, her mother, an adult male, or another household member. Involvement in CPS dropped from 73 percent pre program to 15 percent during the program for the sample of 84 teen mothers. For the 33 teens no longer in Birth & Beyond, 18 percent had new CPS contacts, only half of which (9%) was substantiated. Birth & Beyond holds the promise of breaking intergenerational cycles of abuse and neglect with teen mothers.

Conclusions

Birth & Beyond has been fully operational for 18 months. Caseload build-up has been slow and steady, yet remains below full capacity. Families referred and engaged in the program present many and varied risks for child abuse and neglect. Through home visitation and center-based services, families engaged in the program for at least 90 days, have substantially reduced risk for child abuse and neglect.

³ Families may be counted in more than one type of involvement in CPS.